An Update for NYS Healthcare Providers on COVID-19

January 28, 2021
Agenda

• Global, National, New York State Updates
• COVID-19 Vaccine “Clinical Pearls”
• Testing Updates
• SARS-CoV-2 Vaccine and Pregnancy
• SARS-CoV-2 Quarantine Updates
• Multi-System Inflammatory Syndrome in Children and Adults MIS-C/A Updates
• COVID Long Haulers
• Monoclonal Antibody Therapeutics
• Clinical Guidance updates
• Q & A
Recordings will be available immediately:

NYSDOH COVID-19 Healthcare Provider website

In addition to YouTube, an on-demand version of our weekly sessions for healthcare providers in NYS is now available as a podcast – search NYSDOH
Disclaimer

• The situation is rapidly evolving, as is our understanding of this new virus.

• All of the information presented is based on our best knowledge as of today.
**Situation Summary: COVID-19 Global, 1/24/2021**


<table>
<thead>
<tr>
<th>Region</th>
<th>Confirmed Cases</th>
<th>Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Global</td>
<td>96,2890,844</td>
<td>2,112,759</td>
</tr>
<tr>
<td>Western Pacific</td>
<td>1,347,893</td>
<td>23,307</td>
</tr>
<tr>
<td>Europe</td>
<td>32,848,998</td>
<td>706,293</td>
</tr>
<tr>
<td>South-East Asia</td>
<td>12,656,504</td>
<td>194,449</td>
</tr>
<tr>
<td>Eastern Mediterranean</td>
<td>5,507,649</td>
<td>130,901</td>
</tr>
<tr>
<td>Africa</td>
<td>2,462,083</td>
<td>57,902</td>
</tr>
<tr>
<td>America</td>
<td>38,861,668</td>
<td>910,741</td>
</tr>
</tbody>
</table>
Situation Summary: COVID-19 Global, 1/24/2021
www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports
Figure 2. COVID-19 cases per 100,000 population reported in the last seven days by countries, territories and areas, 18 January through 24 January 2021**
Situation Summary: COVID-19 Global, 12/15/2020
www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports
CDC COVID Data Tracker (Jan 26, 2021)

- **Total Cases**: 25,301,166
- **New Cases**: +148,733
- **Average Daily Cases Per 100K in Last 7 Days**: 50.2
- **Total Deaths**: 423,519
- **New Deaths**: +3,692

Rate down from 74.8/100K

Situation Summary: COVID-19 U.S. (Jan 26, 2021)
NYSDOH COVID-19 Tracker (Jan 27, 2021)

Found at: NYSDOH COVID-19 website

Statewide

Total Persons Tested
31,128,149

Total Tested 1/26
202,661

Total Tested Positive
1,361,082

Sex Distribution of Positive Cases:

<table>
<thead>
<tr>
<th>Female</th>
<th>Male</th>
<th>Unknown</th>
</tr>
</thead>
<tbody>
<tr>
<td>50.5%</td>
<td>48.4%</td>
<td>1.1%</td>
</tr>
</tbody>
</table>

New Positives 1/26
11,028

Persons Tested Positive by County

County Stats: None
% Positive Results Over Time - All Regions

<table>
<thead>
<tr>
<th>Region</th>
<th>Total Persons Tested</th>
<th>Total Tested Positive</th>
<th>% Positive, Yesterday</th>
<th>% Positive, 7-day Avg</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capital Region</td>
<td>8,224</td>
<td>522</td>
<td>6.3%</td>
<td>6.2%</td>
</tr>
<tr>
<td>Central New York</td>
<td>8,954</td>
<td>292</td>
<td>3.3%</td>
<td>4.3%</td>
</tr>
<tr>
<td>Finger Lakes</td>
<td>9,814</td>
<td>527</td>
<td>5.4%</td>
<td>4.9%</td>
</tr>
<tr>
<td>Long Island</td>
<td>29,599</td>
<td>2,061</td>
<td>7.0%</td>
<td>6.8%</td>
</tr>
<tr>
<td>Mid-Hudson</td>
<td>19,741</td>
<td>1,286</td>
<td>6.5%</td>
<td>6.7%</td>
</tr>
<tr>
<td>Mohawk Valley</td>
<td>4,567</td>
<td>220</td>
<td>4.9%</td>
<td>6.0%</td>
</tr>
<tr>
<td>New York City</td>
<td>93,528</td>
<td>4,947</td>
<td>5.3%</td>
<td>5.4%</td>
</tr>
<tr>
<td>North Country</td>
<td>2,922</td>
<td>207</td>
<td>7.1%</td>
<td>6.4%</td>
</tr>
<tr>
<td>Southern Tier</td>
<td>12,371</td>
<td>282</td>
<td>2.3%</td>
<td>2.7%</td>
</tr>
<tr>
<td>Western New York</td>
<td>12,841</td>
<td>684</td>
<td>5.3%</td>
<td>5.5%</td>
</tr>
</tbody>
</table>
North Country Region

Mid-Hudson Region
Daily Hospitalization Summary by Region
NYS COVID-19 Healthcare Utilization (Jan 13, 2021)
Micro-Cluster Zones Update
Mitigation Measures

- All but 5 micro-cluster zones lifted
- Still zones in areas of NYC, Orange County

https://forward.ny.gov/cluster-action-initiative
COVID-19 Variants Update
Currently 3 main variants of public health interest:
UK variant: B.1.1.7
• 70 countries, 27 US states, 42 detections in NY
COVID-19 “Clinical Pearls”

Elizabeth “Betsy” Rausch-Phung, M.D., M.P.H.
Medical Director
Bureau of Immunization
Needle Length and Gauge

1. **Use the correct syringe and needle.**
   - Administer vaccine using either a 1-mL or 3-mL syringe.
   - Use a 22- to 25-gauge needle.
   - Use the correct needle length based on the patient’s gender and weight. For adults, use a 1- to 1.5-inch needle.

<table>
<thead>
<tr>
<th>Needle Length (mm)</th>
<th>Application</th>
<th>Weight Range (kg/lbs)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 in (25 mm)</td>
<td>Men and women</td>
<td>less than 60 (130 lbs)</td>
</tr>
<tr>
<td></td>
<td>Men and women</td>
<td>60–70 (130–152 lbs)</td>
</tr>
<tr>
<td>1.5 in (38 mm) OR</td>
<td>Men,</td>
<td>70–118 (152–260 lbs)</td>
</tr>
<tr>
<td></td>
<td>Women,</td>
<td>70–90 (152–200 lbs)</td>
</tr>
<tr>
<td>1.5 in (38 mm)</td>
<td>Men, greater than 118 (&gt;=260 lbs)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Women, greater than 90 (&gt;=200 lbs)</td>
<td></td>
</tr>
</tbody>
</table>

*Some experts recommend a 5/8-inch needle for men and women who weigh less than 60 kg (130 lbs). If used, the skin must be stretched fully and the subcutaneous tissues must not be bunched.*

[https://www.cdc.gov/vaccines/hcp/admin/downloads/vaccine-administration-needle-length.pdf](https://www.cdc.gov/vaccines/hcp/admin/downloads/vaccine-administration-needle-length.pdf)
Syringe Size

- Pfizer vaccine dilution
  - Preferred: 3 mL
  - Acceptable: 5 mL
  - Do NOT use: 1 mL

- Vaccine administration
  - Preferred: 1 mL
  - Acceptable: 3 mL
  - Do NOT use: 5 mL
Syringe and Needle “Dead Space”

- Volume of fluid remaining between the plunger of the syringe and the tip of the needle
- Wide variations in “dead space” in different syringes and needles
  - Accounts for why some vaccinators who were previously able to access 6 doses from a Pfizer vial might only be able to access 5 doses after changing syringe or needle brand
- Dosage gradations on syringes account for “dead space”
  - No need to adjust dosage or volume to account for “dead space” nor to repeat or “top off” a vaccine dose if some volume of vaccine remains in the “dead space” after administration
VAERS Reporting Requirements

• Vaccine administration errors whether or not associated with an adverse event,

• Serious adverse events after COVID-19 vaccine (even if you don’t think they were caused by the vaccine),
  – Death;
  – A life-threatening adverse event;
  – Inpatient hospitalization or prolongation of existing hospitalization;
  – A persistent or significant incapacity or substantial disruption of the ability to conduct normal life functions;
  – A congenital anomaly/birth defect;
  – An important medical event that based on appropriate medical judgement may jeopardize the individual and may require medical or surgical intervention to prevent one of the outcomes listed above.

• Cases of Multisystem Inflammatory Syndrome (MIS) in adults and children, and

• Cases of COVID-19 that result in hospitalization or death.
COVID-19 Infection After the First Dose

• Treated with monoclonal antibodies or convalescent serum: Delay second dose until 90 days after antibody treatment
• No antibody treatment, recovered and isolation completed before due for second dose: Give second dose on time
• Recovered but still in isolation when second dose is due: Delay second dose until after isolation is complete
• Isolation complete but still feeling ill when second dose is due: Delay second dose until recovered/not acutely ill
Quarantine After the First Dose

- Quarantine is completed before second dose is due: Give second dose on time
- Still in quarantine when second dose is due: Delay second dose until after quarantine is complete
- Traveled out-of-state before second dose is due: Refer to current NYSDOH Travel Restrictions at coronavirus.health.ny.gov/covid-19-travel-advisory; some travelers may be eligible to “test out” of travel quarantine
  - When in doubt, ask POD Vaccine Lead
CDC Clinical Considerations for Use of mRNA COVID-19 Vaccines in U.S.

- [https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html](https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html)
- Regularly updated as information on COVID-19 vaccines and the pandemic evolve
- Last updated January 21, 2021
Updated Recommendations: Intervals Between First and Second Doses

• If second dose was inadvertently administered before the recommended interval, it does not need to be repeated
  – Neither the CDC nor the NYSDOH recommend intentionally scheduling the second dose before the recommended interval

• The second dose should be administered as close to the recommended interval as possible. However, if it is not feasible to adhere to the recommended interval, the second dose may be scheduled for administration up to 6 weeks (42 days) after the first dose
  – There are currently limited data on efficacy of mRNA COVID-19 vaccines administered beyond this window
  – If the second dose is administered beyond these intervals, there is no need to restart the series
Updated Recommendations: Interchangeability of COVID-19 Vaccines

• The Pfizer-BioNTech and Moderna COVID-19 vaccines are not interchangeable. Vaccine series started with one product should be completed with the same product (Pfizer with Pfizer; Moderna with Moderna)

• Every effort should be made to determine which vaccine product was given for the first dose

• In exceptional situations in which the first-dose vaccine product cannot be determined or is no longer available, any available mRNA COVID-19 vaccine may be administered at a minimal interval of 28 days between doses to complete the mRNA COVID-19 vaccination series

• If a mixed-dose series (e.g., Pfizer and Moderna or vice-versa) is inadvertently given, both doses may be counted as valid and neither needs to be repeated
Updated Recommendations: COVID-19 Vaccine in Persons with History of COVID-19 Infection

• Data from clinical trials indicate that either the Pfizer-BioNTech or Moderna COVID-19 vaccine may be safely given to people with a history of COVID-19 infection

• There is no recommended minimum interval between COVID-19 infection and COVID-19 vaccination

• However, current evidence suggests that the risk of SARS-CoV-2 reinfection is low in the months after initial infection but may increase with time due to waning immunity

• Thus, while vaccine supply remains limited, persons with recent documented acute SARS-CoV-2 infection may choose to temporarily delay vaccination, if desired, recognizing that the risk of reinfection, and therefore the need for vaccination, may increase with time following initial infection
Additional Information: COVID-19 Vaccine Components (Part 1)

- Both the Pfizer-BioNTech and Moderna COVID-19 vaccines contain polyethylene glycol (PEG)
  - PEG is a primary ingredient in osmotic laxatives and bowel preparations for colonoscopy, and an inactive ingredient in many other medications
  - Cross-reactive hypersensitivity can occur between PEG and polysorbates
- History of immediate* allergic reaction of any severity to PEG or polysorbates is a contraindication to mRNA COVID-19 vaccine unless they have been evaluated by an allergist-immunologist and determined that they can safely receive the vaccine under observation and in a setting with advanced medical care available
  - Immediate allergic reaction is defined as any hypersensitivity-related signs or symptoms consistent with urticaria, angioedema, respiratory distress (e.g., wheezing, stridor), or anaphylaxis that occur within four hours following administration
Additional Information: COVID-19 Vaccine Components (Part 2)

• The National Institutes of Health DailyMed database (https://dailymed.nlm.nih.gov/dailymed/index.cfm) may be used to determine whether medications contain PEG, PEG derivatives or polysorbates

• No other vaccines contain PEG, but several vaccines contain polysorbates. A list of vaccine excipients is available at https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/b/excipient-table-2.pdf
Merck Discontinues Development of COVID-19 Vaccine Candidates

- On January 25, 2021, Merck announced that the company is discontinuing development of its COVID-19 vaccine candidates and plans to focus its COVID-19 research strategy and production capabilities on therapeutic candidates.

- Merck announced that their review of findings from Phase 1 clinical studies for the vaccine candidates found that both candidates were generally well tolerated, but the immune responses were inferior to those seen following natural infection and those reported for other COVID-19 vaccines.

COVID-19 Updates

Jessica Kumar MPH, DO
Medical Director
Division of Bureau of Communicable Diseases
Booster shots/Vaccine Updates

Spike Protein Gene
Some good news

Small study of 200 people exposed/recovered from SARS-CoV-2: NIH news on lasting immunity

- Durable immune responses in the majority of people studied
- Antibodies against the spike protein were found in 98% of participants one month after symptom onset
- Number of antibodies ranged widely between individuals
- Virus-specific B cells increased over time
- More memory B cells six months after symptom onset than at one month afterwards
- Although the number of these cells appeared to reach a plateau after a few months, levels did not decline over the period studied
Lasting Immunity?

- Levels of T cells for the virus also remained high after infection
- Six months after symptom onset, 92% of participants had CD4+ T cells that recognized the virus
- About half the participants had CD8+ T cells
- The numbers of different immune cell types varied substantially between individuals
- 95% of the people had at least 3 out of 5 immune-system components that could recognize SARS-CoV-2 up to 8 months after infection

Vaccine Product Updates

• Merck abandoned their two experimental coronavirus vaccines

• The single dose Johnson & Johnson vaccine JNJ-78436735 or Ad26.COV2.S manufactured by Janssen Pharmaceutica debuting soon: NEJM article and NY Times easy to understand article
Booster Dosing?

- Moderna and Pfizer-BioNTech vaccines are effective against new variants of the coronavirus discovered in Britain and South Africa.
- Less protective against the variant in South Africa.
- Moderna will begin testing whether giving patients a third shot of its original vaccine as a booster.
- Pfizer-BioNTech is working on a modified vaccine that would be better able to head off the variant in South Africa.
Variant Protection

• Moderna vaccine likely still protects against the emerging strains, but has a weaker response to the South Africa variant
• The new strains appear to spread more easily from person to person, and there are signs that the U.K. may cause increased morbidity and mortality
• The variant first detected in the U.K. could become dominant by March
• The variant identified in Britain has been found in at least 20 states in the United States
• Leading to a federal government plan to ban most non-US citizens from traveling from South Africa, Europe, U.K. and Brazil to the United States
Variant

• A variant found in Brazil has many of the mutations seen in the South African form

• Preliminary studies in the laboratory had hinted that those viruses may have some degree of resistance to the immunity that people develop after recovering from the infection or being inoculated with the current vaccines

• Latest article about Pfizer and the SA variant
SARS-CoV-2
Testing Updates
IDSA updated diagnostic recommendations 12/23/20

- **17 recommendations** for SARS-CoV-2 nucleic acid testing based on systematic reviews of the diagnostic literature
- **Testing algorithm**
- **Symptoms** compatible with SARS-CoV-2
- **Swab** based testing
- Risk based testing
- Using either **rapid RT-PCR or standard laboratory-based NAATs** over rapid isothermal NAATs (Abbott ID NOW) in symptomatic individuals

1/28/21
Continued

SARS-CoV-2 RNA testing in asymptomatic individuals

• Immunocompromised asymptomatic individuals who are being admitted to the hospital
• Before hematopoietic stem cell (HSCT) or solid organ transplantation (SOT)
• **No recommendations** for or against SARS-CoV-2 RNA testing before initiating immunosuppressive therapy in asymptomatic individuals with cancer or before the initiation of immunosuppressive therapy
• **Testing recommended** in major time-sensitive surgeries, time-sensitive aerosol generating procedure and time-sensitive aerosol generating procedure (bronchoscopy) when PPE is limited/testing is available
• [COVID-19 learning tool](#)
Where to send patients or yourself for a COVID test

Find a COVID test site
SARS-CoV-2
Vaccine and Pregnancy

ACOG recommendations

*High-risk medical conditions outlined by the CDC include:
- Pregnancy
- Cancer
- Chronic kidney disease
- COPD (chronic obstructive pulmonary disease)
- Down Syndrome
- Heart conditions, such as heart failure, coronary artery disease, or
COVID Vaccine and Pregnancy

• **CDC**: pregnancy and covid
• Increased risk of severe disease (**CDC**)
• **ACOG** new recommendations for vaccine in pregnant/lactating people
• Access to information: no safety data specific to use in pregnancy under the EUA
• A conversation between the patient and their clinical team may assist *(but is not required)* with decisions regarding the use of vaccines approved under EUA for the prevention of COVID-19 by pregnant patients
• Pregnancy testing should not be a requirement prior to receiving any EUA-approved COVID-19 vaccine

1/28/21
Considerations

- Level of community transmission and risk of acquisition
- Personal risk due to occupation etc
- Risk to the patient and fetus
- Vaccine efficacy
- Vaccine side effects
- Status of scientific information

WHO statement regarding Moderna
Available Information

• Symptomatic pregnant patients with COVID-19 are at increased risk of more severe illness
• Increased risk of ICU admission, need for mechanical ventilation and ventilatory support (ECMO), and death reported in pregnant women with symptomatic COVID-19 infection
• Pregnant patients with comorbidities such as obesity and diabetes may be at an even higher risk of severe illness consistent
• Affects Black, Hispanic as well as Asian and Native Hawaiian/Pacific Islander pregnant individuals
State of Affairs

• None of the COVID-19 vaccines approved under EUA have been tested in pregnant individuals
• Studies in pregnant women are planned
• European Medicines Agency showed that animal studies using the Pfizer/BioNtech COVID-19 vaccine do not indicate direct or indirect harmful effects with respect to pregnancy, embryo/fetal development, parturition or post-natal development
• DART study
• Moderna study
Lactating individuals

- No clinical data on use of COVID-19 mRNA vaccines in lactation
- The Academy of Breastfeeding Medicine does not recommend cessation of breastfeeding for individuals who are vaccinated against COVID-19
- Health care providers should use shared decision making in discussing the benefits of the vaccine for preventing COVID-19 and its complications
- Biologically benefit as antibodies and T-cells stimulated by the vaccine may passively transfer into milk
- ABF Guidance
- Vaccines And Medication in Pregnancy Surveillance System (VAMPSS)
- CDC: Vaccine Safety
Vaccine Confidence

- CDC Vaccination Considerations for People who are Pregnant or Breastfeeding
- Baystate Health & University of Massachusetts Medical School COVID-19 Vaccine Decision Tool
- Frequently Asked Questions about COVID-19 Vaccination CDC’s
- CDC health care provider vaccine tool kit
- Talking to Recipients about COVID-19 Vaccines
- Fact Sheet should be provided prior to the individual receiving Pfizer-BioNTech COVID-19 vaccine or Moderna vaccine
Registries

- CDC V-SAFE: [https://vsafe.cdc.gov/](https://vsafe.cdc.gov/)
- American Academy of Dermatology (AAD): [www.aad.org/covidregistry](www.aad.org/covidregistry)
- Texas Tech and Infant Risk: [https://www.infantrisk.com](https://www.infantrisk.com)
- The Netherlands: Email: covid.milk@amsterdamumc.nl
- UCSD: [https://mommysmilkresearch.org/research/](https://mommysmilkresearch.org/research/) (site not working as of 1/28)
- Mt Sinai Study [https://labs.icahn.mssm.edu/rebecca-powell-lab/about-us/](https://labs.icahn.mssm.edu/rebecca-powell-lab/about-us/) Email: covid19humanmilkstudy@gmail.com
- The University of Washington has a registry for pregnant vaccine recipients: University of Washington Human Subjects Division at hsdinfo@uw.edu or by calling (206)-543-0098 or by calling collect at (206) 221-5940, email: covidvaccpreg@uw.edu
SARS-CoV-2
Quarantine Updates
NY State Quarantine Update

• Individuals exposed to COVID-19 can end their quarantine after 10 days without a testing requirement as long as no symptoms have been reported during the quarantine period.

• After day 10 is reached, individuals must continue monitoring for symptoms through day 14 and if any develop, they should immediately self-isolate and contact the local health department or their healthcare provider to report this change and determine if they should seek testing.
CDC options for shortened quarantine
“test-based strategy” not adopted by New York State

• When diagnostic testing resources are sufficient and available then quarantine can end after Day 7 if a diagnostic specimen tests negative and if no symptoms were reported during daily monitoring

• The specimen may be collected and tested within 48 hours before the time of planned quarantine discontinuation (in anticipation of testing delays), but quarantine cannot be discontinued earlier than after Day 7

• In both cases, additional criteria (continued symptom monitoring and masking through Day 14)

• Science Briefs: Weekly CDC updates
Public Health Recommendations for Vaccinated Person from the CDC

• Still gathering information on ability to transmit virus post-vaccine and length of immunity
• Protection is not immediate
• Efficacious but not 100%
• Continue to follow current guidance per New York State
• **Risk mitigation strategies** in the face of the emergence of variants

1/28/21
COVID Long Haulers
Postacute COVID-19 syndrome
Long Term Effects of COVID

• Constellation of persistent symptoms and/or organ dysfunction after acute COVID-19
• CDC Late sequelae ~ 4 wks after initial infection
• NIH Clinical guidance for persistent symptoms
• NIH clinical critical care guidance

Clinical Trials
• Longitudinal Study of late sequelae and immunity
• California Study (UCSF)
Other COVID-19 Updates

Marcus Friedrich, MD, MHCM, FACP
Chief Medical Officer
Office of Quality and Patient Safety
COVID-19 Monoclonal Antibody Therapeutics

HHS Lookup Tool:

https://protect-public.hhs.gov/pages/therapeutics-distribution
COVID-19 Provider’s Guide to Treatment Options:

WHO: COVID-19 Clinical Management: Living Guidance

Best Practice Statement on caring for COVID-19 patients after their acute illness and new recommendations:

• Using clinical judgment, including consideration of patients’ values and preferences and local and national policy if available, to guide management decisions.

• Proposal of pulse oximetry monitoring at home as part of a package of care.

• Proposal to use awake prone positioning in patients with severe COVID-19 that are hospitalized requiring supplemental oxygen or non-invasive ventilation.

• Thromboprophylaxis dosing of anticoagulation rather than intermediate or therapeutic dosing in patients hospitalized with COVID-19.

https://www.who.int/publications/i/item/WHO-2019-nCoV-clinical-2021-1
COVID-19
Resources
COVID-19 Healthcare Provider Compilation

What is the Provider Compilation Document?

- Contains links to the most recently available COVID-19 guidance for healthcare providers
- Includes links and guidance for:
  - Vaccinations, testing, quarantine, infection control and other relevant information for outpatient healthcare providers
- Updated weekly or as new guidance is released
NYSDOH COVID-19 Healthcare Provider Compilation

As of January 5, 2021, 9:00 AM

The information in this compilation is current only as of the above date and time.

Purpose: The purpose of this publication is to provide healthcare providers in New York State with a consolidated reference document of guidance released by the New York State Department of Health (NYSDOH) related to the COVID-19 pandemic response. This document displays hyperlinks to the current guidance documents. Additional COVID-19 resources may be found on the NYSDOH Information for Healthcare Providers webpage. Recordings of COVID-19 Weekly Healthcare Provider Updates are also available on the NYSDOH webpage.

COVID-19 Vaccine Information for Providers

Link to Guidance

NYSDOH COVID-19 Vaccine Webpage
- How to Order COVID-19 Vaccine
- Documents and Guidance on Administering the COVID-19 Vaccine and Vaccine Prioritization
- Provider Training

Determine Eligibility for a Vaccine and Find a Local Vaccination Site to Make an Appointment

Testing and Specimen Collection

Link to Guidance

NYSDOH COVID-19 Testing Webpage
- Antigen Testing
- Antibody Testing
- Molecular Testing
- Protocols for Drive-Through Testing

DOH Wadsworth Center Coronavirus Testing Guidance Webpage
- Specimen Collection, Handling and Transport
- Guidance on Pooling
- Test Results Reporting
- Infectious Disease Requisition
COVID-19 Healthcare Provider Compilation

• Link on NYSDOH web page: https://coronavirus.health.ny.gov/information-healthcare-providers

For questions, contact covidproviderinfo@health.ny.gov
NY State DOH COVID-19 Hotline

Call the Hotline: 1-888-364-3065 or Ask a Question

New Yorkers Can Now Report Vaccine-Related Fraud by Calling 833-VAX-SCAM (833-829-7226) or Emailing STOPVAXFRAUD@health.ny.gov
COVID Alert NY is a voluntary, anonymous, exposure-notification smartphone app.

You will get an alert if you were in close contact with someone who tests positive for COVID-19.

Knowing about a potential exposure allows you to self-quarantine immediately, get tested and reduce the potential exposure risk to your family, friends, neighbors, co-workers and others.

The more people who download COVID Alert NY, the more effective it will be.

Help protect your community while maintaining your privacy.

The free mobile apps—available to anyone 18 or older who lives, works, or attends college in New York or New Jersey—are available for download from the Google Play Store or Apple App Store. COVID Alert NY is available in English, Spanish, Chinese, Bengali, Korean, Russian and Haitian Creole.

Download the free app to your smartphone to receive an alert if you have been in close contact with someone who has tested positive for COVID-19.
Healthcare Provider Well-Being
Healthcare Provider/Physician Wellness

Supporting Healthcare Provider Well-Being in COVID & Beyond
July 9, 2020
Howard Zucker, MD, JD
Commissioner of Health, New York State

https://www.youtube.com/watch?v=B9PRLV-_XQE
Mental Health Resources

• NYS Mental Health Helpline
  1-844-863-9314

• The helpline is staffed by specially trained volunteers, including mental health professionals, who have received training in crisis counseling related to mental health consequences of infectious disease outbreaks, typical stress reactions, anxiety management, coping skills, and telephonic counseling.
Healthcare Provider/Physician Wellness

• The state is partnering with the Kate Spade New York Foundation and Crisis Text Line to provide a 24/7 emotional support service for frontline healthcare workers

• Text NYFRONTLINE to 741-741 to access these emotional support services

• New York State-regulated health insurers will be required to waive cost-sharing, including deductibles, copayments and coinsurance, for in-network mental health services for frontline essential workers during COVID-19
Mental Health Resources

COVID-19 Resources

The COVID-19 pandemic has left many New Yorkers feeling anxious and stressed.

Learn more about:
- The COVID-19 Vaccine
- Managing anxiety in difficult times
- Coronavirus-related guidance for healthcare providers
- How you can help

VACCINATION INFORMATION

New York State COVID-19 Vaccine webpage
Learn more about the State’s distribution plan and if you’re eligible for the vaccine.

OMH COVID-19 Vaccine Fact Sheet
Get answers to common questions about the COVID-19 Vaccine.

PUBLIC RESOURCES

NY Project Hope Emotional Support Helpline: 1-844-863-9314
New York has a free, confidential helpline as part of the FEMA response to COVID-19. Call 1-844-863-9314 or visit nyprojecthope.org.

Tips for Mental Wellness [Español] [বাংলা] [中文] [РУССКИЙ] [Kreyòl Ayisyen] [한국어]
How to manage COVID related stress and anxiety

Mental Health in the Next Phase of Coronavirus [Español] [বাংলা] [中文] [РУССКИЙ] [Kreyòl Ayisyen] [한국어]
A guide of coping tips and resources to help with the ongoing mental health impact of the pandemic.

Mental Health Resources During an Emergency
People often experience anxiety, fear, and helplessness during an emergency. Know the signs and get help.

https://omh.ny.gov/omhweb/covid-19-resources.html
Are you struggling with everyday life stressors? MSSNY’s P2P Supporters are here to help

Any physician, resident or medical student who wishes to relate to a peer supporter may contact the Medical Society of the State of New York in the following ways:

- Email: P2P@mssny.org
- Phone 1-844-P2P-PEER (1-844-727-7337)

Support, Empathy & Perspective
CDC COVID-19 Website

Additional COVID-19 Resources
NYS resources

- https://forward.ny.gov/early-warning-monitoring-dashboard
- Testing/tracing
- New infections/severity based on hospitalization
- Hospital capacity

1/28/21
Helpful Links

• [HERO Together: COVID vaccine effects study](#)
• [New York State vaccine tracker](#)
• [NY Times vaccine tracker](#)
Highlighted CDC resources


- Estimated Disease Burden of COVID-19: estimates of COVID-19 infections, symptomatic illnesses, and hospitalizations using a statistical model to adjust for cases that national surveillance networks are unable to capture for a number of reasons.

- These estimates and methodology used to calculate them are published in *Clinical Infectious Diseases* and available online. To learn more, please visit: [Estimated COVID-19 Burden](http://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html)
CDC Upcoming Pending Topics

• 2/08/2021: Tools for Essential Workers
• 2/22/2021: Finding the Silver Lining: Advancing Smoke-Free Protections During the COVID-19 Pandemic
NYS Medicaid Telehealth Updates and Guidance

NYSDOH COVID-19 Guidance for Medicaid Providers website

- **Webinar:** New York State Medicaid Guidance Regarding Telehealth, Including Telephonic, Services During the COVID-19 Emergency - *5.5.2020*
  - Slides (PDF)
  - Recording *Coming Soon*

- **Frequently Asked Questions (FAQs)** on Medicaid Telehealth Guidance during the Coronavirus Disease 2019 (COVID-19) State of Emergency - [Web] - (PDF) - *Updated 5.1.2020*
Telehealth Guidance

• American College of Physicians Telehealth Resource:
  www.acponline.org/practice-resources/business-resources/health-information-technology/telehealth

• CDC Outpatient and Ambulatory Care Setting Guidance:

• Medicaid:
  www.health.ny.gov/health_care/medicaid/program/update/2020/
NYSDOH COVID-19 Website

LAST UPDATED: JANUARY 13, 2021 AT 2:30 PM

What You Need to Know

- Visit ny.gov/vaccine to get the facts on the COVID-19 Vaccine in New York.
- The COVID-19 Emergency Eviction and Foreclosure Prevention Act places a moratorium on residential evictions until May 1, 2021 for tenants who have endured COVID-related hardship.
- A new Micro-Cluster Strategy is addressing COVID-19 hot spots that have cropped up across the state.
  - Look up an address to see if falls into a Red, Orange, or Yellow Zone.
  - See the restrictions that correspond to each color-coded level of cluster zone
- Indoor and outdoor gatherings at private residences are limited to no more than 10 people.
- Read New York’s COVID-19 Winter Plan to mitigate the spread of the virus and bolster New York’s hospital’s preparedness.
- New travel guidelines are in effect that allow out-of-state travelers to “test out” of the mandatory 10-day quarantine.
- To report violations of health and safety restrictions and requirements for businesses, gatherings and individuals, please choose the appropriate link below:
  - File a complaint about a business, location or incident in your community.
  - File a complaint against your employer or place of work.
- Health care workers can text NYFRONTLINE to 741-741 to access 24/7 emotional support services. Any New Yorker can call the COVID-19 Emotional Support Hotline at 1-844-863-9034 for mental health counseling.

https://coronavirus.health.ny.gov/home
NYSDOH COVID-19 Website

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NYSDOH COVID-19 Testing Website

https://coronavirus.health.ny.gov/covid-19-testing
Mirror Clings

To order mirror clings for public use email the NYSDOH:

bmcc@health.ny.gov
QUESTIONS?

TO NYS HEALTHCARE PROVIDERS

THANK YOU!