We have survived this before

~ A poem by Kitty O’Meara’s

And the people stayed home..

And the people stayed home. And read books, and listened, and rested, and exercised, and made art, and played games, and learned new ways of being, and were still. And listened more deeply. Some meditated, some prayed, some danced. Some met their shadows. And the people began to think differently.

And the people healed. And, in the absence of people living in ignorant, dangerous, mindless, and heartless ways, the earth began to heal.

And when the danger passed, and the people joined together again, they grieved their losses, and made new choices, and dreamed new images, and created new ways to live and heal the earth fully, as they had been healed.
Lessons learned and positive public health changes after the 1918 flu pandemic

- Pandemic killed at least 50 million people; 2.5% of the world’s population, according to estimates
- Centralized public healthcare systems created in Russia, Germany, France and the UK, with the US choosing employer-based insurance
- Revamped public health ministries
- International public health coordination leading to the development of the World Health Organization
Agenda

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

<table>
<thead>
<tr>
<th></th>
<th>New Cases since May 5</th>
<th>Cumulative Cases</th>
<th>Cumulative Hospitalized</th>
<th>Cumulative Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>United States</strong></td>
<td></td>
<td>1,171,510 (5/5)</td>
<td></td>
<td>68,279 (5/5)</td>
</tr>
<tr>
<td><strong>Maryland</strong></td>
<td>1046</td>
<td>28,163</td>
<td>20%</td>
<td>1338</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Age Group</th>
<th>30-39</th>
<th>40-49</th>
<th>50-59</th>
<th>60-69</th>
<th>70-79</th>
<th>80+</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Case rate (per 100,000)</strong></td>
<td>598.60</td>
<td>648.89</td>
<td>576.45</td>
<td>550.64</td>
<td>661.84</td>
<td>1037.17</td>
</tr>
<tr>
<td><strong>% of cases hospitalized</strong></td>
<td>9.83</td>
<td>14.37</td>
<td>21.72</td>
<td>30.96</td>
<td>41.76</td>
<td>31.77</td>
</tr>
<tr>
<td><strong>Rate hospitalized (per 100,000)</strong></td>
<td>58.83</td>
<td>93.25</td>
<td>125.19</td>
<td>170.47</td>
<td>276.38</td>
<td>329.51</td>
</tr>
</tbody>
</table>
Growth of COVID-19 in Maryland

![Graph of Total # of COVID-19 Cases in Maryland](image)

![Graph of Total # of COVID-19 Deaths in Maryland](image)
Deaths by Day
COVID-19 Fatalities

Total Deaths In Maryland: 1,281

Gender:
- Female: 566
- Male: 616

Age Group:
- 20-29: 8
- 30-39: 83
- 40-49: 186
- 50-59: 252
- 60-69: 506
- 70-79: 61
- 80+: 53
- Unknown: 6

MDH Region:
- Capital: 587
- Central: 416
- Southern: 64
- Eastern Shore: 18
- Western: 59
- Unknown: 0

Race and Ethnicity:
- White: 486
- Black: 500
- Hispanic: 78
- Unknown: 61
- Asian: 18
- Other: 0

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: 8
- Confirmed Resident Cases: 3,272
- Confirmed Resident Deaths: 508
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)
Governor Hogan’s Statement 5/6/20

- Achievements:
  - Expanded testing
  - More beds for surge capacity
  - PPE supply is growing increasing
  - Hiring hundreds of contact tracers

- Electives may start at the discretion of healthcare providers; staff and patients must be screened, and physical distancing must be maintained in waiting areas

- Walking, running, biking, golf, tennis, boating, fishing and camping are allowed

- Closed activities at state parks and beaches reopening for exercise
State Launches Maryland PPE Network Supplier Portal

- 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
- Large daily deliveries come into the state’s warehouses
- For additional business resources during COVID-19, visit [businessexpress.maryland.gov/coronavirus](http://businessexpress.maryland.gov/coronavirus)
HRSA COVID-19 Uninsured Program Portal

- New [COVID-19 Uninsured Program Portal](https://COVIDUninsuredClaim.HRSA.gov) - Healthcare providers can claim reimbursement for testing and treating uninsured individuals for COVID-19

- Providers will be reimbursed, generally at Medicare rates, subject to available funding. Steps will include:
  - Enrolling as a provider participant
  - Checking patient eligibility
  - Submitting patient information
  - Submitting claims
  - Receiving payment via direct deposit

- More info at [COVIDUninsuredClaim.HRSA.gov](https://COVIDUninsuredClaim.HRSA.gov) and the Provider Support Line at [866-569-3522](tel:866-569-3522).
ImmuNet – sign up NOW to receive COVID-19 vaccine once developed

- Secure web-based MDoH registry
- Essential to register NOW to receive vaccine when one will be ready
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

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The Next Phase - Highlighting Best Practices

- Delivering Care Safely during ongoing community transmission
- Protecting Staff and Providers
- Catering to the most Vulnerable Populations
- Routine Care for Chronic Conditions
- Immunizations - routine and COVID-19
- Laboratory Monitoring
- COVID-19 Testing
- COVID-19 Follow-up
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
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

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

MedChi approved: 3.5 AMA PRA Category 1 Credits™
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

❖ Learn from our [Frequently Asked Questions page](#)

❖ Friday: Dr. Alex Mohseni on Remote Patient Monitoring

❖ Future Spotlights
  ➢ Specialty Care & Guest Practitioners
  ➢ Behavioral Health Wednesdays
  ➢ Minority Healthcare & Outcomes Disparities – May 11, 18, 25
  ➢ Pediatrics – May 15 (11:30 am-12:30pm)

❖ Today: Dr. Kelly Coble, Program Director Telemental Health Program, U of MD School of Medicine (Introduced by Dr. Aliya Jones, Deputy Secretary Behavioral Health, MDoH)
Supporting our Patients and Ourselves During COVID 19

Kelly Coble, LCSW-C
MD BHIPP & MACS (Maryland Addiction Consultation Service)
Program Director, Telemental Health Program
University of Maryland School of Medicine Baltimore,
Department of Psychiatry
kcoble@som.umaryland.edu
Objectives

By the end of this session, learners will be able to:

1. Identify 3 emotional responses that individuals may experience during COVID-19.
2. Give advice to patients to establish and maintain healthy routines.
3. Name 3 resources and/or strategies to promote mental health during COVID-19.
• Worry and fears about:
  • Health of self and loved ones
  • Financial concerns
• Changes in sleep and eating patterns
• Difficulty concentrating
• Increased substance use
• Increased physical complaints (e.g., headaches, body pains)
• Regression to things children did when they were younger
Coronavirus is Impacting Parenting Capacities

Figure 1. Parents are Spending More Time in Activities with Their Children Since Coronavirus

Figure 3. Parenting Stress and Worries Since Coronavirus

- Worries get in the way of parenting: 18% Often, 34% Sometimes, 48% Never
- Social isolation/social distancing makes it difficult to parent: 20% Often, 30% Sometimes, 50% Never
- Financial concerns get in the way of parenting: 21% Often, 28% Sometimes, 51% Never
- Sadness makes it harder to care for my children: 11% Often, 24% Sometimes, 65% Never
- Loneliness gets in the way of taking care of my children: 8% Often, 19% Sometimes, 73% Never

Parenting During the Coronavirus Pandemic

Figure 4. Parental Punishment Since Coronavirus

<table>
<thead>
<tr>
<th></th>
<th>A few times or more</th>
<th>Once</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>Took privileges away</td>
<td>43%</td>
<td>19%</td>
<td>38%</td>
</tr>
<tr>
<td>Shouted, yelled, screamed at child</td>
<td>41%</td>
<td>20%</td>
<td>39%</td>
</tr>
<tr>
<td>Put child in time-out</td>
<td>39%</td>
<td>19%</td>
<td>42%</td>
</tr>
<tr>
<td>Spanked or slapped child</td>
<td>12%</td>
<td>8%</td>
<td>80%</td>
</tr>
</tbody>
</table>

Figure 5. Many Parents are Reporting Increased Child Discipline Since Coronavirus

- More conflicts: 25%
- Yelled at/screamed children more often: 19%
- Increased discipline: 15%
- Used harsh words more often: 9%
- Spanked or hit more often: 5%
What Parents are Saying about Parenting during the Coronavirus Pandemic...

• “My younger child is autistic and is struggling with the big changes happening as well as the loss of his therapies. He is more anxious & aggressive than usual.”
• “They [my kids] are confused. They don't understand fully the dangers of a pandemic. They want to play with their friends and are getting annoyed with the same routine at home, and playing only with each other. We are also rationing food and household items, and they are anxious and scared by that. I can see it in their faces and their volunteering to make sacrifices for us.”
• “We are suddenly responsible for 1/3 of the school year's education and we are lost.”
• “I feel I've been somewhat distant even though I've been spending more time with the kids than ever.”

Being Supportive of Parents Efforts During the Pandemic

• In the context of Coronavirus, parents are being asked to take on many new responsibilities, often with limited resources
• Validate parents feelings/concerns – “It’s ok to feel anxious/scared/angry/lonely right now”
• Praise parents for their efforts to keep their families safe, healthy, and happy – “I know this is not an easy time for you and your family, but you are handling it the best way that you can”
• Connect parents with support:
  – *Baltimore Providers: 24 Hr Parenting HelpLine 1-800-243-7337, The Family Tree*
Supportive Strategies: Regular Routines

• What are routines?
  – Behaviors that are regularly practiced
  – Examples: reading to children before bed, daily chores, maintaining hygiene practices, eating dinner together
  – Build in time for social connection (particularly for individuals who may be alone)

• How does this help?
  – Help children feel safe and in control of their lives
  – Reduces stress
  – Provides structure and prevent boredom
Attend to Emotional and Mental Well-Being

- Limiting media exposure
  - Children
  - Older Adults
  - All of us!

- Maintain regular sleep schedule
- Try to eat healthy foods
- Take a break to breath and relax

- Maintain social connections (despite social distance)
  - Phone
  - Video
**Calm Down with Take 5 Breathing**

1. Stretch your hand out like a star.
2. Get the pointer finger of your other hand ready to trace your fingers up and down.
3. Slide up each finger slowly - slide down the other side.
4. Breathe in through your nose - out through your mouth.
5. Put it together and breathe in as you slide up and breathe out as you slide down.

Keep going until you have finished tracing your hand.
Role of Physician Leaders

• Supporting Physician and Staff Emotional Well Being
  – EAP program

• Encouraging Social Connection
  https://www.peerrxmed.com/

• Implementing the use of Telemedicine when possible to increase ease and access for patient and provider

Increased Safety Concerns During COVID 19

• Increase in stress due to loss of resources
• Loss of access to shelters
  – Worry about going to the ER
• Loss of connection to support systems
• Change in way patients can access BH services
  – BH/SUD care considerations

National Domestic Hotline | (800) 799-7233
Crisis Text Line | Text HOME to 741741
Resources

• Alcoholics Anonymous Online Groups:
  – https://www.aa.org/pages/en_US/options-for-meeting-online

• Narcotics Anonymous Online Meetings:
  – https://virtual-na.org/

• Maryland Department of Health, Behavioral Health Administration resource listing:
  https://app.smartsheet.com/b/publish?EQBCT=a47b214c02f145caabe091beb1ff816a

• Suicide Hotlines:
Strategies to Help Families During Coronavirus: Resources for Safe Online and Offline Activities for Children

Reading Activities
• Free children’s stories: stories.audible.com
• More stories: https://www.storylineonline.net/
• Free books for young children: https://imaginationlibrary.com/
• For older children: https://about.readworks.org/parents.html

Math and Science Activities
• Math activities: http://bedtimemath.org/fun-math-at-home/
• Science activities: https://californiasciencecenter.org/stuck-at-home-science
• For older children: https://about.readworks.org/parents.html

Physical activities
• Helping kids stay active: https://www.gonoodle.com
• Mindfulness/yoga for kids: https://cosmickids.com
• https://www.yoremikids.com/app
• https://fluencyandfitness.com/

Other Fun and Educational Activities
• https://pbskids.org/
• https://www.education.com/games/
• https://www.starfall.com/h/
• https://www.khanacademy.org/
• https://www.abcmouse.com/
• https://www.adventureacademy.com/

Specific to COVID-19
• https://sesamestreetincommunities.org/topics/health-emergencies/
References


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
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 AWV 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 they are being referred
- Seniors, their families and friends may call 211 to seek help and referrals to the elderly in need
- Operates in Kent, Queen Anne’s, Talbot, Caroline, Dorchester, Somerset, Wicomico, and Worcester Counties with plans to expand elsewhere
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/](https://mdresponds.health.maryland.gov/)
  - Complete Road to Readiness
General Guidelines

Staying Current - Sources

- CDC
- MDH COVID-19 information page
- MDPCP COVID-19 webpage
- Local Health Departments
- CONNECT
- Clinician Letters
- Multiple Resource Links in Appendix
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](https://www.sba.gov) 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

ницы 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

Free meals available from 42 rec centers in Baltimore
- Call 311 for locations and to schedule pickup time
Resources for Specific Groups


Resources

Resources and References

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
e-mail fpaaworkflowcoordinator.commerce@maryland.gov.