





### MEDICAL ADVISORY TEAM AND MODELING

JULY 17, 2020 SECRETARY DAVID R. SCRASE, M.D.

INVESTING FOR TOMORROW, DELIVERING TODAY.

### NM MEDICAL ADVISORY TEAM (MAT)

- In accordance with 2018 New Mexico Crisis
  Standards of Care Plan and declaration of
  the Public Health Emergency, NMDOH
  activated the MAT, which serves an advisory
  role to DOH Leadership to:
  - Facilitate Coordination and Planning
  - Develop recommendations, Guidelines or Protocols
  - Provide guidance
  - Prepare to address emerging questions
  - Source for expert opinion
  - Source for identification of resources
- Led by Mike Richards, MD, for 3 months, now Laura Banks, DVM, both from UNM
- Over 170 participants at peak activity
- Very strong vehicle for a public-private partnership to fight COVID-19 pandemic



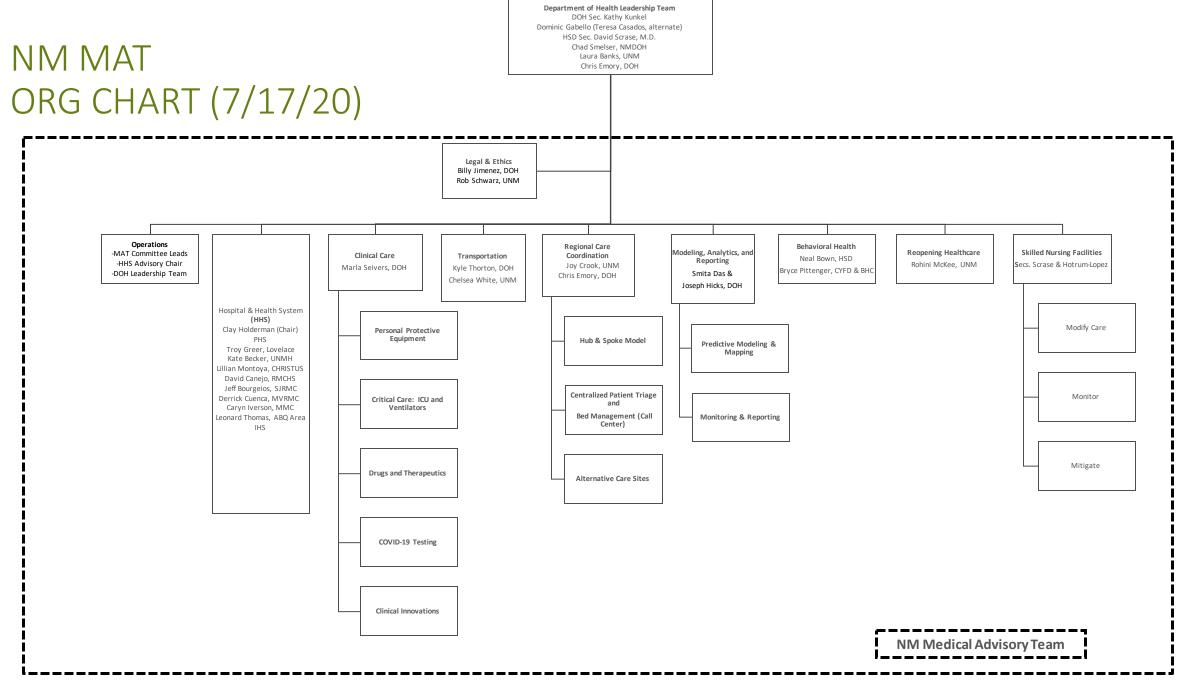
Michael Richards, MD, MPA
Vice Chancellor for Clinical
Affairs, UNM Health System



Laura Banks, Assistant Professor,

Dept. of Emergency Medicine,

School of Medicine, UNM



### NM MEDICAL ADVISORY TEAM (MAT)

### MAT's 47 public documents organized using tags below:

- Behavioral Health
- Children & Youth
- Clinical Care
- Drugs & Therapeutics
- Nursing Facilities/Long-term Care
- Personal Protective Equipment (PPE)
- Public Health
- Regional Care Coordination
- Reopening Healthcare
- Testing
- Workforce

#### **MAT Resources**

#### Phase 1 Reopening Guidelines for Dental Care Settings (Revised)

Jul 2, 2020 | MAT Resources

A revision to guidelines published on 5/8/20, the NMDOH details reopening guidelines developed jointly by the NM Medical Advisory Team (MAT) and the NM Dental Association. The NMDOH requires dental facilities to submit an attestation affirming they will comply with...

Literature and Online Resources on Interventions to Support Residents of Long-Term Care Facilities Experiencing Social Isolation, Failure to Thrive, and Cognitive Impairment

Jun 22, 2020 | MAT Resources

The MAT highlights research and online resources for interventions to support residents of Long-Term Care facilities experiencing social isolation, failure to thrive, and cognitive impairment. Most research in this area propose interventions not suitable during the...

Recommended Activities for Residents of Long-Term Care Facilities Designed to Mitigate Feelings of Social Isolation during COVID-19 Pandemic

Jun 22, 2020 | MAT Resources

The MAT outlines several activities that long-term care facilities may consider based on the health status of individual residents, physician orders, and the level of care provided. All activities should include COVID-safe practices and physical distancing. Download...



#### SAMPLE OF RECENT MAT RESOURCES

- Phase 1 Reopening Guidelines for Dental Care Settings (Revised)
- <u>Literature and Online Resources on Interventions to Support Residents of Long-Term Care Facilities Experiencing Social Isolation, Failure to Thrive, and Cognitive Impairment</u>
- Recommended Activities for Residents of Long-Term Care
   Facilities Designed to Mitigate Feelings of Social Isolation
- COVID-19 Best Practices across NM Long-term Care Facilities
- Prioritization of Remdesivir Treatment among COVID-19
   Patients
- Antibody testing guidelines for healthcare providers
- COVID-19 Antibody testing guidelines for the public
- COVID-19 Antibody testing overview
- Recommendations for Long-Term Care Facilities re: Facility
   Transfers and Care Coordination for COVID-19 Positive (and Negative) Residents





# COVID-19 Dental Advisory Team July 2, 2020

Jennifer Thompson, DDS – General Dentist, Farmington
NMDA President

Michael Sparks, DDS, MS – Periodontist, Albuquerque NMDA President-elect

Kim Martin, DMD – General Dentist, Las Cruces
NMDA Vice President

David Manzanares, DDS – General Dentist, Albuquerque NMDA Treasurer

Tom Schripsema, DDS – General Dentist, Albuquerque NMDA Executive Director



### COMPLETED MAT INQUIRIES

1.	PPE for a single average hospitalization, by type	26.	MAT Call Center recommendation
2.	Testing methods overview, effectiveness, and availability	27.	Resumption of medically necessary procedures: medical offices
3.	What is the role of BiPAP and CPAP in treatment of COVID?	28.	Resumption of medically necessary procedures: surgeries and hospita
4.	Number of ventilators NM have on-hand, and approval for sale	20	procedures
5.	Remdesivir Treatment Recommendations	29.	Public health gating criteria
6.	Review of travel order	30. 31.	COVID-19 safe practices for all New Mexicans  Antibody messaging for clinicians
7.	Review of Wonfo test kit	32.	Antibody messaging for providers
8.	Review of Gibson proposal, and Hilton Gardens	33.	Antibody testing overview and state recommendations
9.	Review of DOH on-line screening tool	34.	Standardized Treatment Guidelines for acute care facilities
10.	PPE recommendations for ICF's/IID's	35.	Guidelines for treatment of COVID-19 associated coagulopathies
11.	PPE for stockpile, PPE burn rate, sterilization, prioritization, 3D-printed PPE feasibility	36.	Use of hydroxychloroquine (HCQ) for treatment of COVID-19
12.	Review of COVID-only hospital	37.	Use of BH Agencies for COVID-19 test sites
13.	Equipment list for MFS	38.	Pediatrictesting
		39.	Remdesivir distribution
14.	Appolo-19 awareness for the Governor		PPE State stockpile distribution
15.	Cloth masks effectiveness	41.	Choir singing restrictions
16.	Should NM obtain hydroxychloroquine sulfate for treatment?	42.	PPE Reprocessing guidance
17.	Tracking intubation drug supply	43.	Pediatric Inflammatory Syndrome guidance
18.	Provisions for people who may experience dangerous levels of alcohol withdrawal	44.	Pediatric masking guidance
19.	mLife DX COVID test kits offer	45.	COVID-19 testing
20.	Deployment of mobile PPE sterilization unit	46.	Mask related disability accommodations
21.	AirLock389 Anti-Viral N8 Mask validity	47.	Abbott ID NOW validity
22.	Election preparedness	48.	Long-term care data collection
23.	Public health practice implications for COVID-19 in children	49.	Strategies to increase PPE supply and decrease consumption
24.	Relaxing requirements for Pas and podiatrists	50.	How to define recovered cases
25.	Evaluation of vents and kits offered by Odyssey	51.	Series of recommendations related to long-term care facilities

### COMPLETED MAT INQUIRIES

- 52. Phase 1 Reopening Guidelines for Dental Care Settings (Revised)
- 53. Literature and Online Resources on Interventions to Support Residents of Long-Term Care Facilities Experiencing Social Isolation, Failure to Thrive, and Cognitive Impairment
- 54. Recommended Activities for Residents of Long-Term Care Facilities
  Designed to Mitigate Feelings of Social Isolation
- 55. COVID-19 Best Practices across NM Long-term Care Facilities
- 56. Prioritization of Remdesivir Treatment among COVID-19 Patients
- 57. Antibody testing guidelines for healthcare providers
- 58. COVID-19 Antibody testing guidelines for the public
- 59. COVID-19 Antibody testing overview
- 60. Recommendations for Long-Term Care Facilities re: Facility Transfers and Care Coordination for COVID-19 Positive (and Negative) Residents
- 61. COVID-19 Contingency Operational Spaces & Practices currently provided for by waivers
- 62. Current and recommended programs
- 63. LTC Facility Visitation Review of States
- 64. Side by side data collection comparison
- 65. State Actions for COVID Management and Response

### MAT AND DOC MAJOR **CURRENT** ACTIVITIES

#### **Regional Care Coordination:**

- Hospitalization volume increasing throughout the state
- Closely monitoring TX and AZ hospital capacity
- Increased bed utilization among many hub hospitals resulting from non-COVID patients seeking healthcare continues
- Monitoring Remdesivir treatment
- Collating HHS required data to help hospitals

#### **Testing:**

- Drafting order mandating data collection for priority population at time of testing
- Working with hospitals systems to develop a coordinated, unified testing strategy
- Evaluating feasibility and validity of COVID-19 "pool testing"

#### **Modeling:**

- Exploring alternative methodologies for calculating rate of spread that better support decision making
- Refining modeling to support school reopening decision making

#### **Long-term Care:**

- Reviewing visitation guidelines from the CDC and other states to determine parameters for resuming visitation in facilities
- Revising clinical care and safety protocols in Intermediate Care Facilities

#### Other activities:

- Working with Economic Recovery Council to develop public/industry
   COVID-19 Safe Practices in a COVID-19 world
- Finalizing PPE long-term distribution strategy
- Working with state agencies on long-term human resource management for state staff responding to pandemic, including addressing behavioral health needs

### MODELING IMPACT OF COVID-19 IN NM

- NM COVID-19 State model is an Enhanced SIR Model, meaning it estimates number of Susceptible, Infectious, and Recovered (SIR) COVID-19 individuals over time.
- The model is developed in partnership with Presbyterian Health Services, Los Alamos National Laboratory, and NM Department of Health.

- Model incorporates a variety of near real-time data, including:
  - COVID-19 case information
  - State-wide testing rates
  - Geographic distribution of cases and testing
  - Clinical outcomes including hospitalization, intensive care, and mechanical ventilation
  - Healthcare system resource capacity and demand
  - Differences in disease risk using comprehensive data on social determinants of health, Johns Hopkins Adjusted Clinical Groups, and health plan claims data

# MODELING IMPACT OF COVID-19 IN NM: REGIONAL APPROACH

- In counties with smaller number of COVID-19 cases, data points are fewer, which increases likelihood of inaccurate modeling projections
- Therefore, NM modelers adopted a regional approach to modeling COVID-19's impact on the state
- Regions are based on NMDOH's planning regions
- Model is updated each Tuesday and posted online



### MODELING ASSUMPTIONS FOR WEEK OF 7/12/20

Variable	Measured Value	Value as of 7.13.20
R_Effective (Mean number of secondary COVID-19 cases produced by one COVID-19 case)	Actual Measured Daily value by key region	R_eff=1.1
Positive Test Multiplier (Number used to multiply current cases to estimate actual number of cases, as many people with COVID-19 have mild/no symptoms)	Calculated by LANL	5.1
Hospitalization and Mortality	Actual rolling value / estimated number of total infected	Medical 0.3% ICU 0.2% Vent Rate 49% of ICU Case Fatality Rate 5.1%
Length of Hospital Stay	Actual rolling value / estimated number of total infected	Medical 5 days ICU 14 days ICU on Vent 14 days

### MODELING WEBSITE

#### What is modeling?

Modeling is a powerful tool to assist health policy development and disease prevention and control. In NM, COVID-19 modeling helps in planning the State's response to COVID-19 by attempting to predict the impact of COVID-19 on health systems and populations. However, models are just one tool and should not be considered in isolation from data and lived experiences in the field.

DOWNLOAD LATEST WEEKLY MODELING UPDATE

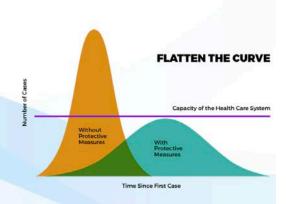
Report from July 14, 2020 | View Previous Reports

DOWNLOAD NM SCHOOL REOPENING MODELING SCENARIOS

#### NM COVID-19 Model is the best for our State

Many COVID-19 models have been developed, including state-based, regional, national, and international models. However, the NM model is the best fit for our state for several reasons.

- The NM model is updated daily based on actual NM data, ensuring projections reflect the most recent information.
- The NM model incorporates social distancing and provides risk adjustment for age, disease burden, and social determinants of health by county.
- The NM model considers the unique characteristics of our state, including geographic, socioeconomic, and demographic information.





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### COVID-19 in New Mexico: Epidemiologic and Modeling Update

July 14, 2020

1190 S. St. Francis Drive • Santa Fe, NM 87505 • Phone: 505-827-2613 • Fax: 505-827-2530 • nmhealth.org



### PUBLIC HEALTH GATING CRITERIA FOR REOPENING NM

- Covered by John Bingaman on Wednesday of this week
- Many cycles of learning re which measures help most for planning
  - Some metrics more helpful when cases rising; some when falling

#### **Public Health Gating Criteria for Reopening New Mexico**

Home » Public Health Gating Criteria for Reopening New Mexico

The COVID-19 pandemic is a long-term event that requires careful, evidence-based decision making and policy planning that both saves lives, and promotes economic recovery.

Therefore, the State has developed public health gating criteria that are part of New Mexico's phased plan for a safe and gradual reopening of the economy and society. Gating criteria are thresholds New Mexico must satisfy before beginning to relax social distancing restrictions and closures.

The criteria are assessed regularly and if the levels meet predetermined, evidence-based targets, the State will assess the ability to move to the next phase. Gating criteria, in conjunction with the COVID Safe Practices Guide for Individuals and Employers (developed by the NM Economic Recovery Council), are designed to promote safety of community members, employees, and customers.

The gating criteria consists of six measures each with an assigned target. In evaluating reopening, officials will consider the State's ability to achieve a decreasing transmission rate, adequate testing, expansive contact tracing and isolation, and sufficient hospital capacity.

Category	Measure	Target	Current Status	Status Updated Each:
Spread of COVID-19	1. Rate of Spread	1.05 or less	1.08	Mon, Wed Fr
Testing Capacity (general and vulnerable populations)*	2. Number of COVID-19 tests per day (7-day rolling average)	5,000	6,395	Mon, Wed
Contact Tracing and Isolation Capacity	3. Time from COVID-19 positive test result to case isolation	24 hours or less	53 hours	Tues
Contact Tracing and Isolation Capacity	4. Time from COVID-19 positive test result to quarantine of case contacts	36 hours or less	78 hours	Tues
Statewide Healthcare System Capacity	5. Adult ICU Beds occupied across 7 NM Hub Hospitals**	less than 460	261	Tues
Statewide Healthcare System Capacity	6.7-day supply of personal protective equipment (PPE) across 7 NM Hub Hospitals**	7-day supply in at least 6 out of 7 Hub Hospitals	7 out of 7 hospitals	Tues

\*Per CDC: adults 64+, people with asthma, chronic lung conditions, immune deficiency and those receiving cancer treatment, serious heart disease, diabetes, on dialysis, severe obesity, chronic liver disease, people living in nursing facilities and other congregate settings, people experiencing homelessness

\*\* University of NM (ABQ), Presbyterian (ABQ), Lovelace Medical Center (ABQ), CHRISTUS St. Vincent (Santa Fe), San Juan Regional Medical Center (Farmington), Memorial Medical Center (Las Cruces), Eastern NM Medical Center (Roswell)

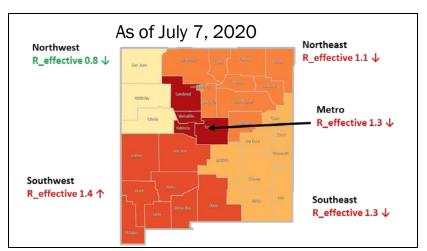


# COVID-19 RATE OF SPREAD (R\_effective)

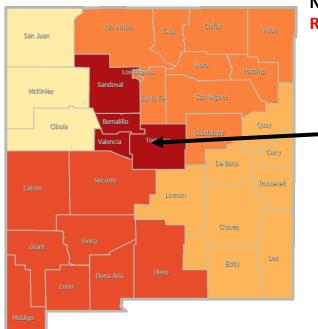
#### Northwest

R\_effective 0.9 ↑

Southwest R\_effective 1.1 ↓



Courtesy of Presbyterian Healthcare Services – July 13, 2020.



Northeast

R\_effective 1.1 =

Metro

R\_effective 1.1  $\downarrow$ 

Southeast

R\_effective 1.0 ↓

Key

Low Level Endemic <1.0

Approaching Low Level Endemic 1.0-1.05

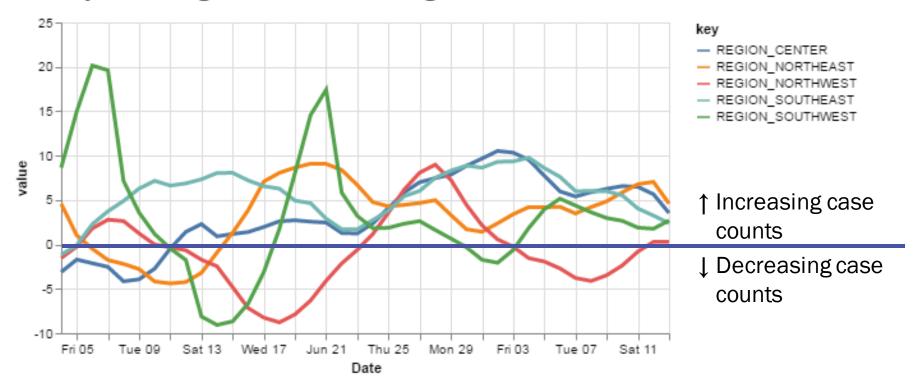
Requiring further mitigation >1.05



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# Northwest continues to have the lowest relative growth rate, but has been increasing.

#### 14-day relative growth rate (%), Regions





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## COMMENTS AND QUESTIONS

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