

## COVID-19 Coordination Meeting February 17, 2023

## Notes

## 1) Welcome (Andrea Skewes)

2) Situational overview (Abi Collingwood)

- Averaging about 1200 tests a day
- Cases are not our most informative trend
- Over the past month we have seen a gradual increase
- Over the past two weeks we have seen people going to the hospital for COVID or being hospitalized due to COVID
- Not seeing this trends nationally
- Wastewater
  - Elevated level of SARS Covid 2 with 70% of our sites
  - $\circ$   $\;$  Seeing this more in Wasatch Front, Davis, Weber and Morgan counties
  - $\circ$   $\;$  Not seeing the same increases in cases vs wastewater  $\;$
  - Long term goal is to be able to use them for forecasting
- Vaccine uptick
  - Bivalent boost trends
    - 65+ 44% have received this booster
    - 88% are fully vaccinated in this age group
    - By race/ethnicity
      - Hispanic 8%
      - Pacific Islander .6%
    - Higher in our lower HII and not higher in the HII groups
  - Unvaccinated populations
    - 14x risk of dying than bivalent boosted
  - PHE ending
    - Surveillance is collected independently
    - COVID will remain a reported disease
    - Hospitalizations
    - Deaths Syndromic surveillance
    - Wastewater
    - Unable to track hospitalization beds due to COVID
  - Flu is at its seasonal low
  - RSV report is updated weekly through electronic lab data
    - RSV Net Data collected by Salt Lake county
- Questions:
  - Dr Sheffield: Where can we get the RSV data? Bureau of Epi Data page
    - Our RSV report is updated weekly here, under the "Utah Surveillance Data" bullet
    - https://epi.health.utah.gov/respiratory-syncytial-virus/
  - Michelle: Hospital COVID-19 reporting will continue to April 2024 though the cadence will likely decrease



3) Variant landscape (Kelly Oakeson)

- Over the past weeks, we are seeing the trend of xbb.1.5 to increase across the US
  - Keeping an eye on CHW.1.1 and bn.1
  - Across the US, the xbb variants have taken over
  - Towards the West, more of a viral diversity
- Wastewater
  - Predominantly xbb and bq variants coming in second
  - In Utah, bq.1 and bq.1.1 is the most dominant
  - If the trend continues, it is likely that ch.1 and ch.1.1 will become more prevalent here
  - Most recent data are 5 samples. Xbb, ch and bq variant
- From the beginning of these meetings until now
  - Yellow, green, purple and dark purple are omicron variants
  - Will continue monitoring sequencing data in wastewater
- Questions:
  - How many viruses have been sequenced? Over 2000

4a) Long COVID - Overview (Rachel Kubiak)

- Syndrome that can follow an acute COVID 19 infection
  - Symptoms have to last 4 weeks
  - Can impact multiple bodily systems
  - Severity ranges from mild to severe
  - Recovery over months to years
  - ADA protected disability
- Getting diagnosed and finding treatment can be challenging
  - More common among people that are unvaccinated compared to vaccinated people
  - People with severe disease
  - More prevalent in Utah versus other states
    - Utah ranks 4th in the world
- Goals:
  - Characterize the burden of long COVID in Utah
  - Identify gaps
  - Provide data to advocate for funding
- Surveillance:
  - Different data streams
  - Different overlapping populations
  - Different related definitions
- Data Streams:
  - ICD 10 Code
  - Clinical care
  - Survey options nationally-2 survey questions
  - Patient surveys-confident estimate of the prevalence
  - Needs assessments for LHDs, Tribes, I/T/U facilities
  - Long COVID Surveillance work group
- Outreach: Presentations and written descriptions for:
  - Various healthcare providers including medical associations, rural clinics, tribes and I/T/U, and LHDs
    - Compiling list of local resources and information for patients, providers, LHDs, I/T/Us
    - Contact: dcpcdcrfrwk@utah.gov



4b) Long COVID - Patient perspective (Lisa O'Brien)

- Long Haulers: utahlonghaulers@gmail.com
  - Provide support for over 4500 members
  - Motivate the establishment of post covid clinics
- 36+ million Americans impacted
- Identified 203 symptoms
- Cognitive dysfunction
  - Challenges:
    - Ongoing symptoms
    - Lack of education/awareness
    - Access to care
    - Financial
    - Socioeconomic
    - Mental health
- Workforce:
  - 71% unable to work for 6+ months or needed continuous medical treatment
  - 18% did not return to work
  - 75% are under the age of 60
  - 83% listed as essential workers
  - (Established claims)
  - Legislation
    - ADA
    - RECOVER initiative
    - COVID Long Haulers Act & CARE for Long Covid Act
  - What can be done to those with Long Covid?:
    - Information and Awareness Campaigns
    - Treatment and Support Programs
    - Data Collection and Research
    - Financial Assistance
    - Collaboration with Employers
      - UofU
      - Bateman Horne Center
      - IHC Navigation System
      - Caring Connections-weekly support meeting
      - Northern Utah Rehabilitation Center
- Questions:
  - Dr. Pavia-We also need to prevent anyone else from going thought this by continuing to emphasize vaccination which, while not perfect, substantially reduces the risk of developing long covid

5) Impact of public health emergency ending (Kendra Babitz)

- Ends 3/11/2023
- Implications:
  - Testing: EUA for test kits are not connected to the federal PHE and will still be in tact
    - Ongoing supply may be impacted due to congressional budget
  - Surveillance: Largely unaffected
  - Treatment: EUAs for current therapeutics will remain in place
  - Vaccine: Does not affect the EUA for COVID 19 immunization and will remain available with no out of pocket expense
    - Allows for vaccines to be provided for the VFC program



- RISE: No impacts
  - Anticipating an increase in Care Navigation
- LTCF: May become more difficult if they decide to no longer provide tests
- Health Systems
  - Facility requirements and care location exemptions
    - Flexibilities to reduce administrative burden on hospitals will end with federal PHE
- Medicaid
  - 3/1/23 will begin reviewing of eligible medicaid recipients and will continue until December 2023 since congress uncoupled this
  - Ends uninsured COVID 19 testing, treatment and vaccines
- Finance
  - RFP to reimburse providers who are willing to continue to provide testing, treatment and vaccination
  - FEMA may not be available

6) Questions/Comments (Open)