

LEGISLATIVE WORKGROUP

The Joint COVID-19 Response Legislative Workgroup held a briefing with the Maryland Department of Health (MDH). Secretary Bobby Neall stated that MDH is working around the clock with other state agencies and local partners in response to the crisis. This Friday will be 90 days since Governor Hogan declared a state of emergency. Maryland's positivity rate has dropped to 9.5% and the state continues to see very encouraging numbers. The State has a 1,109 total bed occupancy: 638 acute beds and 471 ICU beds. Early models projected the need for 6,000 beds. In response, the state created alternative care sites (ACS). It established the Baltimore Convention Center Field Hospital, a 250-bed facility in partnership with UMMS and JHHS; reopened Laurel Medical Center, a 135-bed facility; reopened Adventist Takoma Park, a 200-bed facility; and created an ACS at the Hagerstown Correctional Facility that can accommodate 96 convalescent patients. Additional modular ICU beds are on order and MDH is working with hospitals on appropriate siting in Baltimore City and Montgomery County.

The State is ramping up PPE and has acquired: 1,200 ventilators; 6.4 million N95 masks and 8.7 million KN-95 masks; 23 million surgical masks; 17 million gloves; 1.2 million face shields; and 2.1 million gowns. PPE requests are coordinated with local health offices and deliveries go out weekly.

In terms of testing, the current goal is sustaining 10,000 tests per day. The next goal is to get up to 20,000 tests per day. The state is expanding internal state public health lab capacity; creating partnerships with commercial and academic labs to use their capacity; pursuing strategic opportunities with test manufacturers, federal labs, retailers and hospitals; and laying the foundations for a statewide serological survey.

The state public health lab went from processing less than 500 tests per day to 970 currently. In addition, MDH has formed partnerships with five commercial labs and is unleashing the full potential of the University of Maryland research lab at the Institute of Genome Sciences. The state is increasing VEIP testing sites and creating four regional sites capable of high-volume tests. It is also developing mobile testing solutions, conducting universal testing in nursing homes, and beginning to test all staff and residents at state correctional and juvenile facilities. All specimen collections of residents and staff of nursing homes should be collected by June 5th (deployment of specimen collection kits was done on May 29th).

Expanded contact tracing goes live this week with 1,400 tracers statewide with a capacity to trace 1,000 Covid-19 positive cases and 10,000 contacts daily. The goal is to initiate the trace within 24 hours of a lab confirmed positive test result. 14 jurisdictions have asked the State to take the lead on contact tracing, while the other 10 will take the lead with overflow sent to the State. More information can be found at coronavirus.maryland.gov/pages/contact-tracing.

In terms of minority disparities, MDH has directed resources to the hardest hit areas, including testing and patient surge capacity. One area of focus is the Eastern Shore poultry workers where MDH has worked with Haitian Creole and Spanish speaking communities to get people tested. The second phase areas are Baltimore City and Anne Arundel, Baltimore, Montgomery, and Prince George's Counties.

The Workgroup also invited Dr. Thomas Inglesby, Director of the Center for Health Security at the JHU Bloomberg School of Public Health to provide comments on the State's reopening process, trends, and potential for spikes. Generally, the state response and reopening efforts have been done in a practical, risk-adjusted way. ICU beds and total bed occupancy are moving in the right direction and there is enough hospital capacity. Positivity rates show good progress, but the state needs to drive those numbers down to less than 5%, which is achievable due to the substantial rise in testing. As the state reopens, he reemphasized that outdoor activities are safer than indoors; lower density areas are better

than higher density; brief exposure better than prolonged exposure, etc. Though it is important to clean surfaces, the most risk comes from respiratory droplets.

PRESS CONFERENCE:

Governor Hogan held a press conference to provide an update on the State's COVID-19 response. However, Governor Hogan first commented on the death of George Floyd as another reminder that we have a long way to go to live up to the nation's highest ideals. In Maryland, thousands of young people and community leaders have protested and expressed their frustrations peacefully while working together with law enforcement to stand up to and stop people with a violent agenda. He expressed his pride in the people of Baltimore City for having set an example for the rest of America. Residents of Baltimore City are showing the power of a strong, compassionate, and united community. Still, it is important for protestors to take precautions to reduce spreading the coronavirus.

Governor Hogan also commented on yesterday's primary elections stating that the most basic responsibility of the State Board of Elections (SBE) is to ensure free, fair, and accurate elections. There have been significant failures and questions need to be answered. He has requested that the SBE administrator provide a full and complete report no later than July 3rd and that the Maryland General Assembly conduct oversight hearings on what caused the failures and how they can be corrected.

As of today, Maryland has conducted 380,716 COVID-19 tests with 14,385 tests completed in the last 24 hours, which is well above the short-term goal of 10,000 tests per day. Since announcing Stage 1, Maryland's COVID-19 positivity rate has dropped to 9.5%, which is down more than 60% from the peak. The positivity rates of Baltimore City and Baltimore, Frederick, Howard, and Anne Arundel Counties are all below the state average. Prince George's County and Montgomery County are above the rest of the state in terms of positivity rate but are continuing to see dramatic improvements. Prince George's County's positivity rate dropped by more than 66% and Montgomery County's rate has dropped by more than 62%.

As a threshold for Stage 2, the state was required to have a positivity rate below 15% for 14 consecutive days. Maryland has met that standard with hospitalizations at the lowest level in 50 days and ICU confinements plateauing and at the lowest level since April 17th. All these metrics allow Maryland to safely begin Stage 2 of the Roadmap to Recovery and to take more steps that are critical to getting the economy back on track. Effective on Friday, June 5th at 5pm, Maryland will be lifting the closure of all nonessential businesses (continues to exclude indoor restaurants, bars, gyms and some other indoor venues). Businesses must adhere to workplace safety protocols, such as wearing masks, conducting daily screenings, reevaluating shifts, schedules, and office configurations, and teleworking when possible.

State government operations will resume on June 8th. The Maryland Motor Vehicle Administration and other customer facing agencies will begin reopening select branches on a limited basis by appointment only with staff wearing face coverings and plexiglass at each station. In addition, there will be a gradual return to more normal transit schedules and the safe expansion of additional childcare centers.

If Maryland continues to see these encouraging trends, the next step coinciding with the end of the school year would be the opening of outdoor amusement, entertainment, and other summertime outdoor activities. All 24 jurisdictions have now entered Stage 1, and all are now able to enter Stage 2 on Friday at 5pm at their discretion.

Governor Hogan encouraged Marylanders to stay home as much as possible; telework when possible; wear face coverings in indoor public areas, public transportation; practice physical distancing; and avoid crowds and close gatherings. More information can be found [here](#).