COVID-19 Legislative Workgroup - Notes from April 22nd Zoom Meeting:

This morning, the Joint COVID-19 Response Legislative Workgroup met and received briefings from the University of Maryland Medical System (UMMS), MedStar Health, and the county executives of Prince George's, Baltimore, and Harford Counties.

Dr. Mohan Suntha, President and CEO of UMMS, explained that UMMS has a workforce of over 28,000 people with 13 hospitals geographically spread throughout the State. Over the last three months, UMMS has approached the COVID-19 crisis as a health system, wherein they established an incident command structure that oversees the entire system. That structure has allowed them to act and implement processes throughout the entire system, whether its policy around elective care, visitation, or utilization. UMMS has also been able to structure very strong partnerships with the State, Baltimore City, and other academic health systems, which has helped with policies, processes, and foundational decision-making. As a large health system, UMMS has been able to allocate resources to where the need is most prominent and move people and technology in and out of counties.

Right now, UMMS is very focused on PPE supplies and keeping their workforce safe. It has the appropriate PPE for the levels of care it is providing today, but is concerned about what will be needed in the future and is working on policies for the preservation and conservation of PPE. UMMS has been able to scale testing capability within its walls and workforce, but the challenge now is rapidly increasing testing capacity in local communities and doing contact tracing. UMMS is also working with university partners to understand racial disparities in access to care and social determinants of health.

Dr. Stephen Evans, Executive Vice President and Chief Medical Officer at MedStar Health, explained that at the early phase of the disease, MedStar created 36 sites across the entire Mid-Atlantic for patient testing. MedStar also built out a larger telehealth platform to use as a screening tool. They found that 15,000 patients met the criteria for testing with 21% testing COVID-19 positive. Over 465 patients have been hospitalized and the numbers continue to increase, particularly in Prince George's County and Montgomery County. Similar to UMMS, it is using its system to increase capacity and resources. 41,000 other patients are using MedStar's telehealth platform to be connected with their physicians for both elective and nonelective medical care. MedStar is focusing on future larger scale testing and additional capacity that can incorporated into its ambulatory platform because what it has right now will not be enough.

County Executive Angela Alsobrooks noted that Prince George's County has the largest of confirmed COVID-19 cases in Maryland with 3,800 cases and 140 deaths. She asserted that the situation could have been much worse if her Administration had not taken early action. Her Administration worked to mitigate transmission, ensure students had the tools they needed, and provide county workers with necessary PPE or telework capability. In Prince George's County, a good number of residents do not have primary care physicians or insurance, so the Administration set up testing at FedEx Field on March 30th and has screened over 800 individuals there. The FedEx Field site is open three times a week and can test 200 patients each time. They also opened Laurel Hospital to give additional bed capacity. Sufficient ICU beds and adequate staffing capacity remains a challenge causing some Prince George's patients to have to be transferred to health facilities outside the county. A major trend they are finding among patients is that men, especially African American men, are waiting too late to seek medical treatment. She is working to get information out to get African American men to seek treatment sooner. So far as the local economy, 30,000 jobs have been lost in a month. She started the Covid Business Relief Fund to allow for loans and grants as well as an Hourly Employee Relief Fund to help employees and undocumented workers. She has been hosting TeleTown Halls and issuing newsletters and written communications to reach constituents.

County Executive Glassman explained that Harford County has been relatively blessed during this crisis. The county has had around 230 cases and 1 fatality. Hospitals are at about 40% capacity, so they have plenty of beds right now. They also received a shipment of PPE last week, but anticipate that going into the summer and fall

they will need additional PPE. Their VEIP station for COVID-19 testing went from 15 tests in the first week of March to about 80 a day now. Harford County is averaging about 15 COVID-19 positive cases a day, but County Executive Glassman acknowledged that the county is probably not doing enough testing, so its numbers could be higher. EMS calls are down 40% from the flu season, so its frontline care is stable right now, but the county is prepared for a surge that could come. Data suggests that Harford County will reach peak cases in early May. The County is starting to experience hotspots in assisted living homes and is working with the State's Strike Teams. Harford County has been able to run county government on a digital platform and still approve permits, licenses, inspections, etc.

Baltimore County Executive Johnny Olszewski declared a county state of emergency on March 13th, but public health work started in February.   Baltimore County's Emergency Operations Center has been open for 37 consecutive days and works completely virtually. In addition, 70% of county workers are using telework, which has allowed continuity of most local government services. Economically, Baltimore County suffered a $40 million revenue write down in early April. The Administration has instituted a hiring freeze on nonessential employees and advised county agencies to prepare for future potential budget cuts. Baltimore County has been accepting patients from the capital region because they have capacity and have been spared the worst. There have been 57 long-term care facilities with outbreaks, which accounts for more than half of the deaths in the County.