

# COVID-19 Update

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**Ben Kruskal, MD**

**Medical Director**

# Agenda

- Situational update
- News of the week
- Post-travel quarantine
- Employee illness screening
- Preventing COVID-19 transmission in the office

# Situational update: numbers as of Mon 7/13

- **Mass**

- Total: ~111K cases/8.3K deaths
- Daily new: 100-300 cases/5-20 deaths
- Avg # of hospitalized pts: ~575

- New tests/day avg 10K
- Avg PCR+ rate: 1.7%

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- **US**

- Total: 3.4M cases/128K deaths
- Weekly incr: cases 450K, deaths 5K

- 54K hospitalized pts (Same as Apr 30: peak 59K April 14-21/nadir 27K June 15)

# COVID-19 News of the Week

# HRSA Provider Relief Fund: Medicaid and CHIP Provider Distribution

- **Eligibility Requirements**

- Received no payment from the \$50 billion General Distribution to Medicare providers
  - Billed Medicaid/CHIP programs or Medicaid managed care plans for health care-related services between Jan. 1, 2018 – Dec. 31, 2019
  - Filed a federal income tax return for fiscal years 2017, 2018 or 2019; or be exempt from filing a return
  - Provided patient care after January 31, 2020
  - Not permanently ceased providing patient care directly, or indirectly
  - Reported on Form 1040 (or other tax form) gross receipts or sales from providing patient care
- <https://www.hhs.gov/sites/default/files/provider-relief-fund-medicaid-chip-factsheet.pdf>.

# WHO on aerosol transmission (widely distorted in headlines) : 7/9/2020

<https://www.who.int/news-room/commentaries/detail/transmission-of-sars-cov-2-implications-for-infection-prevention-precautions>

- Reports of health workers exposed to COVID-19, not in the presence of aerosol-generating procedures, found no ... transmission when contact and droplet precautions were appropriately used.... **These observations suggest that aerosol transmission did not occur in this context.**
- Outside of medical facilities, some outbreak reports related to indoor crowded spaces have suggested the possibility of aerosol transmission, with droplet transmission, e.g. during choir practice, in restaurants or in fitness classes...**short-range aerosol transmission, [in] crowded and inadequately ventilated spaces over a prolonged period of time with infected persons cannot be ruled out. However, the detailed investigations of these clusters suggest that droplet and fomite transmission could also explain human-to-human transmission within these clusters.**

# PCR positivity from exposure till after symptom onset: Annals of Internal Medicine

<https://www.acpjournals.org/doi/10.7326/M20-1495>

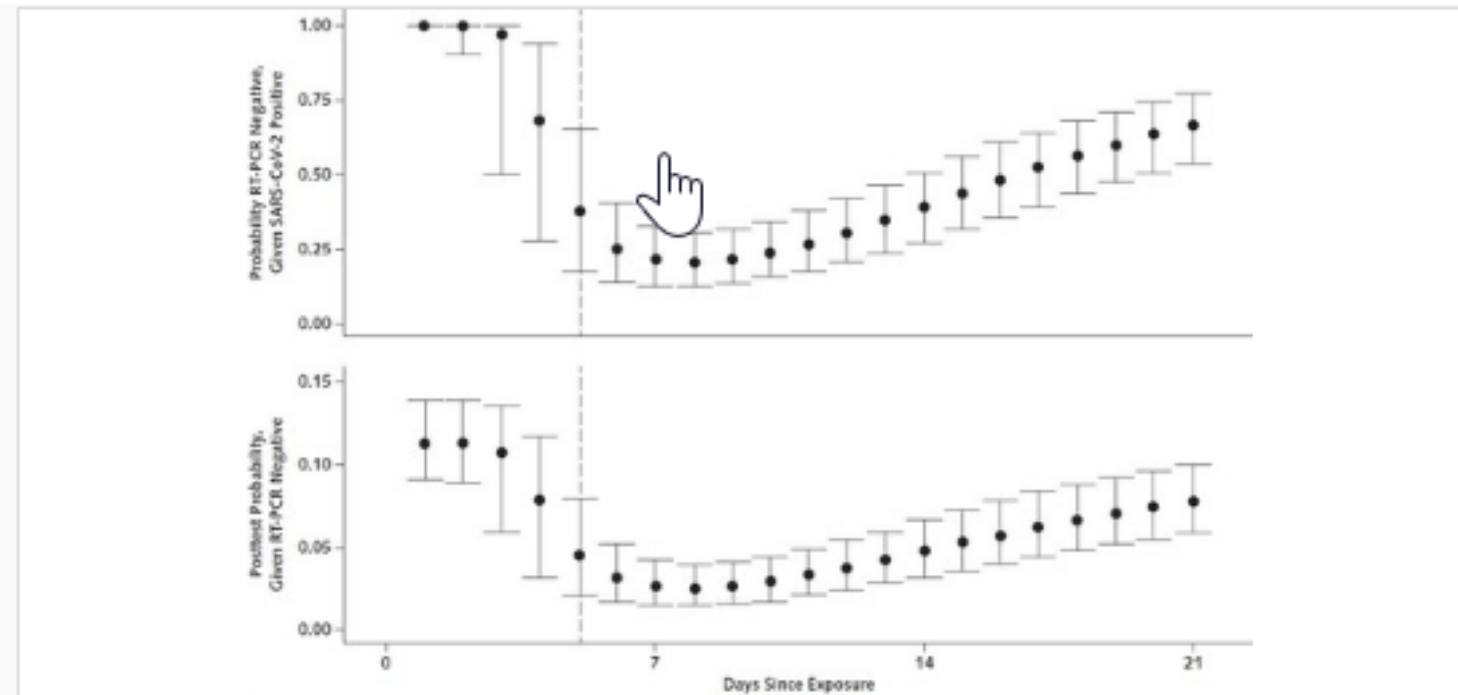


Figure 2. Probability of having a negative RT-PCR test result given SARS-CoV-2 infection (*top*) and of being infected with SARS-CoV-2 after a negative RT-PCR test result (*bottom*), by days since exposure.

# Post-travel quarantine

- Travelers in the general population returning to or coming to Massachusetts from a high-prevalence area (e.g. currently Texas, Florida, California, Arizona) should self-quarantine for 14 days
- Health care workers, if essential, may return to work immediately as long as they are masked 100% of the time with a medical (not fabric) mask.
- Anyone symptomatic, including health care workers, must self-isolate and be tested.



# Employee symptom screening

- Routine temperature screening of health care workers is not recommended, as false + and false – rates are high.
- The recommended tool for screening is a simple list of symptoms (in the Practice Reactivation Guidelines on the NEQCA website)
- All staff working in the office should review the list of questions every day; this forces them to really think about it. The result should be documented in some form; a paper or electronic checklist or attestation is reasonable.
- We hope to be able to offer a simple smartphone app created by Tufts Medical Center shortly.

# Preventing Covid transmission in the office: what we know and what we don't

- Empirically, HOSPITAL health care worker infection rates only marginally higher than community infection rates when appropriate PPE is used (including surgical masks outside of ICU & AGPs)
- Separation of Covid-compatible presentations from Other care (Wellness/chronic disease management/acute non-infectious)
  - In time (e.g. Covid-compatible PM, Other AM)
  - In space
    - Separate locations for practices with multiple offices
    - “Sick” and “well” waiting rooms
    - Separate entrances, separate exam rooms, etc.
  - Separate staff: not likely to be helpful

# COVID-19 Situational Update

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## Questions



# David E. Thaler, MD, PhD, FAHA

Neurologist-in-Chief  
Chairman and Professor  
Department of Neurology  
Tufts University School of Medicine

# Helpful Programs and Resources

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# Practice Optimization Sprint: Redesigning Primary Care for Quality, Safety and Equity in the Time of COVID



**CENTER FOR  
PRIMARY CARE**  
HARVARD MEDICAL SCHOOL

- A virtual 10-week improvement program to support primary care practice leaders and teams to provide high-quality virtual and in-person patient care safely and equitably while building resilience strategies for the future.
- Starting Thursday, July 30, 2020 from 1-2pm EDT
- <http://info.primarycare.hms.harvard.edu/sprint>

# Mark your Calendars

## NEQCA COVID-19 Webinars Wednesdays, 5:30-6:30 p.m.

**July 22 – Mike Eaton/BVK**

**July 29**

## NEQCA Coding Sessions Risk Adjustment & more Thursdays, Noon-1 p.m.

**August 13**

### Upcoming:

NEQCA COVID-19 Updates:

To join any of the sessions below:

GoToMeeting: <https://global.gotomeeting.com/join/123026381>

Access Code: 123-026-381

Wednesday, July 15: 5:30 p.m. - 6:30 p.m. - Featuring Dr. David  
Chief, Tufts Medical Center

Wednesday, July 22: 5:30 p.m. - 6:30 p.m.

Wednesday, July 29: 5:30 p.m. - 6:30 p.m.

### Coding Sessions with NEQCA - Risk Adjustment & More:

Thursday, August 13: 12:00 p.m. - 1:00 p.m.

### Recent:

**NEW:** COVID-19 Update **Presentation** and **Webinar** - July 8, 2020

**NEW:** COVID-19 Update **Presentation** and **Webinar** - June 24, 2020

**NEW:** Practice Reactivation Drop-In Q&A **Presentation** and **Webinar** - June 19, 2020

COVID-19 Update: **Presentation** - June 19, 2020

COVID-19 Update and Cardiovascular aspects of COVID-19 with Dr. Amanda Vest  
**Presentation** and **Webinar** (start video at 9:06) - June 11, 2020

COVID-19 Update with Dr. Cody Meissner: **Presentation** and **Webinar** - June 3, 2020

Unable to join us  
“live”?  
Most sessions  
available  
“on demand”



# Please Tell Us How We Can Help



## HELPFUL COVID-19 INFORMATION



Click [here](#) to learn how you can use the **SAFE with us** campaign to reassure your patients and families.

## PRACTICE REACTIVATION GUIDELINES

NEQCA has developed guidelines to help our Network safely and effectively ramp-up practice operations. Please visit this section regularly for new and updated information.



**If you have specific concerns that impact your ability to see patients in the office, please click [here](#) to tell us how we may assist you.**

- **UPDATED: NEQCA Medical Practice Reactivation Guide** – June 8, 2020
- **NEW: DPH Guidance Phase 2 Reopen Approach For Non-Acute Hospital Health Care Providers** – June 8, 2020
- **NEW: NEQCA Summary of DPH Guidance Phase 2 Reopening Approach** – June 8, 2020
- **NEW: DPH Phase 2 Reopen Attestation Form For Non-Acute Hospital Health Care Providers** – June 8, 2020
- **NEW: DPH Phase 2 Nonessential, Elective Invasive Procedures during the COVID-19 Outbreak** – June 8, 2020
- **NEW: Template Policies and Procedures in DPH Phase 2 of COVID-19 Era (MS Word Version)**
- **Template: Policies and Procedures in DPH Phase 1 of COVID-19 Era (MS Word version)**



# Final Questions

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