



# Public Health Update with the Indiana Department of Health

March 2, 2022





# Agenda

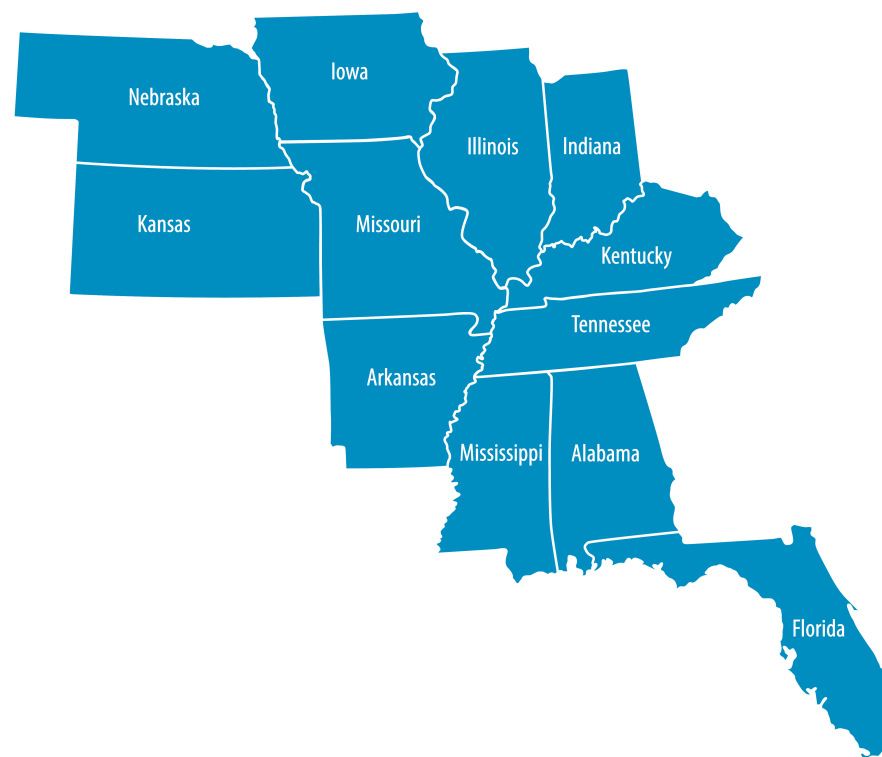
- Opening Remarks
- Housekeeping
- Presentation
- Q&A
- Closing Remarks

# Who We Are

Qsource has more than 45 years of experience working with with healthcare providers, Medicare and Medicaid.

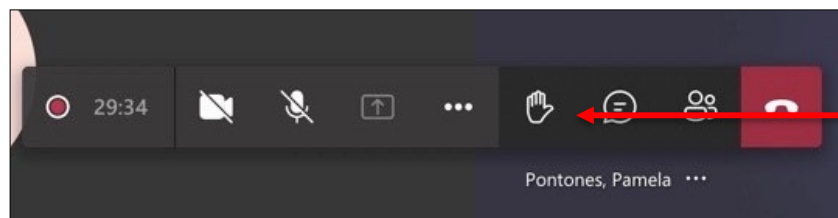
Currently operate in 11 states overseeing ESRD, EQRO and QIO activities.

Serves as the Medicare Quality Innovation Network-Quality Improvement Organization (QIN-QIO) for Indiana.



# Housekeeping Items: Chat

- To ensure maximum sound quality, participant lines have been muted during the presentation; however, we welcome questions and comments via the chat box on the right-hand side of your screen
- During the Q&A portion of the presentation, we will unmute your lines.
- To submit questions or comments:
  - Use the chat box or,
  - Raise your hand to verbally ask your question





# Polling Question

In which setting do you work?

- A. Ambulatory Care
- B. Community-based
- C. Government
- D. Home Health
- E. Hospital
- F. Long-term Care
- G. Pharmacy
- H. Other



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# PUBLIC HEALTH UPDATES

**PAM PONTONES, MA**

DEPUTY STATE HEALTH  
COMMISSIONER

STATE EPIDEMIOLOGIST

03/02/2022



## Moving Forward



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# A Time of Transition

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- While universal case investigation and contact tracing during the initial phase of the pandemic was justified as the phases of the pandemic evolve, public health experts agree this degree of response is no longer optimal
- Indiana's cases and hospitalizations have fallen significantly in recent weeks as we move past the Omicron surge
- Although COVID-19 is not going away, we have tools available today that we didn't have two years ago, including vaccines and therapies
- As a result, we are making significant changes to our COVID-19 response operations that impact schools and local health departments



# Empowering the Public

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- Focus on public education and messaging as we move toward endemic status
  - Educate on importance of vaccination, health strategies, protecting others who might be vulnerable
- Individuals who suspect a COVID-19 infection should
  - Get tested
  - Isolate to protect others (stay home when sick)
  - Rapidly notify their close contacts if they are positive
  - Seek healthcare if at higher risk

# New CDC Community Level Metrics

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- Given shift in pandemic phase, CDC has changed metrics used to determine disease burden and recommended mitigation measures in counties
  - Number of new cases in county, cases  $<200/100,000$  or  $\geq 200$  cases/100,000 in the past week based on provider reporting
  - Number of new patients with COVID-19 admitted to the hospital in the past week
  - Proportion of hospital capacity (beds) devoted to caring for COVID-19 patients
- Used to determine if county level is low, medium or high risk of transmission and what level of precautions are recommended
- You can check your county level at <https://www.cdc.gov/coronavirus/2019-ncov/your-health/covid-by-county.html>

# COVID-19 Community Levels

Check your county's [COVID-19 Community Level](#)

COVID-19 Community Levels – Use the Highest Level that Applies to Your Community

New COVID-19 Cases Per 100,000 people in the past 7 days	Indicators	Low	Medium	High
Fewer than 200	New COVID-19 admissions per 100,000 population (7-day total)	<10.0	10.0-19.9	≥20.0
	Percent of staffed inpatient beds occupied by COVID-19 patients (7-day average)	<10.0%	10.0-14.9%	≥15.0%
200 or more	New COVID-19 admissions per 100,000 population (7-day total)	NA	<10.0	≥10.0
	Percent of staffed inpatient beds occupied by COVID-19 patients (7-day average)	NA	<10.0%	≥10.0%

[https://www.cdc.gov/coronavirus/2019-ncov/science/community-levels.html?ACSTrackingID=USCDC\\_2145-DM76655&ACSTrackingLabel=02.25.2022%20-%20COVID-19%20Data%20Tracker%20Weekly%20Review&deliveryName=USCDC\\_2145-DM76655](https://www.cdc.gov/coronavirus/2019-ncov/science/community-levels.html?ACSTrackingID=USCDC_2145-DM76655&ACSTrackingLabel=02.25.2022%20-%20COVID-19%20Data%20Tracker%20Weekly%20Review&deliveryName=USCDC_2145-DM76655)



# CDC Prevention Steps by Community Level

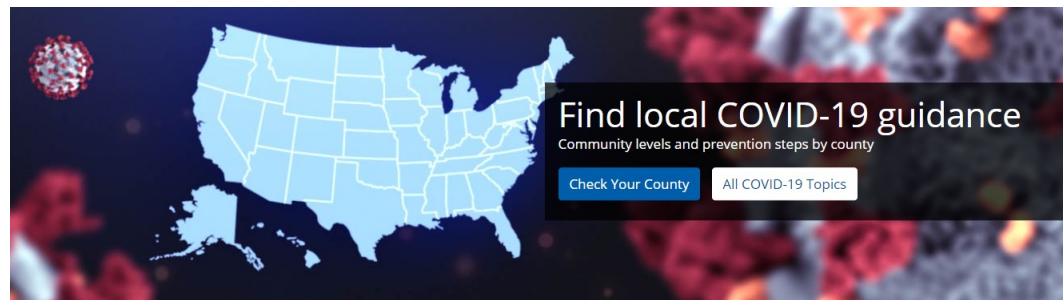
Low	Medium	High
<ul style="list-style-type: none"><li>• Stay <u>up to date</u> with COVID-19 vaccines</li><li>• <u>Get tested</u> if you have symptoms</li></ul>	<ul style="list-style-type: none"><li>• If you are <u>at high risk for severe illness</u>, talk to your healthcare provider about whether you need to wear a mask and take other precautions</li><li>• Stay <u>up to date</u> with COVID-19 vaccines</li><li>• <u>Get tested</u> if you have symptoms</li></ul>	<ul style="list-style-type: none"><li>• Wear a <u>mask</u> indoors in public</li><li>• Stay <u>up to date</u> with COVID-19 vaccines</li><li>• <u>Get tested</u> if you have symptoms</li><li>• Additional precautions may be needed for people <u>at high risk for severe illness</u></li></ul>

People may choose to mask at any time. People with symptoms, a positive test, or exposure to someone with COVID-19 should wear a mask.

<https://www.cdc.gov/coronavirus/2019-ncov/your-health/covid-by-county.html>



# CDC: Check Your County



## COVID-19 County Check

Find community levels and prevention steps by county.

Select a Location (all fields required)

Indiana Marion County

< Start Over

**Medium**

In Marion County, Indiana, community level is Medium.

- If you are [at high risk for severe illness](#), talk to your healthcare provider about whether you need to wear a mask and take other precautions
- Stay [up to date](#) with COVID-19 vaccines
- [Get tested](#) if you have symptoms

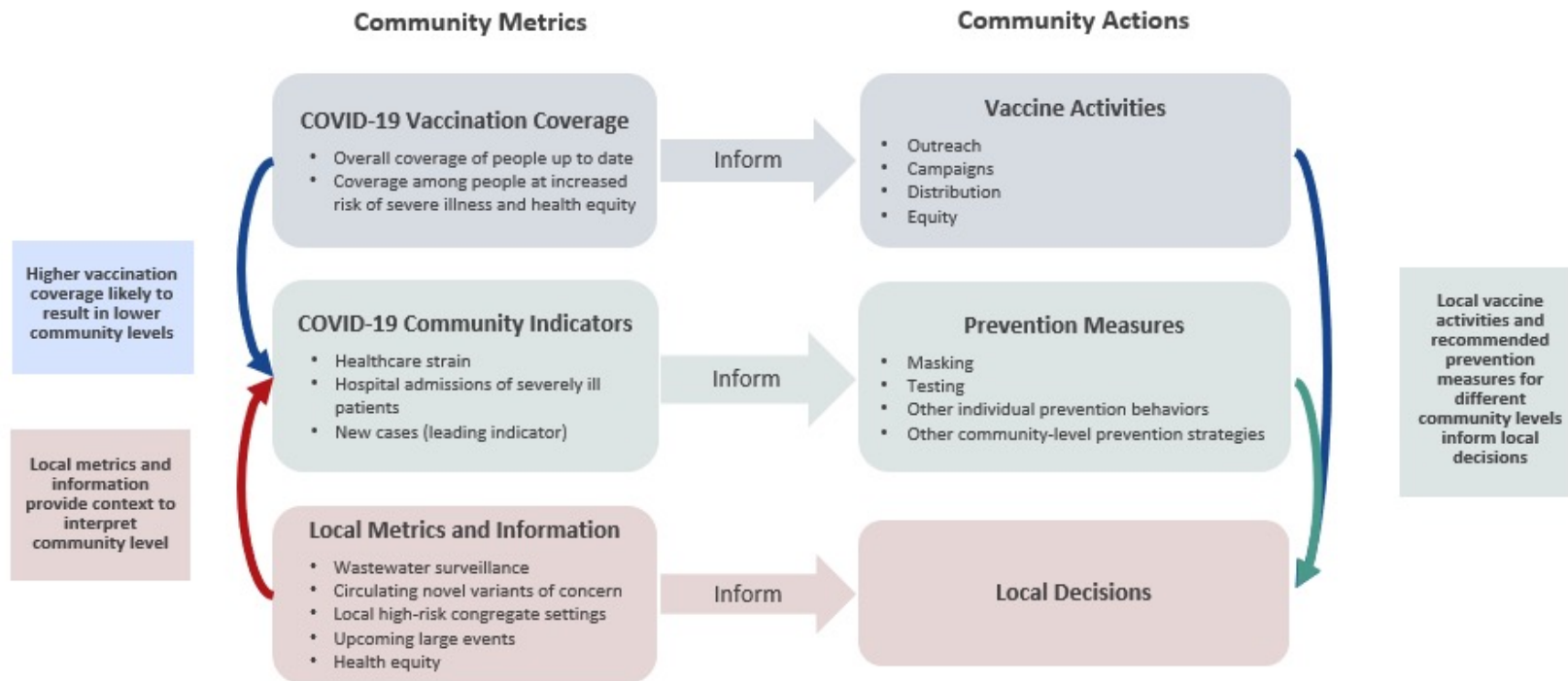
People may choose to mask at any time. People with symptoms, a positive test, or exposure to someone with COVID-19 should wear a mask.

If you are immunocompromised, learn more about [how to protect yourself](#).

[www.cdc.gov](http://www.cdc.gov)



# Framework for Monitoring and Prevention



# CDC: Contact Tracing Update

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- Ended the recommendation for universal case investigation and contact tracing and encourages health departments to focus these activities on high-risk settings
- This updated guidance is in response to changes in the nature of the pandemic and the increasing availability of treatment and tools — such as COVID-19 vaccines and self-tests, and strategies like wearing a well-fitting mask — that reduce transmission and help prevent serious illness and death
- Advises health departments to focus their efforts on the highest risk settings — such as long-term care facilities, correctional facilities, and homeless shelters — and encourage people with COVID-19 to quickly notify their own close contacts
- Health departments should prioritize notification of close contacts with exposure in the previous 5 days who are identified during the priority investigations listed above, if such information is available
- Health departments should also provide timely outbreak response support to K-12 schools, ECEs, IHEs, and businesses and organizations that provide essential services if they report large-scale outbreaks



<https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/prioritization.html>

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# Isolation and Quarantine Calculator

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Isolation and Quarantine Calculator

People are considered fully vaccinated for COVID-19 at least two weeks after they have received the second dose in a 2-dose series (Pfizer/ Moderna), or at least 2 weeks after they have received a single-dose vaccine (Johnson and Johnson). **NOTE:** If it has been less than two weeks since you received the vaccine, or if you still need to get your second dose, you are **NOT** fully vaccinated.

Please select the situation that best describes you

- I tested positive for COVID-19
- I have [symptoms](#) of COVID-19 but have not been tested and don't know if I was exposed to COVID-19



<https://www.coronavirus.in.gov/quarantine-and-isolation-guidance-center/>



# Vaccine Clinical Considerations

Primary series vaccine manufacturer	Age group	Number of doses in primary series	Number of booster doses	Interval between 1 <sup>st</sup> and 2 <sup>nd</sup> dose *	Interval between primary series and booster dose
Pfizer-BioNTech	5–11 years	2	NA	3 weeks	N/A
Pfizer-BioNTech	≥12 years	2	1	3-8 weeks**	≥5 months
Moderna	≥18 years	2	1	4-8 weeks**	≥5 months
Janssen	≥18 years	1	1	NA	≥2 months

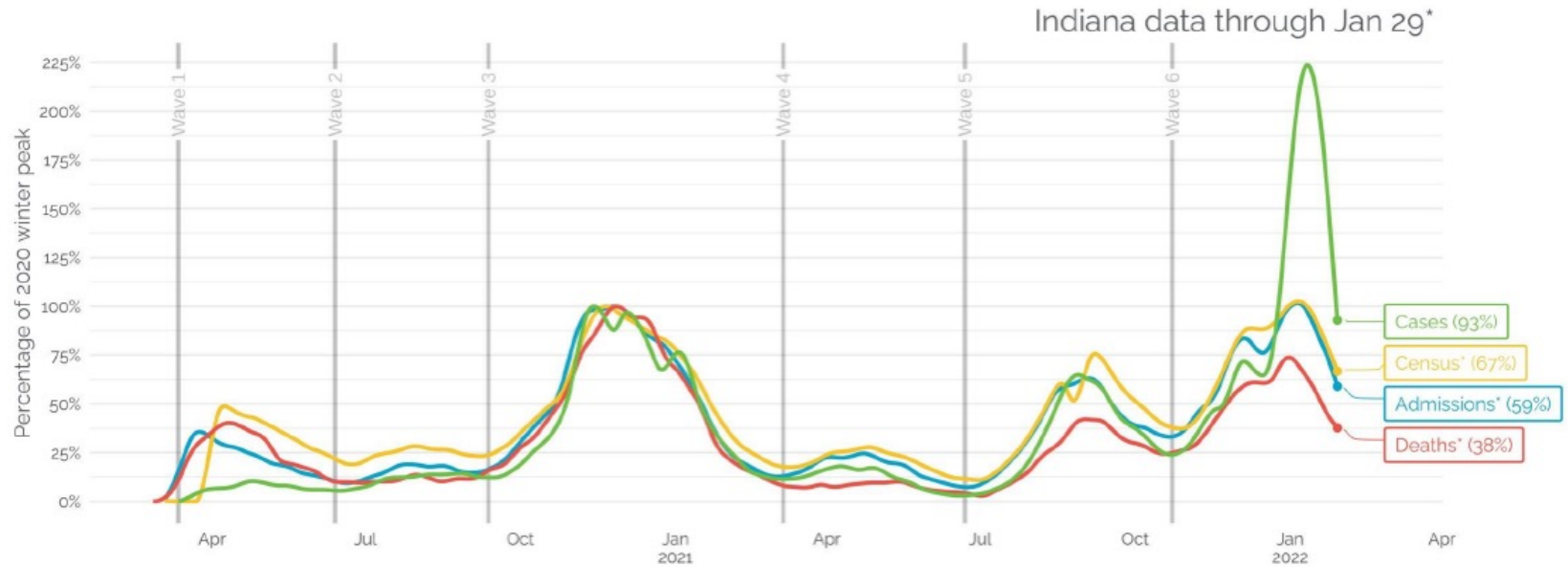
\*For the vaccination schedule for people who are moderately or severely immunocompromised, see [Table 3](#).

\*\*An **8-week** interval may be optimal for people ages 12 years through 64 years, and especially for males ages 12 through 39 years, who are not moderately or severely immunocompromised. A **shorter interval** (3 weeks for Pfizer-BioNTech; 4 weeks for Moderna) between the first and second dose remains the recommended interval for: people who are moderately or severely immunocompromised; adults ages 65 years and older; and others who need early protection due to increased concern about community transmission or risk of severe disease.

<https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html>



How the current wave compares to the 2020 winter peak



\*To better align with cases, hospital admissions and census are shifted 8 days earlier, and deaths 15 days

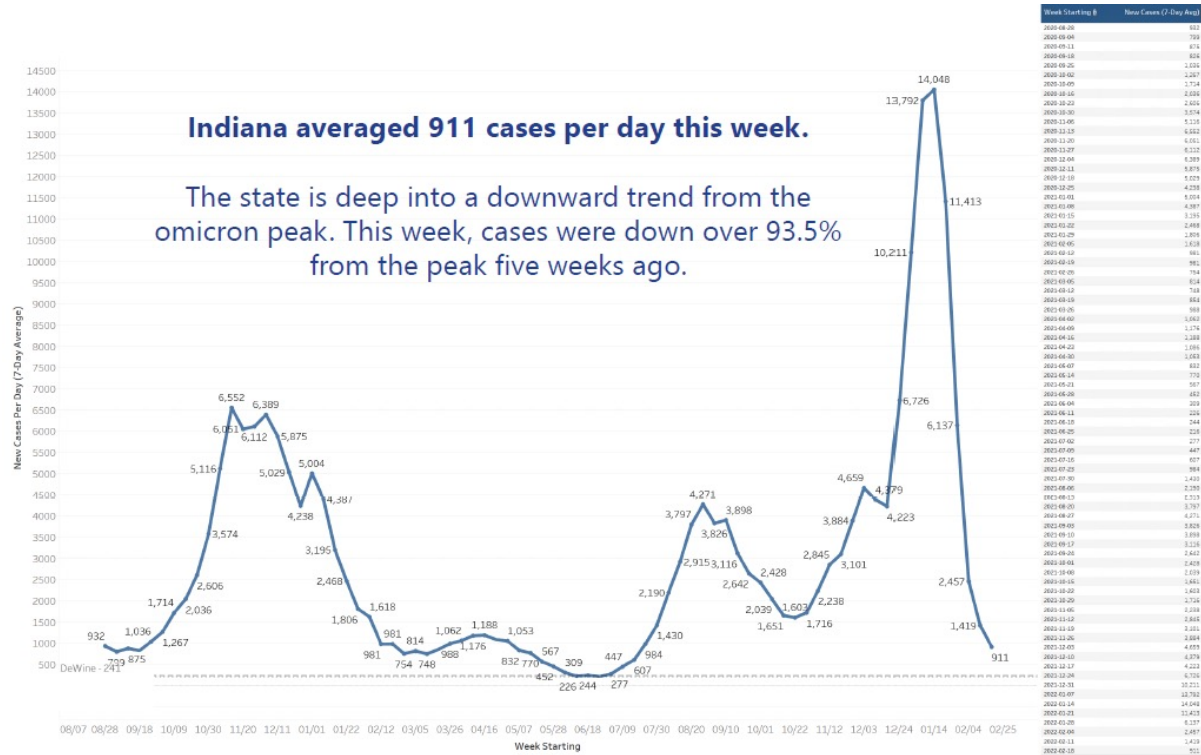
Sources: <https://www.coronavirus.in.gov/indiana-covid-19-dashboard-and-map>  
<https://hub.mph.in.gov/organization/indiana-state-department-of-health>

## Cases and Trends



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# Case Trend

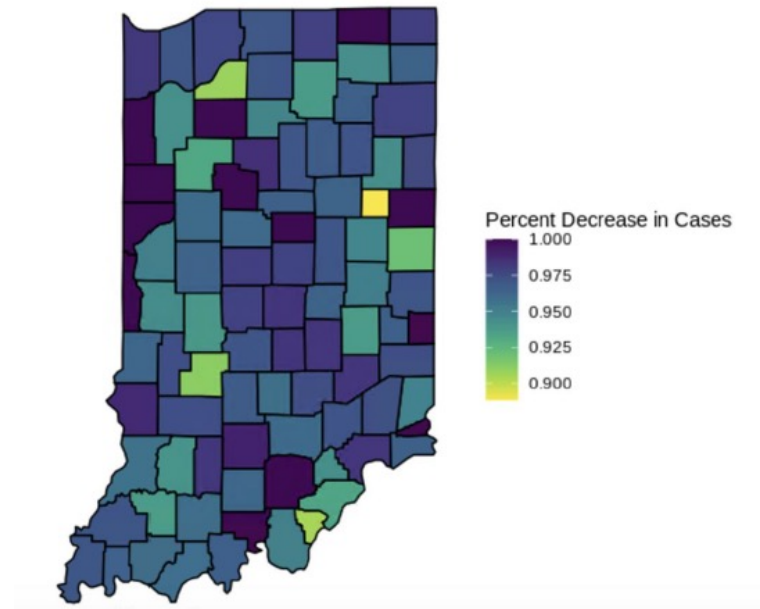


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# Geographic Trends

All counties have seen a decline of 90% or more since their omicron peak.

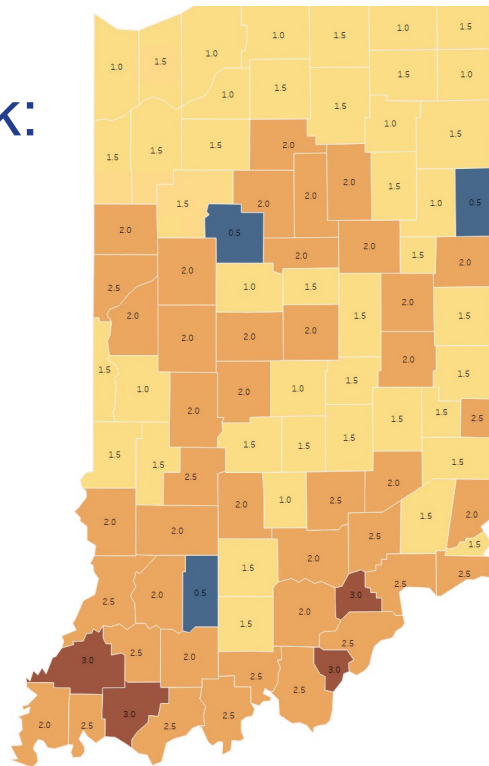
Percent Decrease in Cases by County since their Omicron Peak  
Uses cases as of 2022-02-22



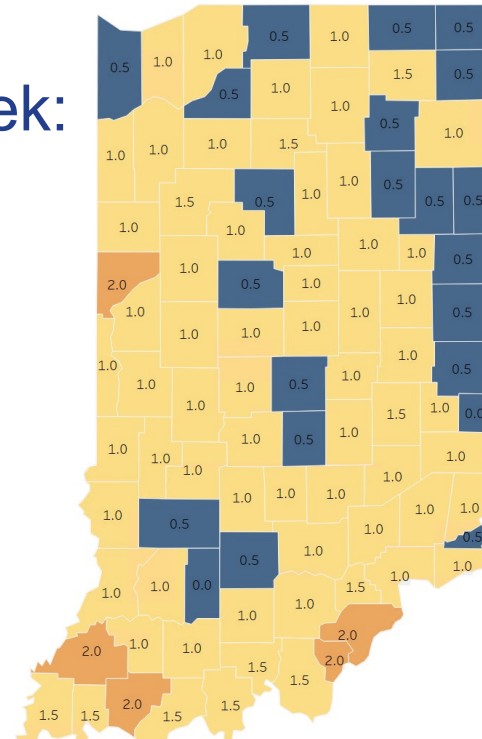
# County Metrics

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Last week:

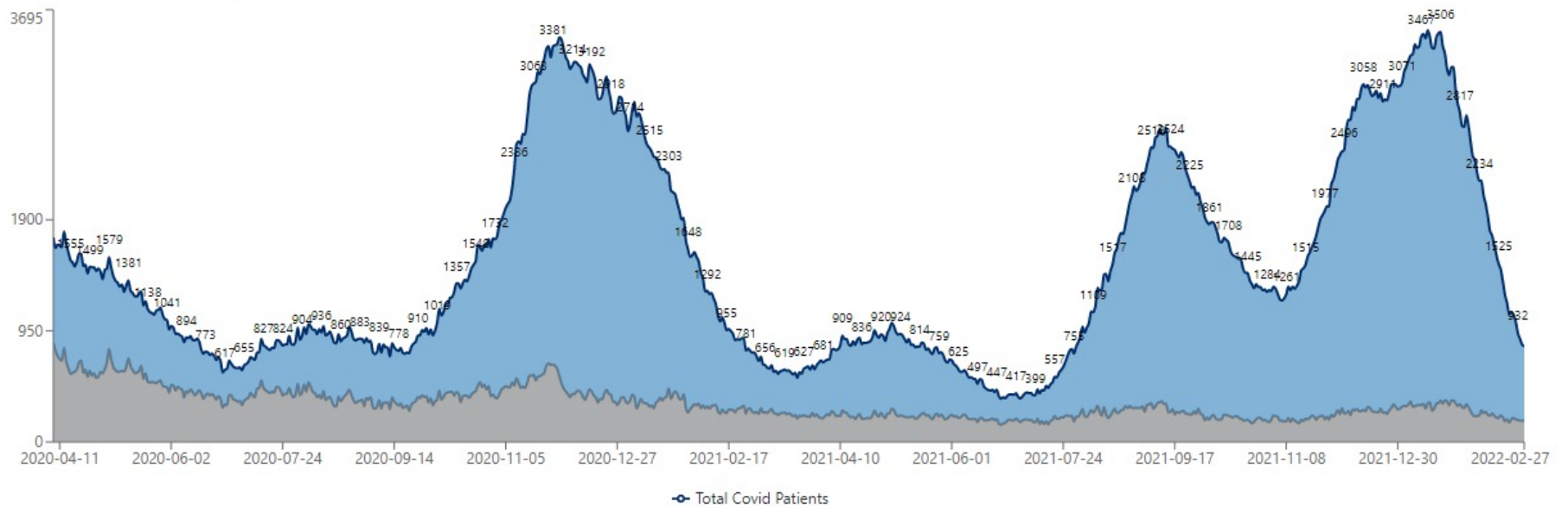


This week:



# Hospital Census

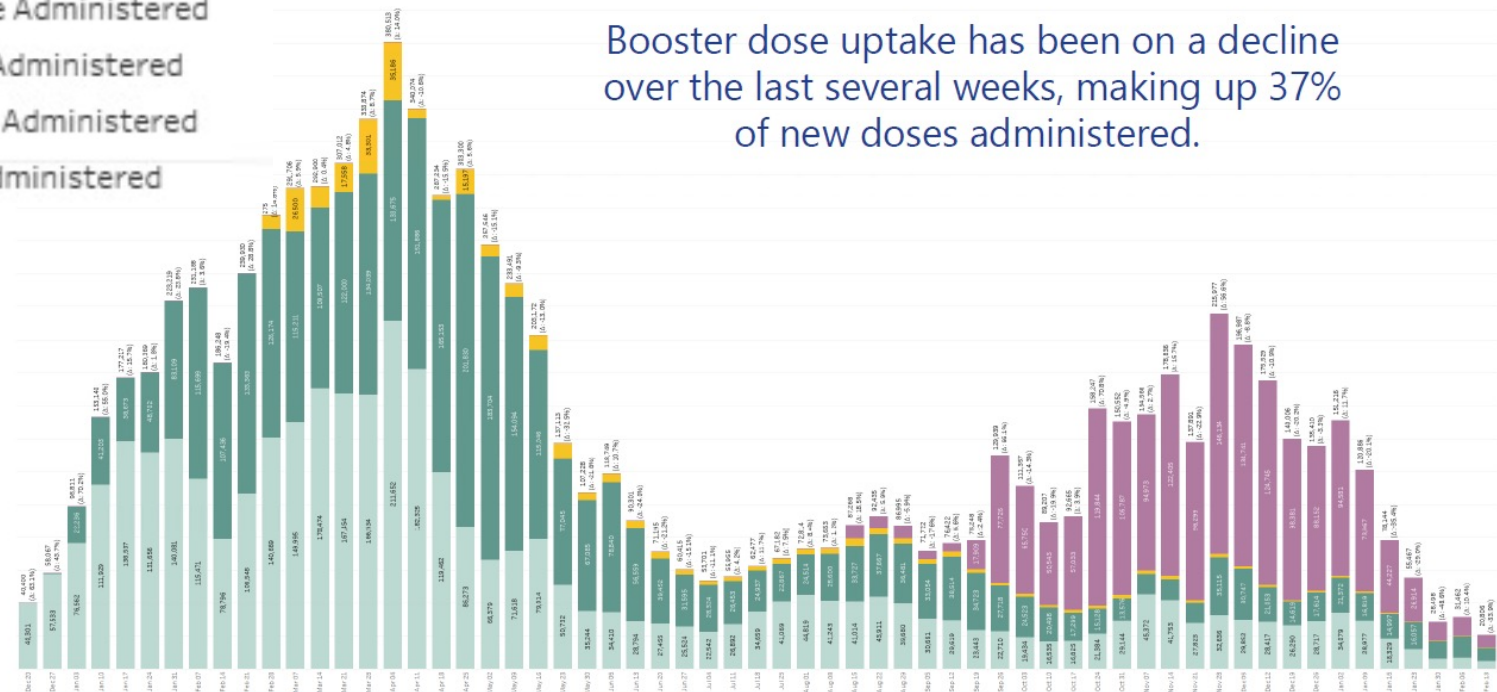
Statewide COVID-19 Hospital Census <sup>1</sup>



# Vaccinations by Week

- Booster Dose Administered
- Single Dose Administered
- Second Dose Administered
- First Dose Administered

Booster dose uptake has been on a decline over the last several weeks, making up 37% of new doses administered.





## Future State





# Future State

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- Nationally: announcing “National COVID-19 Preparedness Plan” today—normalizing response while preparing for another variant
- Indiana
  - Implementing our demobilization plan
  - Consolidating our dashboard and adapting our metrics
  - Continuing to have as least one vaccination and testing site in every county
  - Continuing surveillance for variants and disease burden, similarly to flu
- Boosters
  - Pfizer and Moderna both trialing omicron-specific booster for possible use this fall
  - Not sure how frequent boosters will be—depends on variant and activity



# Questions?

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# Thank you for joining us!

Your feedback is very valuable to us and will help us shape future virtual learning & action events.

 On a scale of 1 to 5 where 5 represents "Very Satisfied" and 1 represents "Very Dissatisfied", indicate your level of satisfaction with this session.

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