



COVID-19 Daily Update

Maryland Department of Health
Maryland Primary Care Program
Program Management Office

20 May 2020

COVID-19

The battle for health and the economy



Submit your photos to Mdh.pcmode@maryland.gov



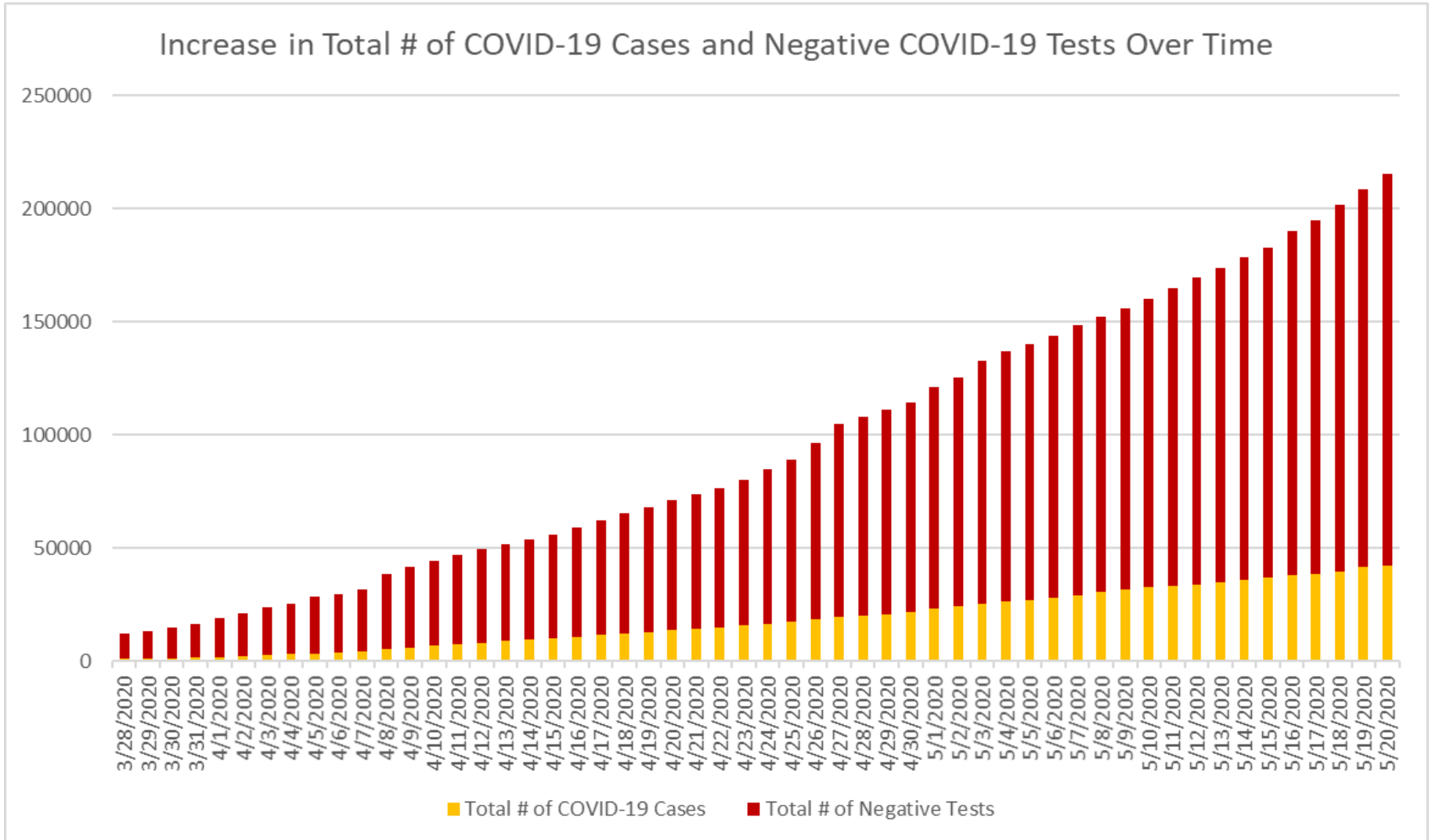
Agenda

- ❖ Today's Morbidity and Mortality Data Update
- ❖ Reopening the State
- ❖ Keeping our Patients Safe during Recovery
- ❖ Patient Communication
- ❖ Testing
- ❖ Contact Tracing
- ❖ Guest Speaker- Behavioral Health
- ❖ Q & A
- ❖ Resources Appendix

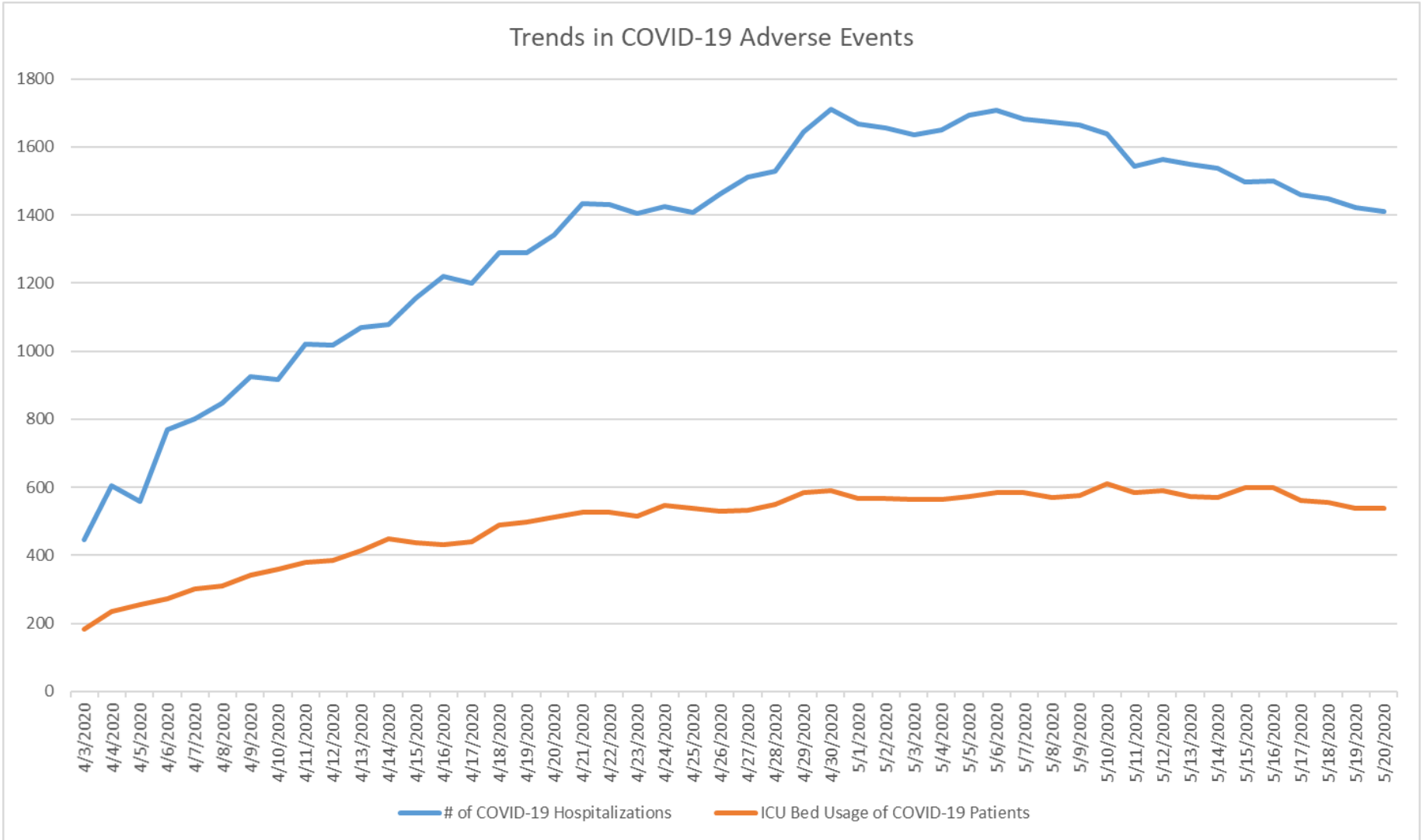
Morbidity and Mortality Update

	New Cases since May 19	Cumulative Cases	Cumulative Hospitalized	Cumulative Deaths
United States		1,504,830 (5/19)		90,340 (5/19)
Maryland	777	42,323	17.3%	2004

COVID-19 Growth in Maryland

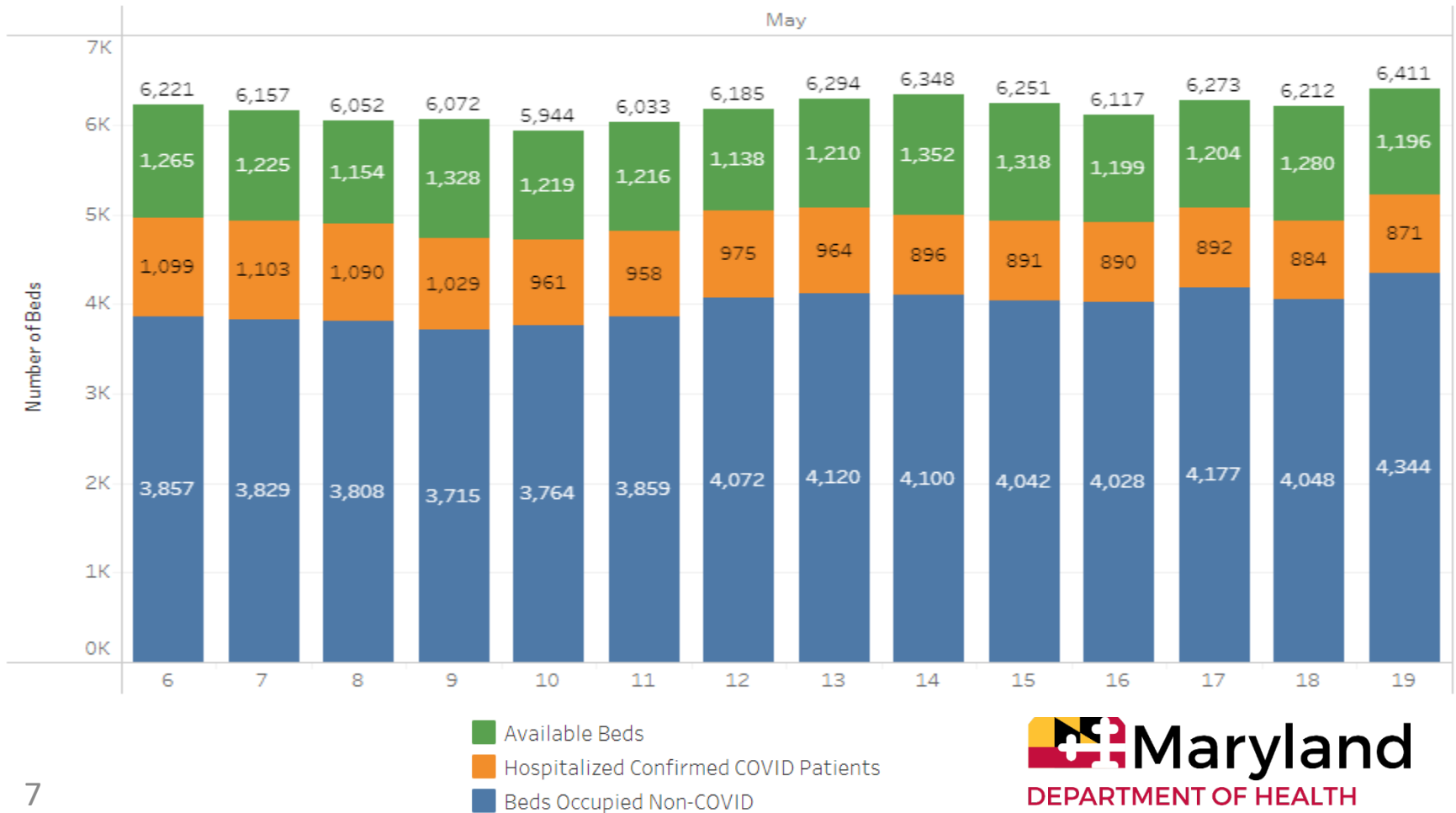


COVID-19 Hospitalizations



Hospital Capacity and Usage

Occupied Staffed - Adult Acute Care



Maryland COVID-19 in Congregate Facility Settings

Confirmed Staff Cases

2,474

Confirmed Staff Deaths

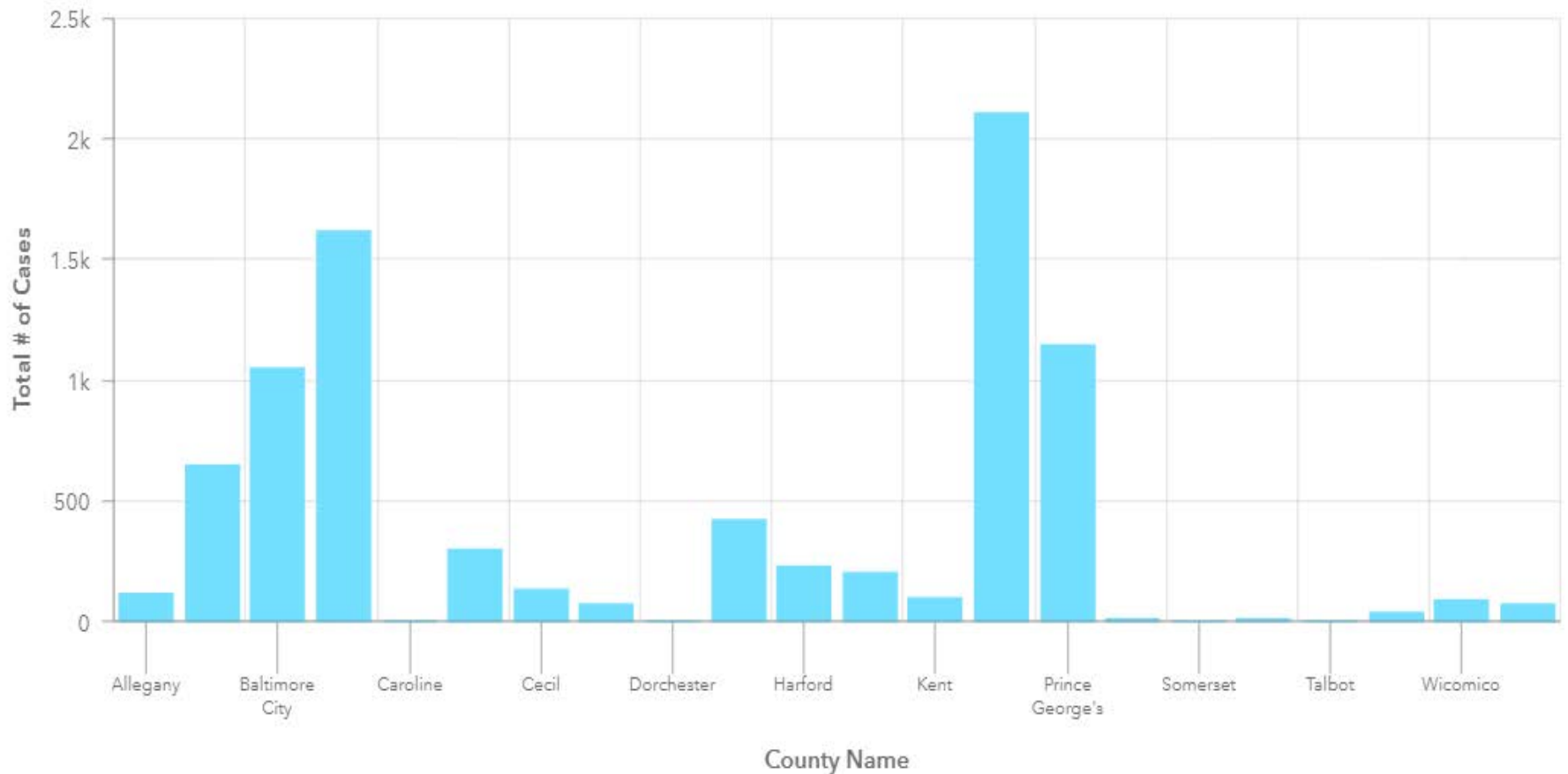
12

Confirmed Resident Cases

5,847

Confirmed Resident Deaths

1,123



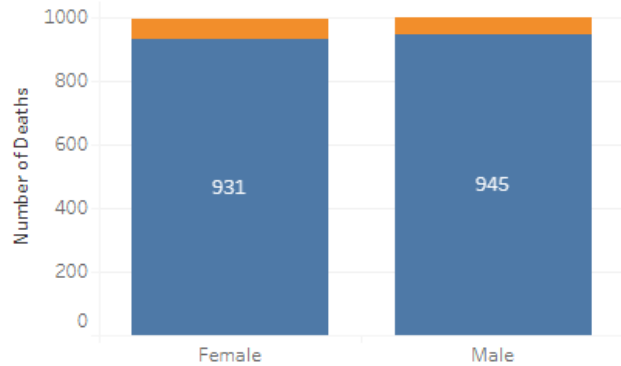
Maryland COVID-19 Fatalities

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

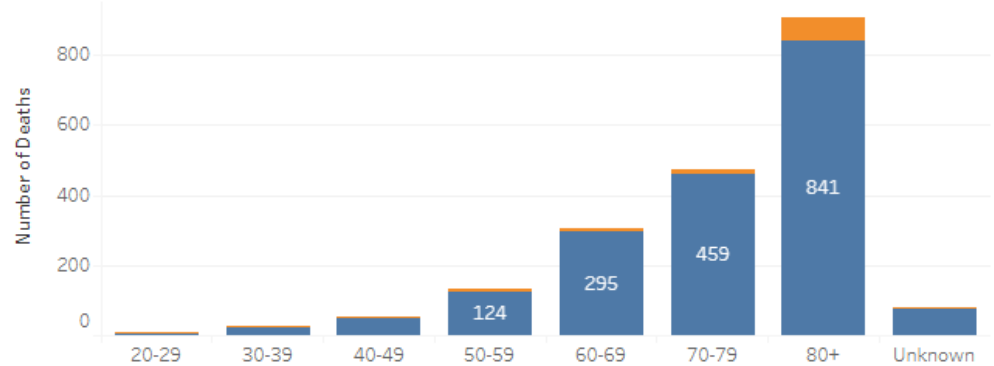
Total Deaths In Maryland: **1,992**

Case Type
 ● (All)
 ○ Confirmed
 ○ Probable
 ■ Probable
 ■ Confirmed

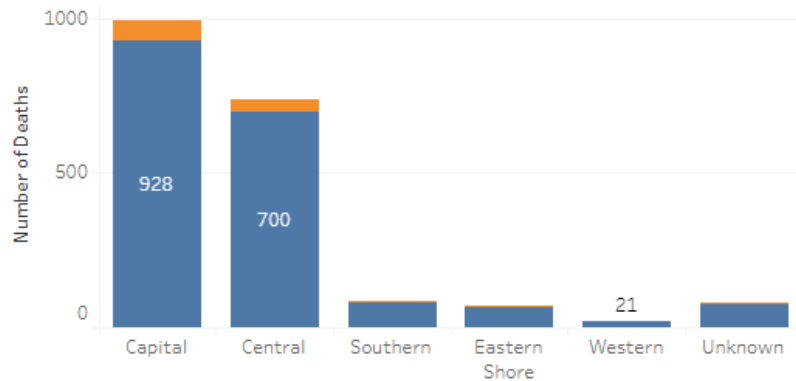
Gender



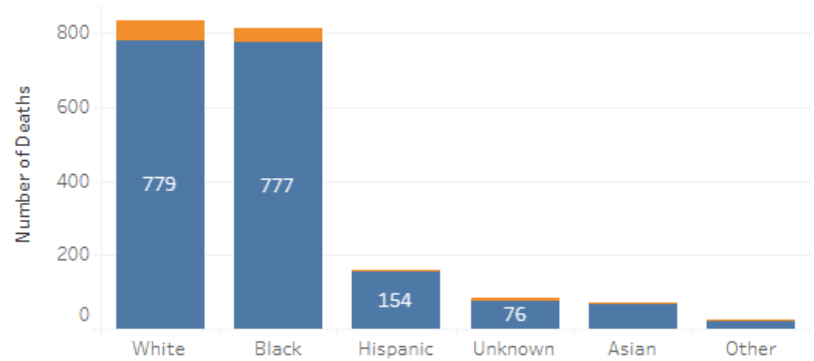
Age Group



MDH Region



Race and Ethnicity



Death Data available through 5/17/2020

New/Current Governor Directive

May 19, 2020 - Testing

- ❖ Effective May 19, 2020, individuals can be tested:
 - Free of charge
 - With or without symptoms
 - Without appointment or clinician referral
 - At some VEIP locations (starting May 21 at the Timonium Fairgrounds in Baltimore County, from May 22 at the Glen Burnie and Hyattsville sites, and the Clinton site beginning next week of May 25th)
- ❖ Licensed pharmacists are authorized to directly order and administer testing
- ❖ Additional MD COVID testing FAQs [weblink](#)

Phases of Recovery

"This is not the end, it is not even the beginning of the end, but it is perhaps the end of the beginning."

Winston Churchill, Nov 1942

- Phase 0 - we are leaving this phase:
 - Virus was recognized after cases in the US
 - Rapid rise in cases, hospitalizations, and deaths
 - Virus spread quickly until mitigation and prevention in place
 - Strong mitigation - social distancing and stay-at-home orders
 - Virus has less ability to spread; hospitalizations and deaths decline
- Phase 1- we are entering this phase- the beginning has ended...
 - Virus and community transmission still present
 - Hospitals prepared for surge
 - Testing expanded
 - Contact tracing expanded
 - Community moving and businesses opening
 - Expanding access to face-to-face visits amid pent-up demand
 - Vulnerable patients remain at high risk
 - [American Medical Association physician guide on reopening medical practices](#)
 - [Medical Group Management Association COVID-19 Medical Practice Reopening Checklist](#)

**I will keep you safe and you will keep me safe
Together we will stay safe and restore the economy**

Businesses that
will keep their
employees and
customers safe



Neighbors who
will keep their
neighbors safe

High risk
public will
stay out of
harm's way

Hand Hygiene-Face coverings- Social distancing- Screen and Test

GOVERNOR
LARRY HOGAN

A stylized signature of Governor Larry Hogan.



Maryland
DEPARTMENT OF HEALTH

Step One: Design Workflows with Team

- ❖ PPE adequacy
- ❖ **Communications**
- ❖ Appointment workflow
- ❖ Registration workflow
- ❖ Rooming workflows, depending on conditions
- ❖ Discharge workflow
- ❖ Care management
- ❖ Workflows for high-risk, vulnerable patients
- ❖ Immunizations
- ❖ Lab testing
- ❖ Staff outage scenarios

Communications

❖ Patients

- New processes and workflows
- Face coverings, hand hygiene
- Registration
- Risk accommodations for vulnerable patients
- Contact tracer interface
- Testing
- Signs, emails, portals, web postings

❖ Staff

- Workflows
- Assignments
- Risk levels, accommodations

Considerations when Reopening a Practice

Staff and Patient Safety

- Health screen questions and temp check upon entry, staff and patients receive a label/sticker to indicate they are clear
- Staff wear proper PPE (e.g. N95s, eye protection, gloves, etc.) at all times
- Patients wear face masks
- Staggered staff break times
- No public bathrooms open
- N95 reuse: 3 staff - 3 bag
CDC recommendations

Appointments and Scheduling

- Limit patients and providers to maintain distance
- Lengthen appointment times to allow adequate time to thoroughly clean and disinfect patient rooms after each visit

Registration, Waiting Rooms, and Intake

- Consider elimination of waiting room or reducing usage of waiting room
- Reduced capacity waiting rooms must be cleaned and disinfected frequently
- Patients check in and check out via phone
- Patients to wait in car until ready and are roomed immediately

Patient Care

- Split office space between sick rooms and well rooms
- Maintain as much distance from patient as possible until physical exam

PPE Considerations

- ❖ Sources
- ❖ PPE for staff
- ❖ PPE for patients
- ❖ PPE use optimization/reuse parameters
- ❖ Differential PPE for testing, aerosolized procedures, etc.
- ❖ Differential PPE for vulnerable staff/patients
- ❖ PPE “burn rate”

Governor Hogan Directive – May 6, 2020

PPE Conservation Order

Subject to availability, all healthcare providers are required to immediately implement the CDC Strategies to Optimize the Supply of PPE and Equipment:

1. Use facemasks beyond the manufacturer-designated shelf-life during patient care activities
2. Implement limited re-use of facemasks. The healthcare provider must not touch the outer surfaces of the mask during care, and mask removal and replacement must be done in a careful and deliberate manner
3. Prioritize facemasks for:
 - i. Essential surgeries and procedures
 - ii. During care activities where splashes and sprays are anticipated
 - iii. During activities where prolonged face-to-face or close contact with a potentially infectious patient is unavoidable
 - iv. Performing aerosol generating procedures, if respirators are no longer available
4. Exclude healthcare providers at higher risk for severe illness from COVID-19 from contact with known or suspected COVID-19 patients

Contact Tracing Testing Interface

❖ Contact Tracing

- Isolate households of positives
- Isolate PUIs pending results
- Tracers will reach out to contacts for positive tests

MDPCP Staff Training Academy



MedChi approved: 3.5 AMA PRA Category 1 Credits™

PY2 MDPCP Practices: Virtual Training 002

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

Resources in the Appendix Slides

❖ Patients

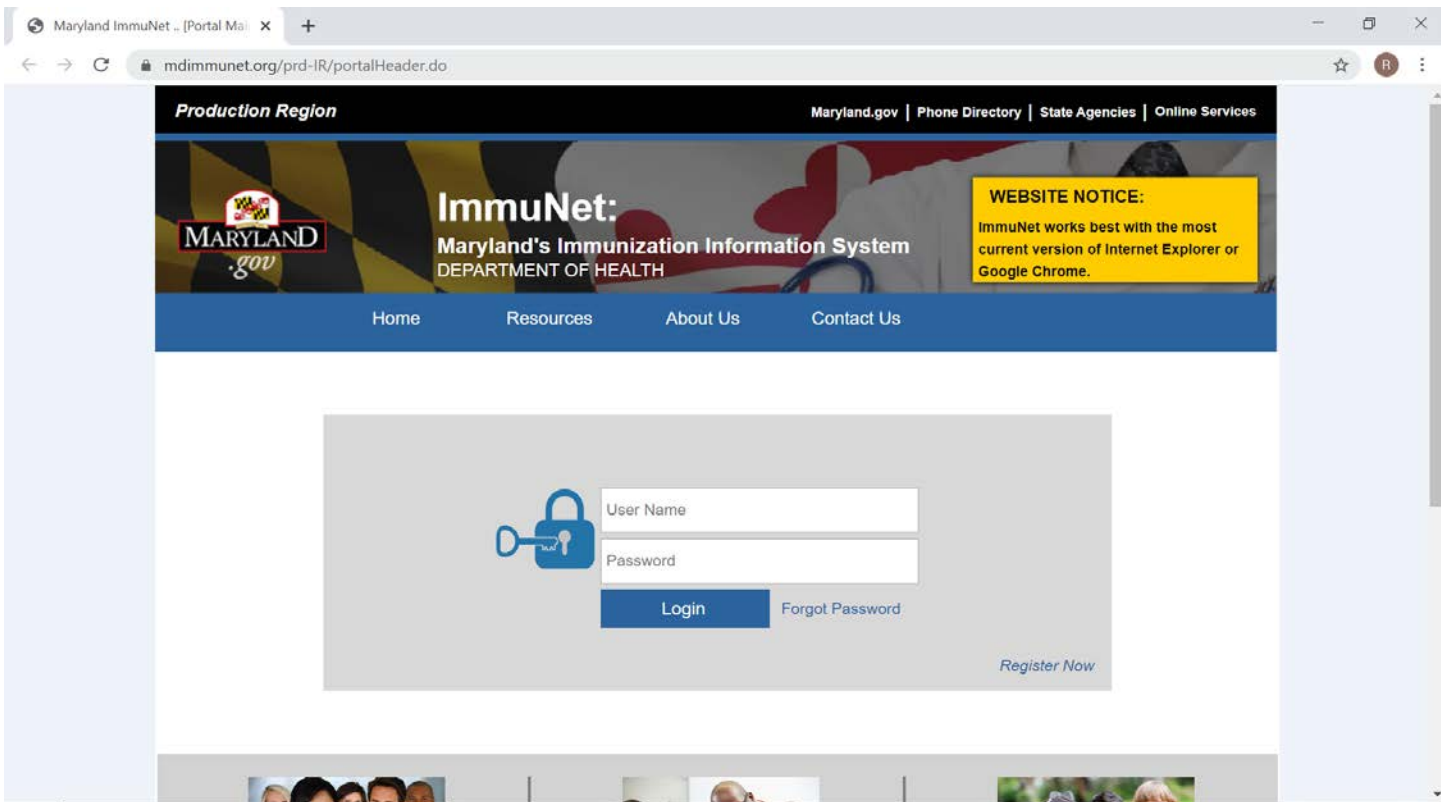
- Meals on Wheels
- Caregiver Services Corps
- Senior Call Check Program

❖ Providers

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

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



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

- ❖ Learn from our [Frequently Asked Questions page](#)
- ❖ Future Spotlights
 - Specialty Care & Guest Practitioners
 - Behavioral Health Wednesdays
 - Minority Healthcare & Outcomes Disparities – May 25
- ❖ Today:
 - Shobhit Negi, MD, Clinical Director, Juvenile Section, Circuit Court for Baltimore City

*Be STRONG enough
to stand alone,
SMART enough to
know when you need
help and BRAVE
enough to ask for it*

Shobhit Negi, M.D.

May 20, 2020

Stress is ubiquitous; however, more intense nowadays

- We all know working as a healthcare professional can be exhausting, frustrating, and stressful.
- Vicarious trauma or compassion fatigue or secondary traumatization-It is the “cost of caring” for others.
- Intellectualization-a defense mechanism where thinking is used to avoid feeling. It involves removing oneself emotionally from a stressful event.

Everything in life is about balance

-Resilience is defined as the process of adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress.

-Resilience exists on a continuum that may present itself in differing degrees across multiple domains of life.

Developing resilience

- Personal process
- Resilience is not a single dichotomous outcome measured at a point.
- Learn multiple techniques to enhance resilience

Different resilience resources

INDIVIDUAL- *WHAT DO I DO WHEN TIMES GET HARD?*

COMMUNITY-*WHO HELPS ME WHEN TIMES GET HARD?*

EXISTENTIAL- *WHO DO I WANT TO BE WHEN THIS IS OVER OR WHAT WILL IT HAVE MEANT FOR ME?*

Self-awareness

- ▶ If we are not aware of something, we cannot change it.
- ▶ Ways to become self-aware-Be receptive to others feedback, reflective writing, identify your emotional kryptonite, do some micro travel, learn a new skill, etc.

Self-compassion

-We often tend to be hard on ourselves.

-Compulsive and perfectionistic traits.

-Any criticism is like a knife to ones heart.

Self-care

- Prioritize yourself.
- Get into a habit of taking care of yourself.
- Figure out something for your physical and emotional health.
- Exercise-apps that cover all the major muscle groups.
- Learn at least one relaxation/grounding technique.

Perspective

- Stress is harmful to your health-only if you believe it to be so.
- Bookend day: AM-gratitude (what I am grateful for, stable job, wonderful family), PM-3 good things (writing down or saying 3 good things).
- Humor-sense of humor correlates with a degree of compassion.
- Relationships-Very important for well-being.

Making a difference

- Many of us enter medicine because we want to make a difference.
- Sympathy/Empathy/Compassion.
- Make a difference everyday with every patient that you see-how you listen, how you respond, the words that you chose.

Learning to play the guitar

- ▶ Resilience can be strengthened with practice.
- ▶ Like building a muscle, increasing your resilience takes time and intentionality.
- ▶ Research has found that up to 70% of people experience positive psychological growth from difficult times, such as a deeper sense of self and purpose, a greater appreciation for life and loved ones, and an increased capacity for altruism, empathy, and desire to act for the greater good.

Help your patients get health coverage

Maryland Health Connection, the state's health insurance marketplace, has a Coronavirus Emergency Special Enrollment Period until June 15 for uninsured Marylanders. All plans on Maryland Health Connection cover testing and treatment of COVID-19.

❖ How to enroll

- Enroll online at MarylandHealthConnection.gov
- Call 1-855-642-8572. Deaf and hard of hearing use Relay service. Help is available in 200 languages.
- Download the free "Enroll MHC" mobile app to enroll on a phone/tablet.
- Navigators throughout the state can answer questions and enroll consumers by phone.

Q&A

Questions and Answers

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

Appendix

Resources and Links

Governor Hogan Directive – Elective & Non-Urgent Medical Procedures may resume May 7, 2020

These measures must be in effect:

1. Licensed healthcare providers will use their judgment to determine what appointments and procedures are appropriate
2. Facilities and providers must have at least one week's supply of personal protective equipment (PPE) for themselves, staff, and as appropriate, for patients
 - i. PPE requests to any State or local health or emergency management agency will be denied for elective and non-urgent medical procedures
 - ii. The healthcare facility or healthcare provider must be able to procure all necessary PPE for its desired services via standard supply chains
 - iii. For hospitals with COVID-19 patients, MDH will determine a daily PPE per patient use rate for PPE requests
3. **Social distancing must be maintained in all waiting areas**
4. **All healthcare workers, patients, and others must be screened for COVID-19 symptoms upon arrival for shift or visit. Staff must stay home if they are showing COVID-19 symptoms.**
5. **All healthcare facilities and healthcare providers must implement enhanced workplace infection control measures > CDC guidelines: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control.html>**
 - i. **All healthcare providers and staff shall wear appropriate face coverings, to include cloth face coverings, surgical face masks or N-95 masks, respirators, and/or face shields**
 - ii. **Patients should wear a face covering whenever possible**
6. **Any healthcare facility or provider unable to provide PPE for themselves, staff, and patients where appropriate must immediately restrict operations to urgent and non-elective procedures and appointments**

Maryland Companies Producing Personal Protective Equipment in Response to COVID-19

Grant Recipient	County	Typical Production	COVID-19 Production
Awesome Ninja Labs	Baltimore City	Medical devices	Face shields
CoastTec	Carroll	Battery back-ups for computers	Battery packs for Vyaire ventilators
CR Daniels	Howard	Textile, plastics, and metal manufacturing	Face masks and gowns
DiPole Materials	Baltimore City	Custom nanofiber manufacturing	Filters for medical masks and respirators
DVF Corporation	Washington	Metal and plastic fabrications	Plastic components of respirators
Fashions Unlimited	Baltimore City	Apparel manufacturing	Surgical masks and protective gowns
Fabrication Events	Howard	Special event decor	Face masks, head coverings, and other PPE
Harbor Designs	Baltimore City	Manufacturing design and engineering	Ventilators
Hardwire, LLC	Worcester	Bulletproof body armor and equipment for law enforcement and the military	Face shields
K&W Finishing	Baltimore City	Traditional die cutting, coating, and other bindery services	Face shields

Grant Recipient	County	Typical Production	COVID-19 Production
Key Technologies	Baltimore City	Medical devices	Blower units for positive air pressure respirators
LAI International	Carroll	Components for aerospace and defense, medical devices and infrastructure systems	Face shields
Manta BioFuels	Baltimore County	Energy technology	Face shields
Marty's Bag Works	Anne Arundel	Canvas boating products, cushions, laser printing, and bags	Surgical masks, face shields, and lightweight gowns
Nations Photo Lab	Baltimore County	Full-service photo printing	Face shields
NRL & Associates	Queen Anne's	Ultra-precision machining, fabrication, and assembly	Ventilators
Potomac Photonics	Baltimore County	Biotech and medical devices	PPE visors
Rankin Upholstery	Montgomery	Auto, marine, aircraft and custom upholstery	Masks, gowns, and other PPE
Strouse	Carroll	Adhesive solutions	N-95 masks
X-Laser	Howard	Laser light show systems	Face shields

Personal Protective Equipment (PPE) Sources and Requests

- ❖ Routed through Local Health Departments
- ❖ Priority as previously stated - may change over time
- ❖ Maryland PPE Manufacturers List – next slide
- ❖ [National and International PPE Supplier List](#)
- ❖ [PPE request forms and local contacts](#)

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

Considerations When Reusing N95 Respirators (CDC)

- There is no way of determining the maximum possible number of safe reuses for an N95 respirator as a generic number to be applied in all cases.
- Safe N95 reuse is affected by a number of variables that impact respirator function and contamination over time.
- Manufacturers of N95 respirators may have specific guidance regarding reuse of their product.
- CDC guidelines advise to discard N95 respirators before they become a significant risk for contact transmission or their functionality is reduced
 - Administrative controls (e.g. staff training, reminders, and posters)
 - Minimize unnecessary contact with the respirator surface
 - Strict adherence to hand hygiene practices
 - Proper PPE donning and doffing technique, including physical inspection and performing a user seal check
 - Engineering controls (e.g. use of barriers to prevent droplet spray contamination)

[Source](#)

CDC Guidelines - N95 Respirators and Infection Control

- Clean hands with soap and water or an alcohol-based hand sanitizer before and after touching or adjusting the respirator (if necessary for comfort or to maintain fit).
- Avoid touching the inside of the respirator. If inadvertent contact is made with the inside of the respirator, discard the respirator and perform hand hygiene as described above.
- Use a pair of clean (non-sterile) gloves when donning a used N95 respirator and performing a user seal check. Discard gloves after the N95 respirator is donned and any adjustments are made to ensure the respirator is sitting comfortably on your face with a good seal.
- Follow the manufacturer's user instructions, including conducting a user seal check.
- Discard any respirator that is obviously damaged or becomes hard to breathe through.
- Pack or store respirators between uses so that they do not become damaged or deformed.

CDC Guidelines - Reusing N95 Respirators

- N95 respirator must only be used by a single wearer (Label N95 respirator on the straps with person's name)
- Consider use of a cleanable face shield (preferred) over an N95 respirator and/or other steps (e.g., masking patients, use of engineering controls), when feasible to reduce surface contamination of the respirator.
- Hang used respirators in a designated storage area or keep them in a clean, breathable container such as a paper bag between uses.
 - To minimize potential cross-contamination, store respirators so that they do not touch each other and the person using the respirator is clearly identified (including date).
 - Storage containers should be disposed of or cleaned regularly.
- Follow the employer's maximum number of donnings (or up to five if the manufacturer does not provide a recommendation) and recommended inspection procedures.

CDC Guidelines - When to Discard N95 Respirators

- Discard N95 respirators following use during aerosol generating procedures
- Discard N95 respirators contaminated with blood, respiratory or nasal secretions, or other bodily fluids from patients
- Discard N95 respirators following close contact with any patient co-infected with an infectious disease requiring contact precautions

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 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)



- ❖ **OPEN for primary care providers STATEWIDE!**
- ❖ The **CSC** call center (**800-337-8958**), staffed with specialists 7 days a week, matches volunteers for urgent and temporary assistance to people over 65 years old in their homes to help with:
 - 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**

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](#)

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.