



Maryland Situation Update on Coronavirus Disease 2019 (COVID-19)

Maryland Department of Health
Infectious Disease Epidemiology and Outbreak Response Bureau

May 6, 2021

Webinar Agenda

- COVID-19 Epi Summary
- Maryland, CDC, and CMS Updates
- FAQs
- Q&A

<https://covidlink.maryland.gov/content/vaccine/govax/>



COVID-19 Epi Summary

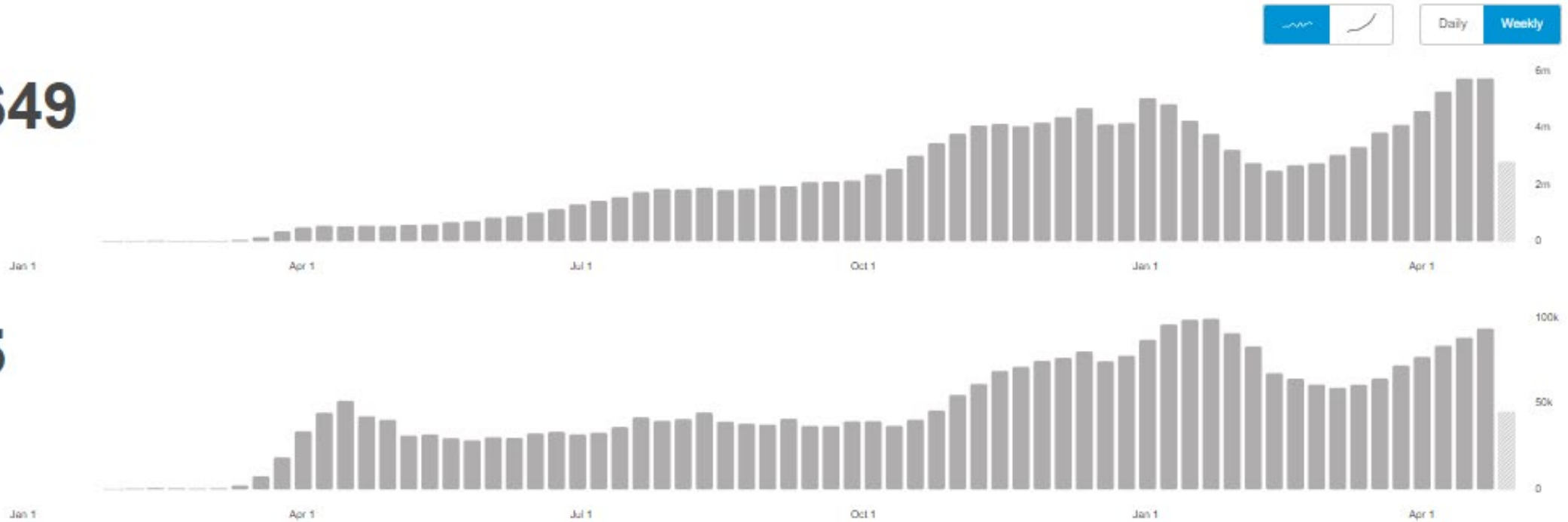
Worldwide: COVID-19

Global Situation

154,640,649
confirmed cases

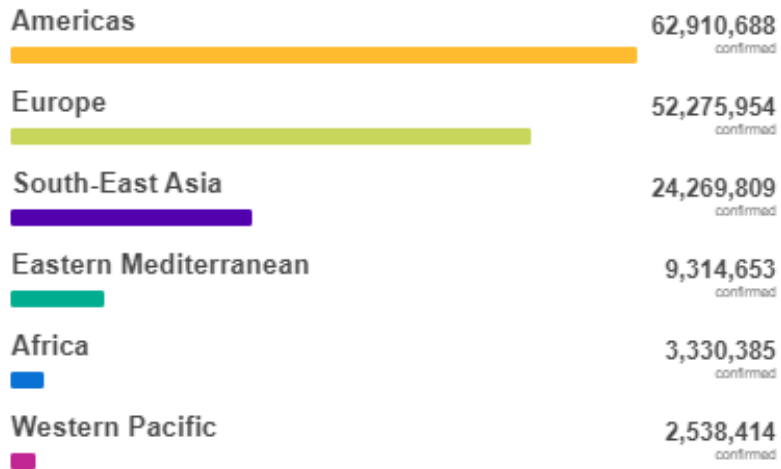
3,232,285
deaths

Sources: World Health Organization
Data may be incomplete for the current day or week.



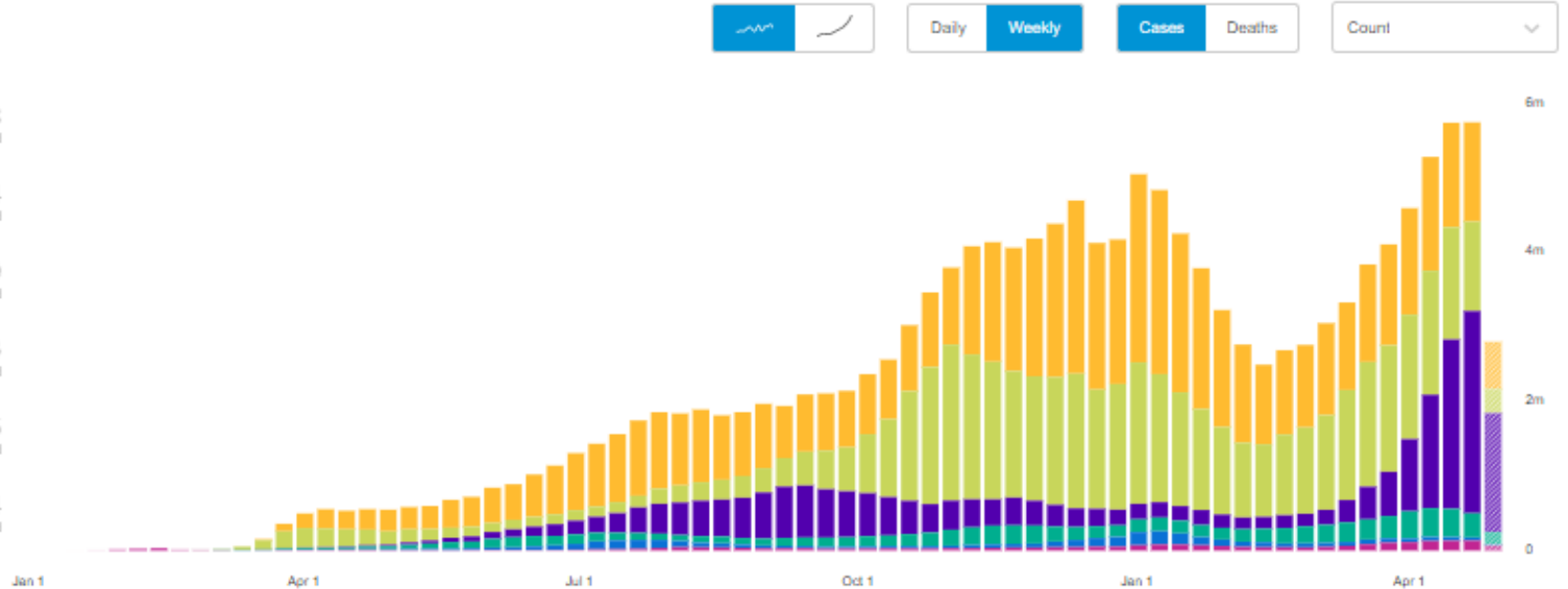
Worldwide: COVID-19

Situation by WHO Region



Source: World Health Organization

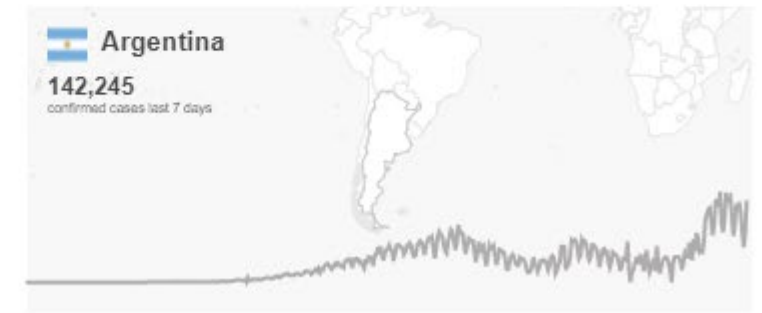
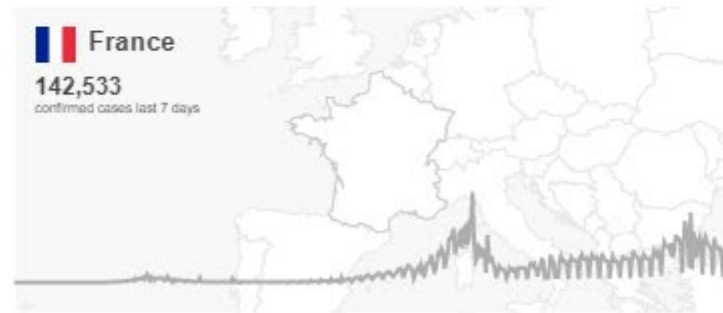
Data may be incomplete for the current day or week.



Worldwide: COVID-19

New cases reported in the past 7 days

Situation by Country, Territory or Area



U.S.: COVID-19

TOTAL CASES

32,313,016

+43,626 New Cases

CASES IN LAST 7 DAYS

333,226

TOTAL DEATHS

575,491

+750 New Deaths

CDC | Data as of: Wednesday, May 5, 2021 12:30 PM ET. Posted: Wednesday, May 5, 2021 1:42 PM ET

CDC, https://covid.cdc.gov/covid-data-tracker/#cases_casesper100klast7days, accessed 5/6/21

Daily US Trends in COVID-19 Cases

Daily Trends in Number of COVID-19 Cases in the United States Reported to CDC

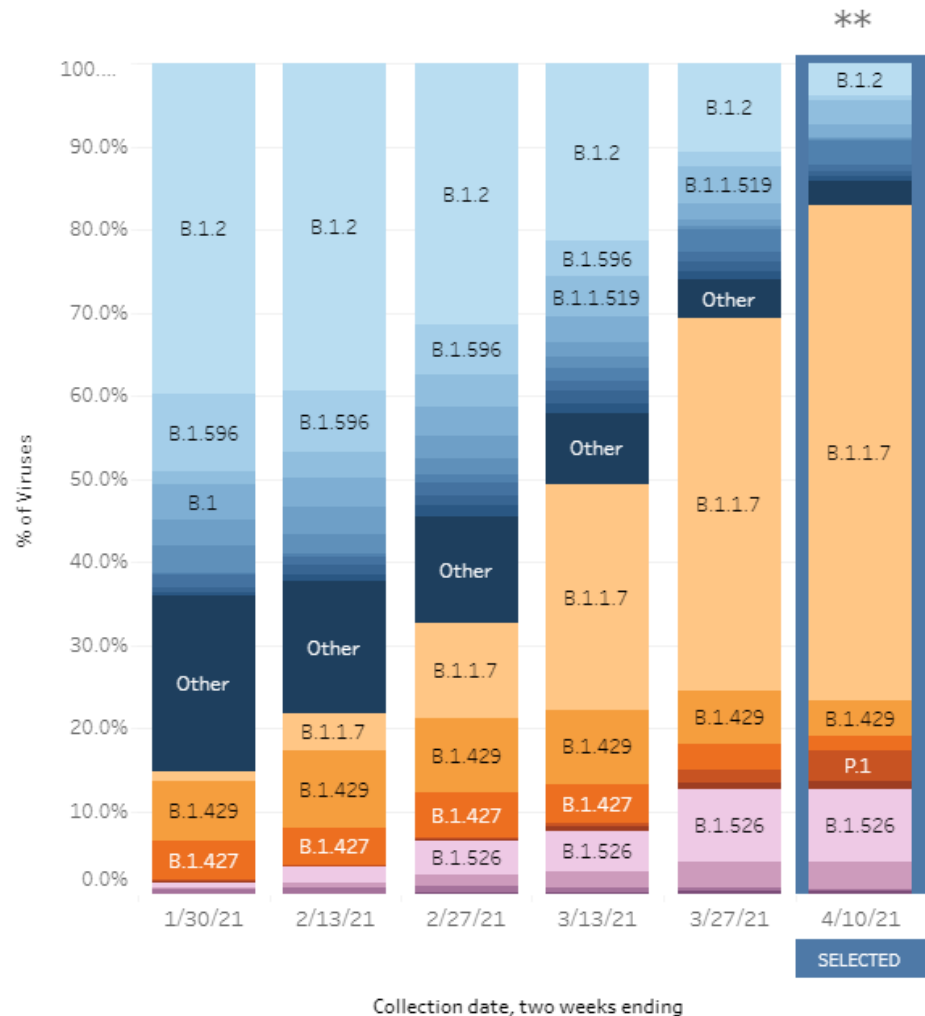


US: SARS-CoV-2 Variants

Weighted Estimates of Proportions of SARS-CoV-2 Lineages

United States: 1/17/2021 – 4/10/2021

United States: 3/28/2021 – 4/10/2021



USA					
	Lineage	Type	%Total	95%CI	
Most common lineages	B.1.1.7	VOC	59.6%	56.9-62.4%	
	B.1.526	VOI	8.7%	6.9-11.0%	
	B.1.429	VOC	4.4%	3.5-5.4%	
	B.1.2		3.9%	3.4-4.5%	
	P.1	VOC	3.7%	3.0-4.5%	
	B.1.526.1	VOI	3.3%	2.7-3.9%	
	B.1.1.519		2.9%	2.4-3.5%	
	B.1.526.2		2.9%	2.3-3.5%	
	B.1.427	VOC	1.7%	1.3-2.2%	
	B.1		1.5%	1.3-1.9%	
	B.1.351	VOC	1.0%	0.8-1.3%	
	B.1.1		0.8%	0.5-1.1%	
	B.1.575		0.7%	0.5-0.9%	
	B.1.596		0.5%	0.4-0.6%	
	R.1		0.5%	0.4-0.6%	
	B.1.243		0.2%	0.2-0.4%	
Additional VOI/VOC li..	B.1.234		0.2%	0.1-0.3%	
	B.1.525	VOI	0.4%	0.3-0.6%	
	P.2	VOI	0.1%	0.1-0.2%	
Other*	Other		2.9%	2.5-3.3%	

* Other represents >200 additional lineages, which are each circulating at <1% of viruses

** Most recent data are subject to change as samples from that period are still being processed

† Fewer than 10 observations of this variant during the selected time/location context

Maryland: COVID-19

Confirmed Cases

451,267

24hr Change: +578

Persons Tested Negative

3,367,609

24hr Change: +5,437

Testing Volume

9,832,902

24hr Change: +28,072

Testing % Positive

3.66%

24hr Change: -0.05

Confirmed Deaths

8,631

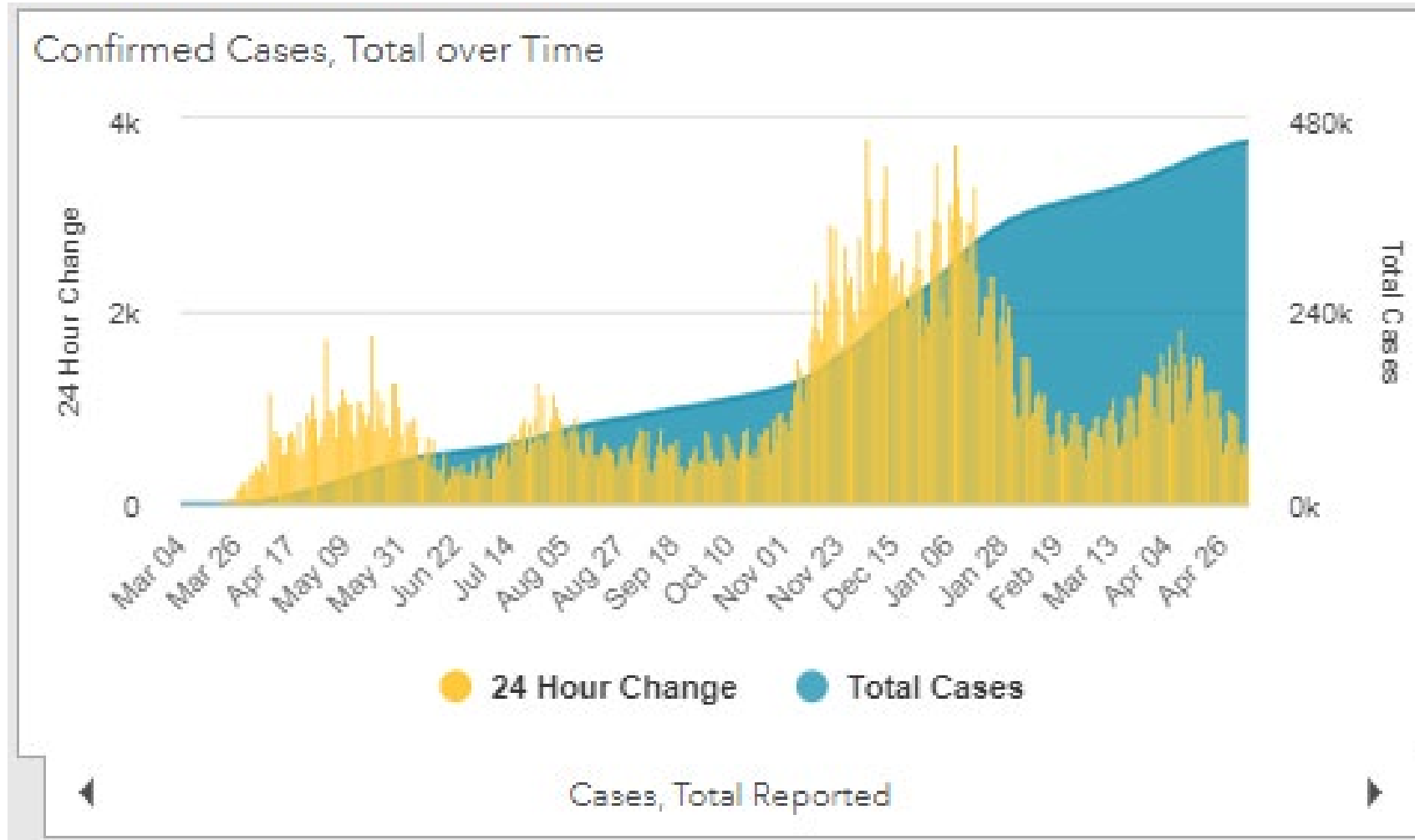
24hr Change: +9

Currently Hospitalized

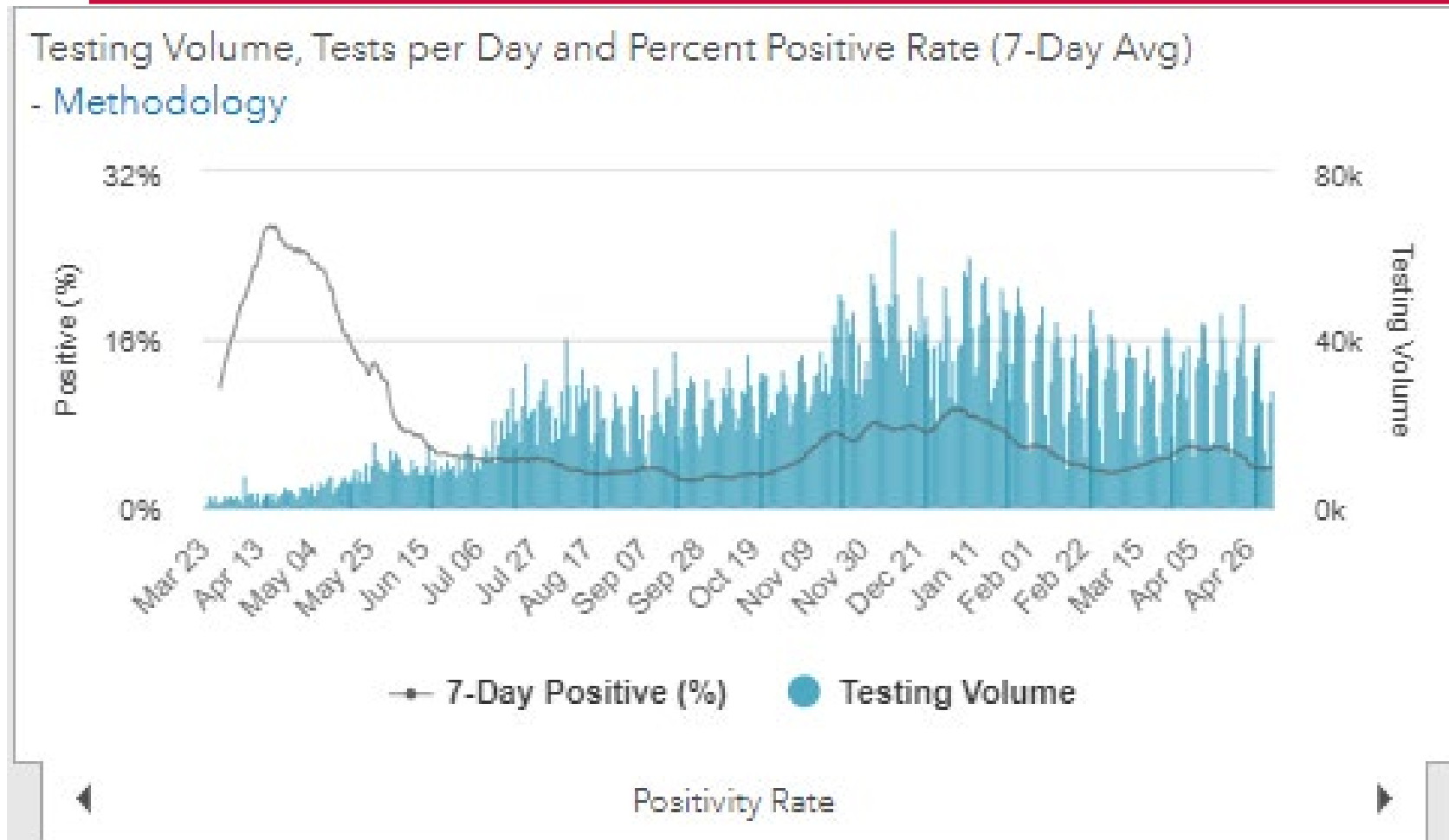
901

24hr Change: -33

Maryland: COVID-19



Maryland: COVID-19

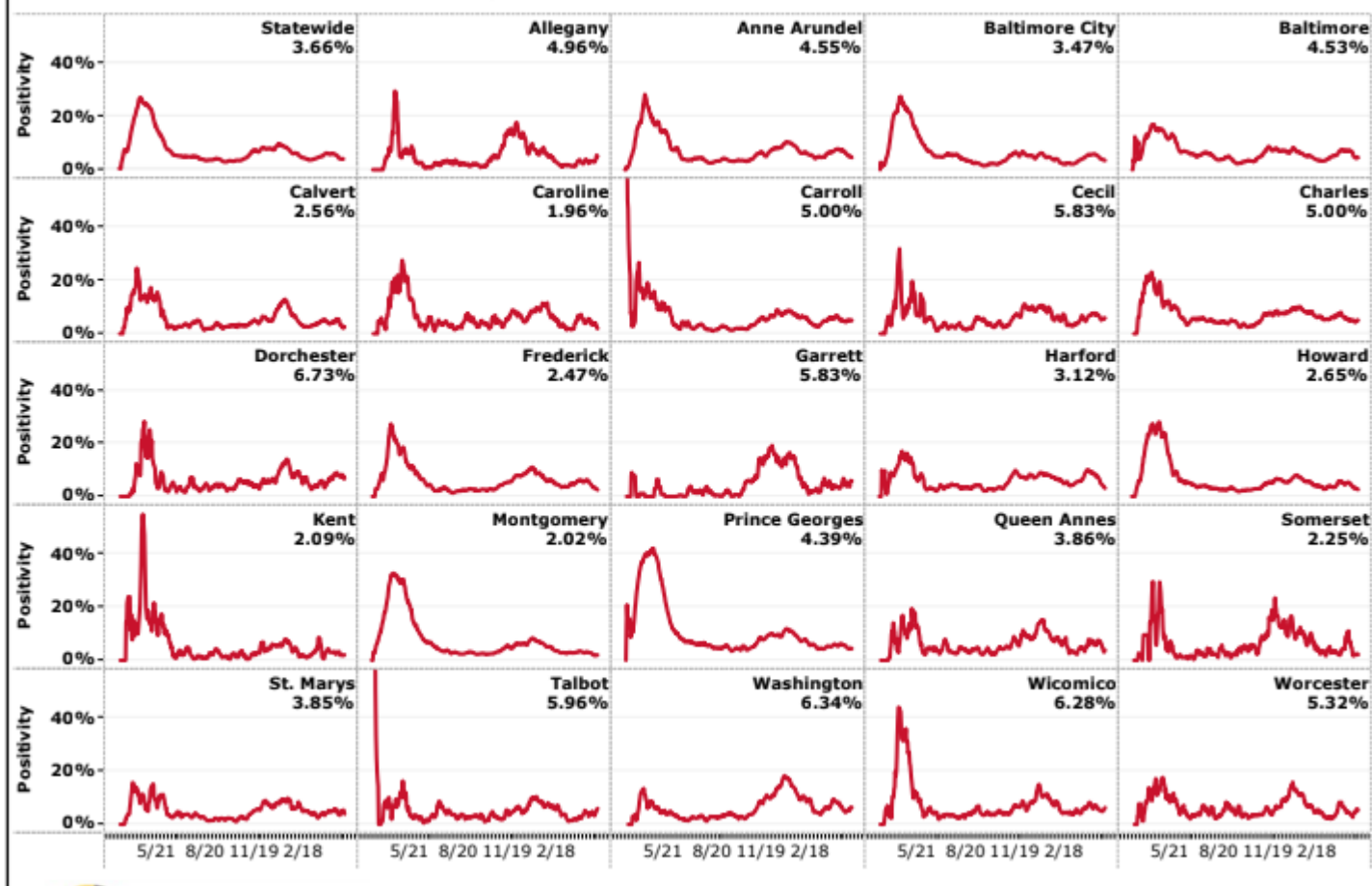


Source: <https://coronavirus.maryland.gov/>, accessed 5/6/21

Maryland: COVID-19

7-Day Avg. Percent Positivity by County- Since March 1, 2020

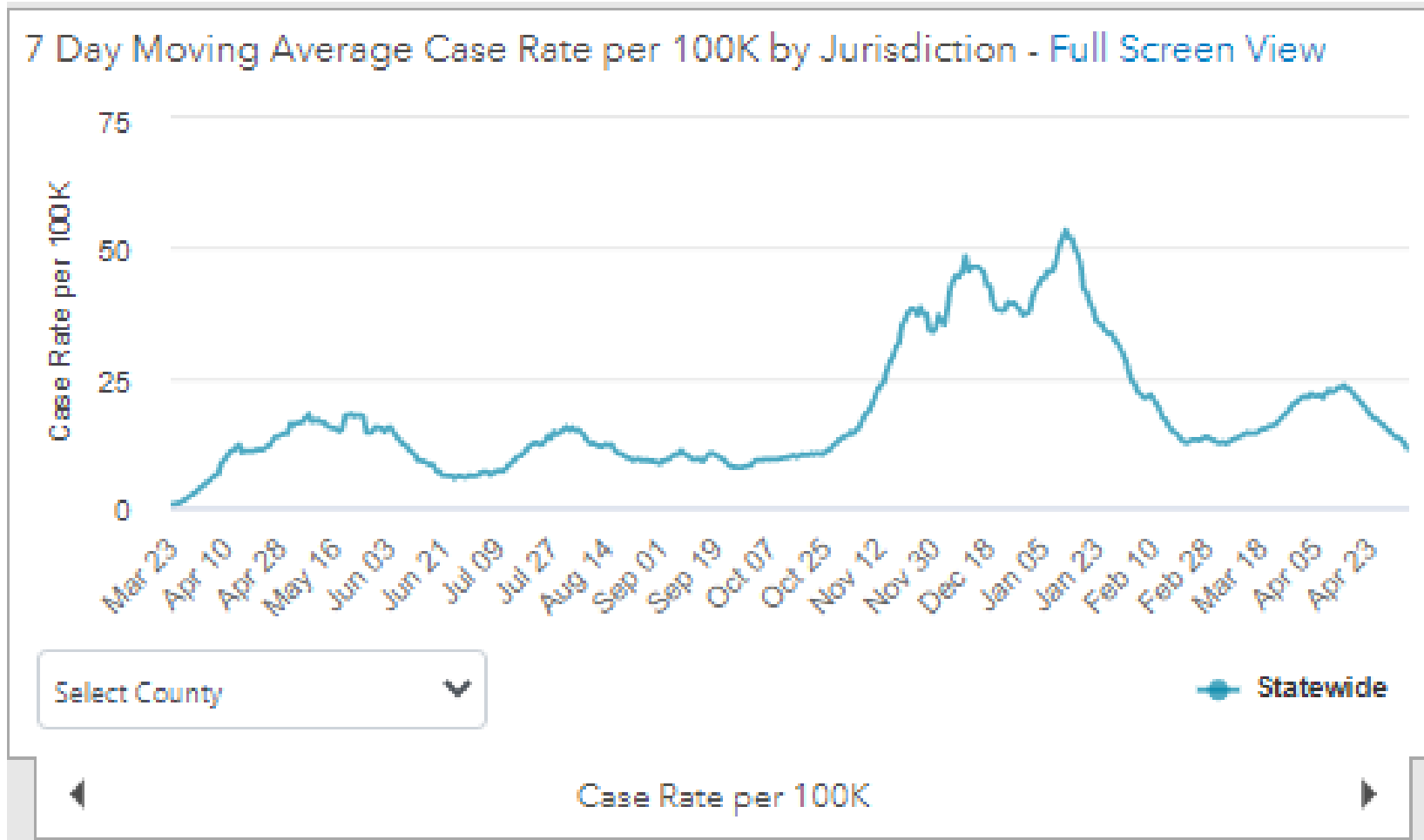
Data reported as of 5/6/2021 for data through 5/5/2021



As of 5/5/21:

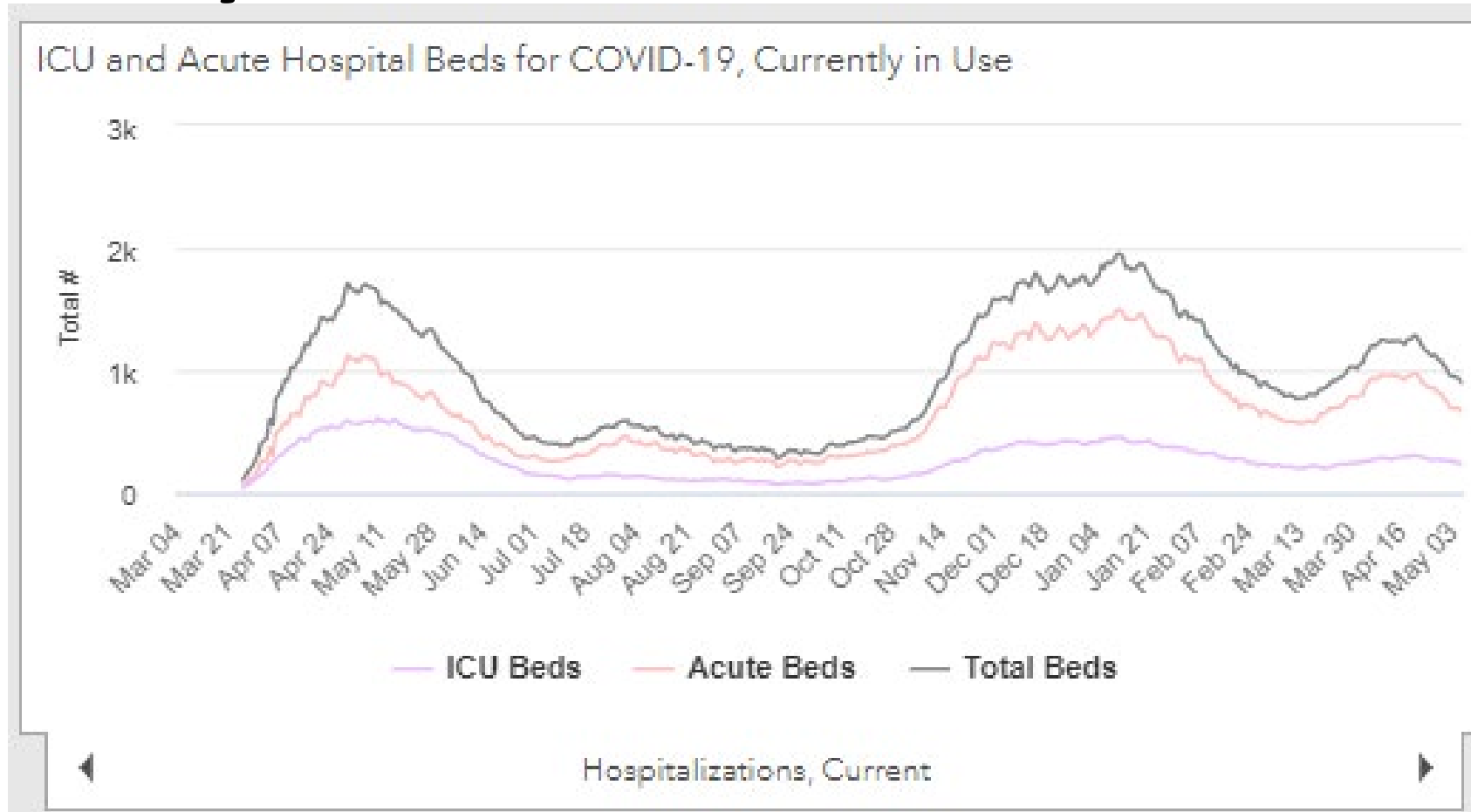
Statewide: 3.66%
7 jurisdictions above 5%

Maryland: COVID-19



5/5/21: **11.36** per
100k

Maryland: COVID-19



US: COVID-19 Vaccinations

Total Vaccine Doses

Delivered 321,549,335

Administered 249,566,820

Learn more about the distribution of vaccines.

People Vaccinated

At Least One Dose

Fully Vaccinated

Total	148,562,891	107,346,533
% of Total Population	44.7%	32.3%
Population ≥ 18 Years of Age	146,335,135	106,535,363
% of Population ≥ 18 Years of Age	56.7%	41.3%
Population ≥ 65 Years of Age	45,425,228	38,356,900
% of Population ≥ 65 Years of Age	83%	70.1%

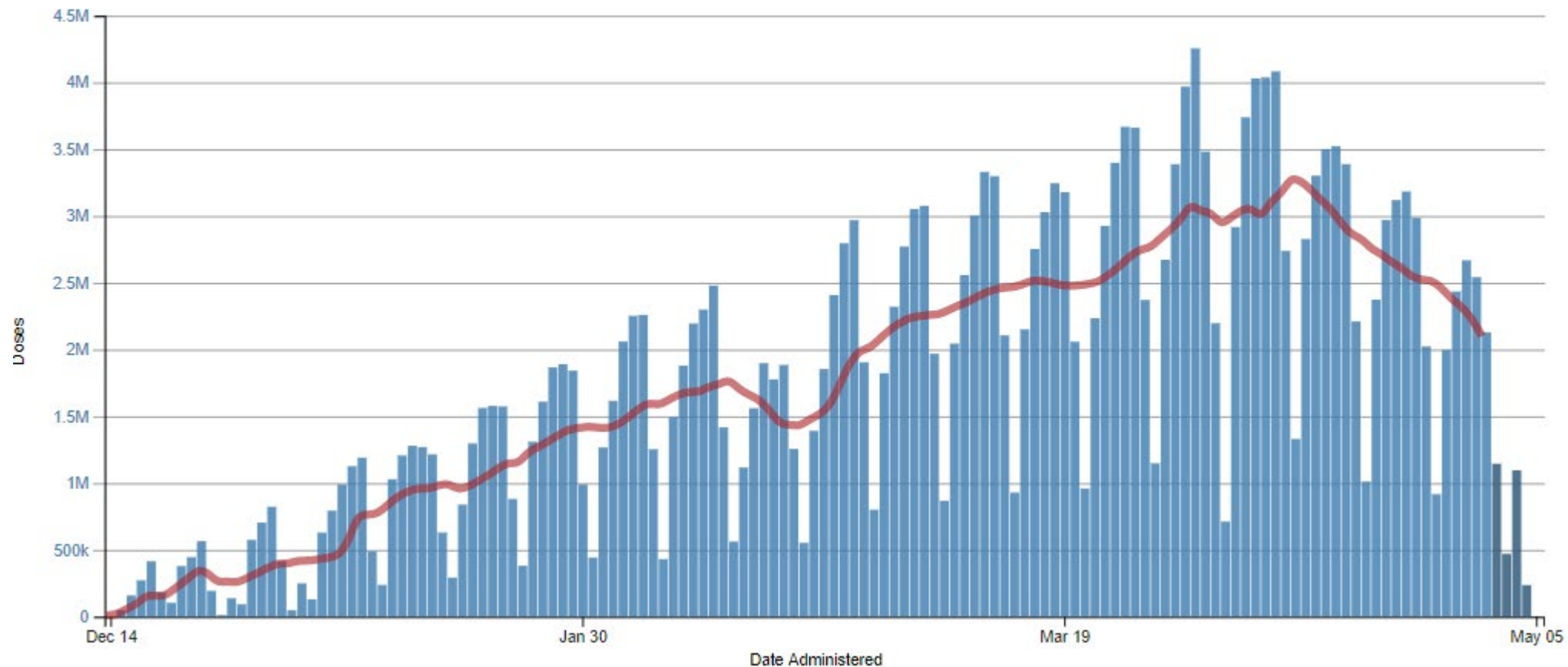


About these data

CDC | Data as of: May 5, 2021 6:00am ET. Posted: Wednesday, May 5, 2021 1:42 PM ET

US: COVID-19 Vaccinations

Daily Count of Total Doses Administered and Reported to the CDC by Date Administered, United States



Federal Pharmacy Partnership for Long-Term Care Program Data

As of April 23, 2021 the federal Pharmacy Partnership for LTC Program has ended. Data on this page reflects cumulative totals as of this date. Minor updates will be made as data are cleaned and finalized. For more information on the background of this program, please visit the [Understanding the Pharmacy Partnership for Long-Term Care Program](#) page. **For more information on current strategies to continue vaccinating residents and staff in LTC facilities, please visit the [Ensuring Access to COVID-19 Vaccine in Long-Term Care Facilities](#) page.**

Total Number of Doses Administered in Long-Term Care Facilities


7,804,017

Number of People with at least One Dose in Long-Term Care Facilities

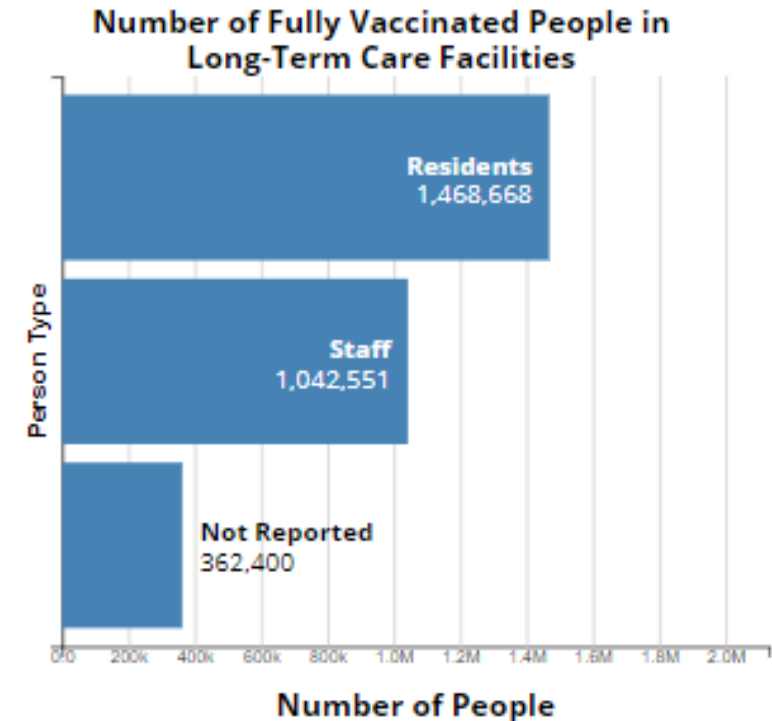
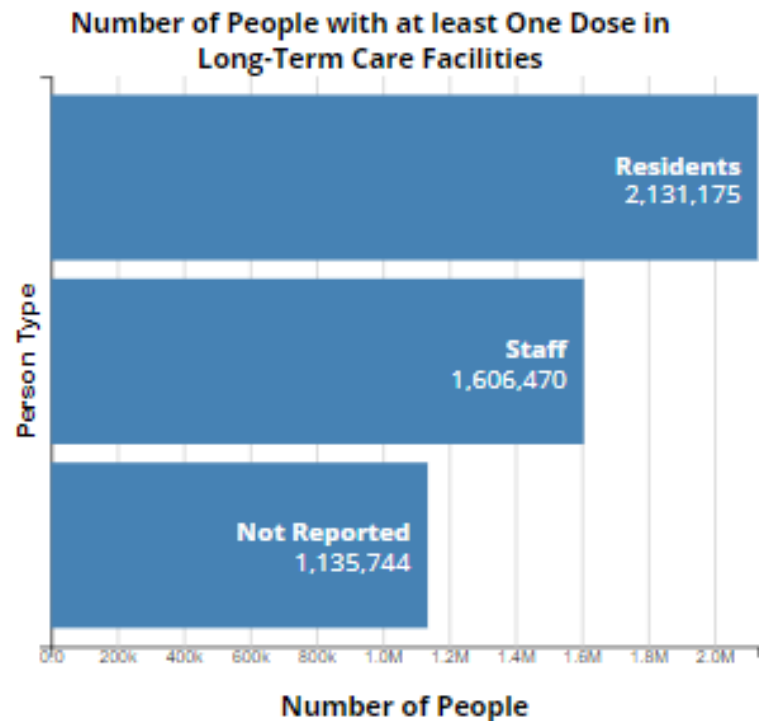
4,873,389

Number of People Fully Vaccinated in Long-Term Care Facilities

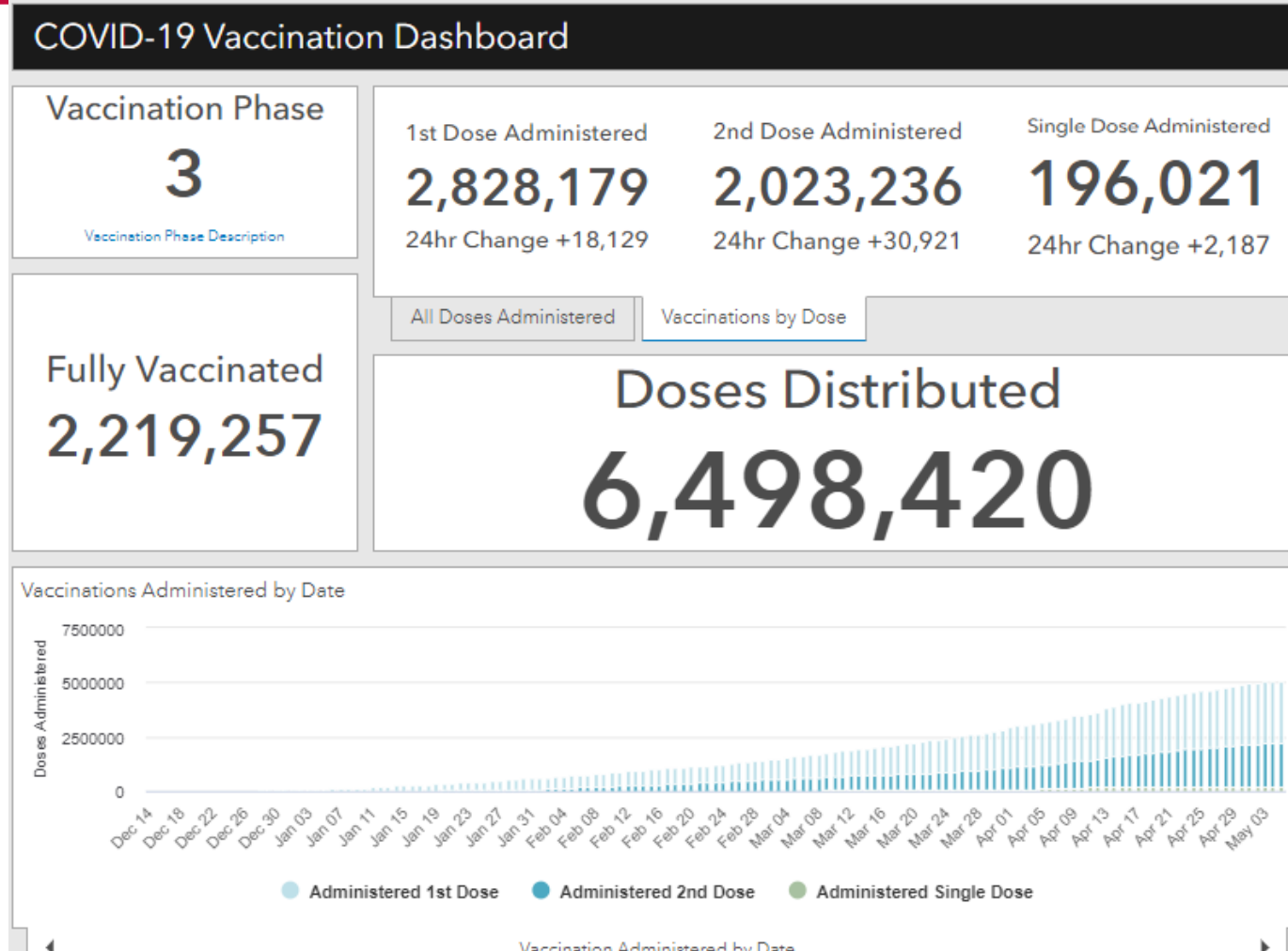
2,873,619

 About these data

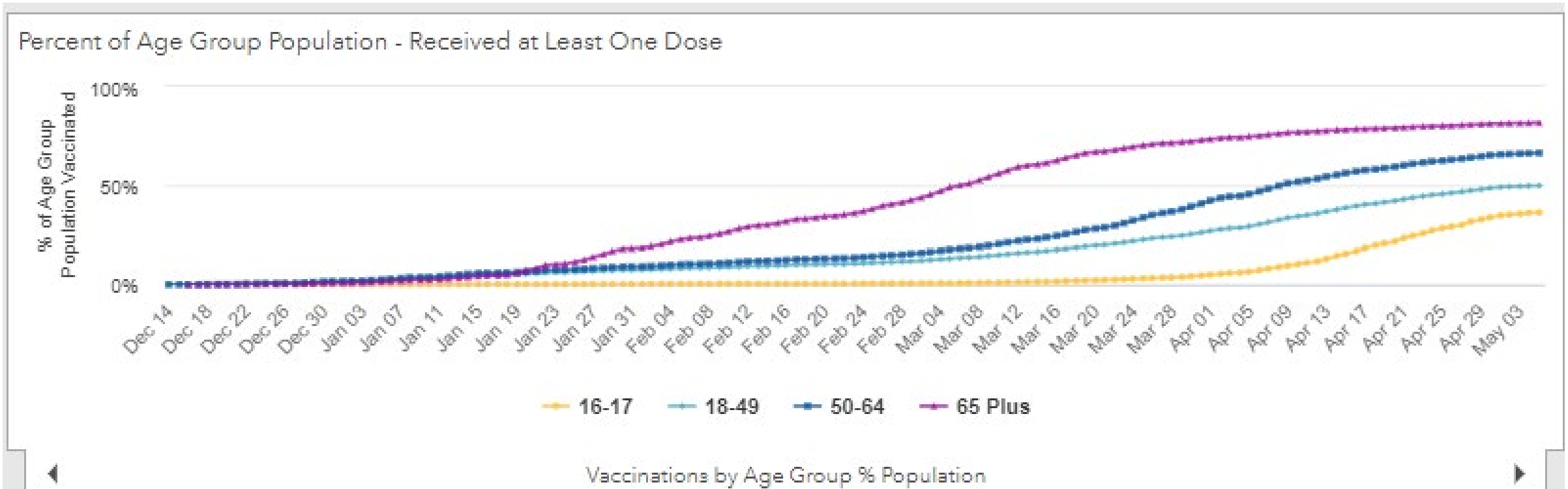
Federal Pharmacy Partnership for Long-Term Care Program Data



Maryland Vaccine Dashboard



Maryland Vaccine Dashboard



Maryland Influenza Epi Update

- Influenza-like illness (ILI) activity in Maryland was **minimal**.
- Maryland sentinel clinical laboratories tested 2,262 specimens for flu and 20 (0.9%) tested positive. Of those, 4 (20%) were influenza Type A and 16 (80%) were influenza Type B.
- The Maryland Public Health Laboratory tested 23 specimens for influenza and 0 tested positive.
- 0 influenza-associated hospitalization was reported.
- 0 influenza-associated deaths were reported.

<https://phpa.health.maryland.gov/influenza/Pages/flu-dashboard.aspx> Accessed 5/5/2021

Updates to CDC Guidance, CMS Regulations, and MDH Orders

Current as of 5/5/21

New CDC and CMS Healthcare Guidance

CDC updates 4/27/21

- [Updated Healthcare Infection Prevention and Control Recommendations in Response to COVID-19 Vaccination](#)

CMS Memos Revised 4/27/21

- [QSO-20-38 LTC Facility Testing Requirements](#)
- [QSO-20-39 Nursing Home Visitation](#)
- **MDH Orders Revised 5/4/21**
 - [Nursing Home Matters Order](#)
 - [General Directives](#)

CDC Definition- Healthcare

as of 4/27/21:

Healthcare settings refers to places where healthcare is delivered and includes, but is not limited to, acute care facilities, long term acute care facilities, inpatient rehabilitation facilities, nursing homes and assisted living facilities, home healthcare, vehicles where healthcare is delivered (e.g., mobile clinics), and outpatient facilities, such as dialysis centers, physician offices, and others.

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-after-vaccination.html>

CDC & CMS Definition- Fully Vaccinated

as of 4/27/21:

Fully vaccinated refers to a person who is ≥ 2 weeks following receipt of the second dose in a 2-dose series, or ≥ 2 weeks following receipt of one dose of a single-dose vaccine.

Unvaccinated refers to a person who does not fit the definition of fully vaccinated, including people whose vaccination status is not known, for the purposes of this guidance.

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-after-vaccination.html>
<https://www.cms.gov/files/document/qso-20-38-nh.pdf>

CDC: Updated Healthcare Infection Prevention and Control Recommendations- Visitor Mask Use

- Visitors, regardless of their vaccination status, should wear a well-fitting cloth mask, facemask, or respirator for source control, except:
- **When both the patient/resident and all their visitors are fully vaccinated:**
 - While alone in the patient/resident's room or the designated visitation room, patients/residents and their visitor(s) can choose to have close contact (including touch) and to not wear source control.
- Visitors should wear source control and physically distance from HCP and other patients/residents/visitors that are not part of their group at all other times while in the facility.

CDC: Updated Healthcare Infection Prevention and Control Recommendations- HCP Mask Use

- In general, fully vaccinated HCP should continue to wear source control while at work. However, **fully vaccinated HCP** could dine and socialize together in break rooms and conduct in-person meetings without source control or physical distancing.
- If unvaccinated HCP are present, **everyone** should wear source control and unvaccinated HCP should physically distance from others.

CDC: Updated Healthcare Infection Prevention and Control Recommendations- Communal Activities

- Group activities:
 - If **all** patients/residents participating in the activity are fully vaccinated, then they may choose to have close contact and to not wear source control during the activity.
 - If unvaccinated patients/residents or unvaccinated HCP are present, then **all** participants in the group activity should wear source control and unvaccinated patients/residents should physically distance from others.

CDC: Updated Healthcare Infection Prevention and Control Recommendations- Communal Activities

- Communal dining:
 - Fully vaccinated patients/residents can participate in communal dining without use of source control or physical distancing
 - If unvaccinated patients/residents are dining in a communal area (e.g., dining room) and/or unvaccinated HCP are present, **all** patients/residents should use source control when not eating and unvaccinated patients/residents should continue to remain at least 6 feet from others.

CDC: Updated Healthcare Infection Prevention and Control Recommendations- Communal Activities

- Who should *not* participate in communal activities:
 - Vaccinated and unvaccinated patients/residents with **SARS-CoV-2 infection**, or in **isolation** because of suspected COVID-19, until they have met [criteria to discontinue Transmission-Based Precautions](#) (TBP).
 - Vaccinated and unvaccinated patients/residents in **observation/quarantine** until they have met criteria for release from [quarantine](#).
- If vaccination status cannot be determined, the safest practice is for all participants to follow all recommended infection prevention and control practices including maintaining physical distancing and wearing source control.

CDC: Updated Healthcare Infection Prevention and Control Recommendations- SARS-CoV-2 Testing

- **Fully vaccinated HCP may be exempt from screening testing.**
- Unvaccinated HCP in nursing homes should be tested as previously recommended in CMS Memo [QSO-20-38](#).

CDC: Updated Healthcare Infection Prevention and Control Recommendations- SARS-CoV-2 Testing

- **Anyone with symptoms of COVID-19**, regardless of vaccination status, should receive a viral test immediately.
- **Asymptomatic HCP with a higher-risk exposure and patients/residents with prolonged close contact with someone with SARS-CoV-2 infection**, regardless of vaccination status, should have a series of two viral tests for SARS-CoV-2 infection. In these situations, testing is recommended immediately and 5–7 days after exposure.
 - Exception: people with SARS-CoV-2 infection in the last 90 days do not need to be tested if they remain asymptomatic, including those with a known contact.

CDC: Updated Healthcare Infection Prevention and Control Recommendations- SARS-CoV-2 Testing

- In healthcare facilities with an outbreak of SARS-CoV-2, recommendations for viral testing of HCP and patients/residents (**regardless of vaccination status**) remain unchanged:
 - Nursing homes: test residents and HCP every 3-7 days until no new cases are identified for 14 days.
 - Hospitals and dialysis facilities: follow current recommendations for viral testing of potentially exposed HCP and patients, regardless of vaccination status.

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-after-vaccination.html>
<https://www.cdc.gov/coronavirus/2019-ncov/downloads/hcp/nursing-home-testing-algorithm-508.pdf>

CMS: QSO-20-38 LTC Facility Testing Requirements

- **Staff** with signs or symptoms of COVID-19, vaccinated or not vaccinated, must be tested immediately and are expected to be restricted from the facility pending the results of COVID-19 testing.
- If COVID-19 is confirmed, staff should follow existing CDC Guidelines: [Criteria for Return to Work for Healthcare Personnel with SARS-CoV2- Infection.](#)
- Symptomatic staff who do not test positive for COVID-19 should follow facility policies to determine when they can return to work.

CMS: QSO-20-38 LTC Facility Testing Requirements

- **Residents** who have signs or symptoms of COVID-19 must be tested immediately, regardless of vaccination status.
- While test results are pending, symptomatic residents should be placed on transmission-based precautions (TBP).
- Once test results are obtained, the facility must take the appropriate actions based on the results.

CMS: QSO-20-38 LTC Facility Testing Requirements

Table 1: Testing Summary

Testing Trigger	Staff	Residents
Symptomatic individual identified	Staff, <i>vaccinated and unvaccinated</i> , with signs and symptoms must be tested	Residents, <i>vaccinated and unvaccinated</i> , with signs and symptoms must be tested
Outbreak (Any new case arises in facility)	Test all staff, <i>vaccinated and unvaccinated</i> , that previously tested negative until no new cases are identified*	Test all residents, <i>vaccinated and unvaccinated</i> , that previously tested negative until no new cases are identified*
Routine testing	According to Table 2 below	Not recommended, unless the resident leaves the facility routinely.

<https://www.cms.gov/files/document/qso-20-38-nh.pdf>

CMS: QSO-20-38 LTC Facility Testing Requirements

Table 2: Routine Testing Intervals Vary by Community COVID-19 Activity Level

Community COVID-19 Activity	County Positivity Rate in the past week	Minimum Testing Frequency <i>of Unvaccinated Staff⁺</i>
Low	<5%	Once a month
Medium	5% - 10%	Once a week*
High	>10%	Twice a week*

⁺Vaccinated staff do not need be routinely tested.

**This frequency presumes availability of Point of Care testing on-site at the nursing home or where off-site testing turnaround time is <48 hours.*

<https://www.cms.gov/files/document/qso-20-38-nh.pdf>

MDH: Updated Healthcare Infection Prevention and Control Recommendations- Admission Quarantine

- Quarantine is no longer recommended for residents who are being admitted to a post-acute care facility if they are **fully vaccinated** and have **not** had prolonged close contact with someone with SARS-CoV-2 infection in the prior 14 days.

MDH Orders 5/4/21: Significant Updates

New: MDH Amended Directive and Order Regarding Nursing Home Matters - Issued 5/4/21

- Includes quarantine exemption for fully vaccinated residents without known exposure being admitted/readmitted to match CDC recommendations
- Amends source control requirements for staff, volunteers, vendors, visitors, and residents within the facility to match federal guidance

MDH Orders 5/4/21: Vaccinations

- Ensure that by May 30, 2021 their facility can demonstrate that they have established an **ongoing relationship with a vaccine provider** to maintain adequate access to meet their vaccination need
- Ensure that each facility's **vaccination data are reported via CRISP** to the Maryland Department of Health so that the information can be posted weekly on the [Department of Aging's website](#)
- Ensure that each facility's **vaccination data for staff and residents is displayed prominently to the public** entering the facility

FAQs

FAQ #1: When can we stop routine testing of fully vaccinated staff?

- Per the current [Nursing Home Matters Order](#) and the revised [CMS Memo QSO-20-38](#), you may exempt fully-vaccinated, asymptomatic HCP from routine surveillance testing effective immediately.
- Symptomatic staff regardless of vaccination status should be tested immediately
- All staff must be tested every 3-7days during an outbreak

FAQ #2: If unvaccinated staff are present for a meal or group activity of fully vaccinated residents, does everyone have to wear a mask?

- Yes
- As per CDC:
 - Residents should take precautions based on the vaccination status of others who are present, whether those others are residents or healthcare personnel.
 - Where CDC guidance says that residents should wear masks when other residents who are not vaccinated are also present, you can read that to say that they should also wear masks when HCP who are not vaccinated are also present.
 - If HCP or resident vaccination status can't be determined, the safest practice is for all participants to follow all recommended infection prevention and control practices including maintaining physical distancing and wearing source control.

FAQ #3: Do we need to ask visitors for proof of vaccination status prior to visits?

- No
- Per CMS:
 - The nursing home does not need to obtain proof of vaccination from visitors.
 - Asking a visitor about vaccination status is sufficient in determining masking/social distancing protocols.

<https://www.cms.gov/Outreach-and-Education/Outreach/OpenDoorForums/PodcastAndTranscripts> 4/6/2021

FAQ #4: Do we still need to place vaccinated (re)admissions on our Observation unit for 14 days?

- In general, No!
- Fully vaccinated inpatients and residents in healthcare settings should continue to [quarantine](#) following prolonged close contact (within 6 feet for a cumulative total of 15 minutes or more over a 24-hour period) with someone with SARS-CoV-2 infection

FAQ #5: Do we still have to place unvaccinated newly admitted residents on observation for 14 days?

- Yes
- Newly admitted or readmitted residents who do not meet the definition of “fully vaccinated” must be placed on 14 day observation, in a private room
- Residents with a known exposure, regardless of their vaccination status must be placed on observation for 14 days

<https://phpa.health.maryland.gov/Documents/2021.05.04.02%20MDH%20Order%20-%20Amended%20Nursing%20Homes%20Matter%20Order.pdf>

FAQ #6: If we have fully vaccinated residents who are on observation now, can we discontinue observation status?

- If the resident is fully vaccinated, is asymptomatic, and has no known exposures, they may be removed from observation status

<https://phpa.health.maryland.gov/Documents/2021.05.04.02%20MDH%20Order%20-%20Amended%20Nursing%20Homes%20Matter%20Order.pdf>

FAQ #7: Are masks required for outdoor visits?

- If everyone in the group is vaccinated then masks may be removed
- If anyone in the group is not vaccinated then masks should continue to be worn

<https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/participate-in-activities.html>

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-after-vaccination.html>

FAQ #8: What guidance do ALs have to follow?

- All assisted living programs should follow all applicable federal guidance from CDC and CMS. This includes but is not limited to:
- <https://www.cdc.gov/coronavirus/2019-ncov/hcp/assisted-living.html>
- <https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html>
- <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>
- <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-after-vaccination.html>
- <https://www.cdc.gov/coronavirus/2019-ncov/hcp/exposure-in-healthcare.html>
- <https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html>
- <https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-antigen-testing.html>

FAQ #9: Can we restrict unvaccinated residents to their rooms to allow vaccinated residents time to congregate without masking?

Sometimes, with limitations.

- This should be examined on a case by case basis, depending on the needs and desires of all the residents
- Consider cohorting meals and activities so the vaccinated residents may gather without needing to mask
- Remember that if an unvaccinated resident or staff member is present, everyone must wear a mask

<https://www.cdc.gov/coronavirus/2019-ncov/community/retirement/considerations.html>

<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/clean-disinfect-hygiene.html>

FAQ #10: Can fully vaccinated residents remove their masks in the Therapy Gym?

Maybe. Consider this a group activity.

- If all other residents and staff present in the Therapy Gym are fully vaccinated then residents may choose to remove their masks.
- If any staff or residents who are present are unvaccinated, then everyone must continue to wear masks.

FAQ#11: How often do I have to enter my facility's vaccine data into CRISP?

- Vaccination data must be entered once a week, by Wednesday at 11AM*
- Data may be entered daily if you choose
- Data will be pulled shortly after 11AM each Wednesday for posting to [the public website](#)
 - Please double check for accurate numbers for public reporting: Vaccination data (numerator), staff and resident census data (denominator)
- The website will be updated every Friday

*Note that all other CRISP data must continue to be reported daily

<https://aging.maryland.gov/Pages/SNFVD.aspx>

FAQ# 12: Can vaccinated staff stop using eye protection or other PPE?

- Recommendations for [use of personal protective equipment by HCP](#) remain unchanged.
- Source control (mask use around other vaccinated people) has been relaxed for vaccinated staff. PPE (equipment you wear to protect yourself and your patients) has not changed for anyone.
- Eye protection is REQUIRED for staff caring for residents with suspected or confirmed COVID-19, on quarantine, or on observation (anyone on transmission-based precautions).

Questions?

MDH.IPCOVID@maryland.gov