

MI COVID RESPONSE DATA AND MODELING UPDATE

March 1, 2022

Executive Summary

New CDC COVID-19 Community Levels

- On February 25, CDC proposed new COVID-19 Community Levels to assess and predict severe COVID outcomes
- New COVID-19 Community Levels consist of Low, Medium, and High and released at least once weekly
- These new levels are tools to help individuals and communities decide what prevention steps to take based on the latest data

Current statistics for cases and outbreaks

- Globally, nationally, and in Michigan, most metrics are continuing to decline to levels last seen in July and August of 2021
- The sentinel wastewater dashboard showing declines at majority of sites
- All regions experiencing declines for positivity, cases rates, and hospitalizations
- Transmission within high-risk settings like schools and long-term care facilities are declining
- The reproduction number (R_t) in Michigan is below 1, and if R_t stays at the current level, cases will continue to decline

Hospitalizations and Deaths

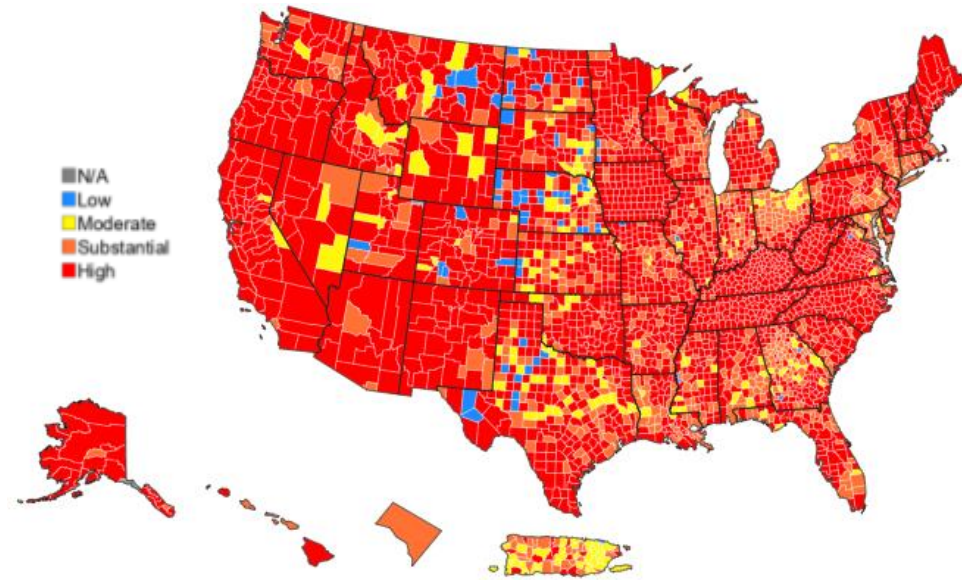
- COVID+ census in hospitals, hospital admission, ICU utilization, and pediatric census is declining in all regions
- Deaths are declining with greatest declines among the younger age groups

Public Health Response

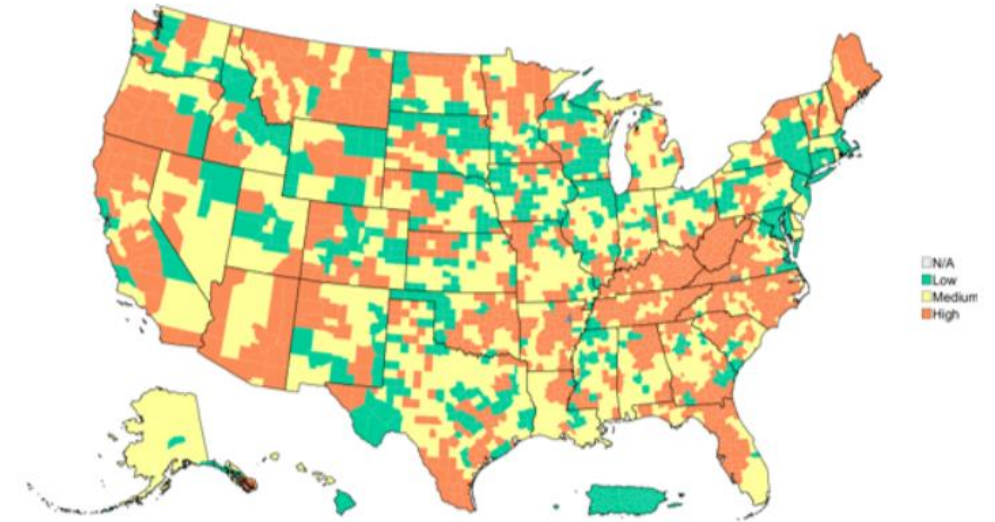
- Vaccination, Masking, Testing and Therapeutics are critical tools in our fight against the impact of COVID-19
- Masking is one of the most considerate things you can do for other vulnerable members of your community
- Over 5.9 million Michiganders have completed a primary series (59.3%)

Comparison between former Levels of Community Transmission and new COVID-19 Community Levels

Former Levels of Community Transmission



New COVID-19 Community Levels

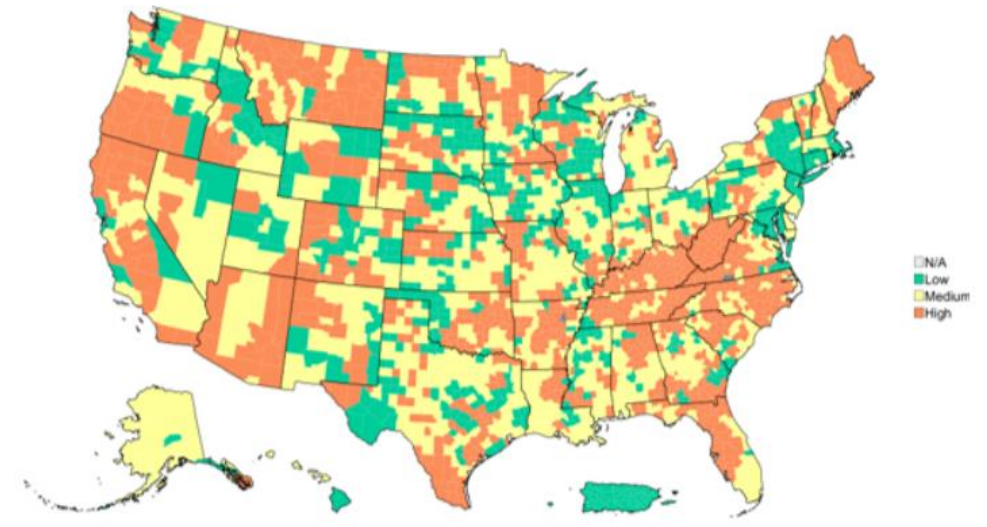
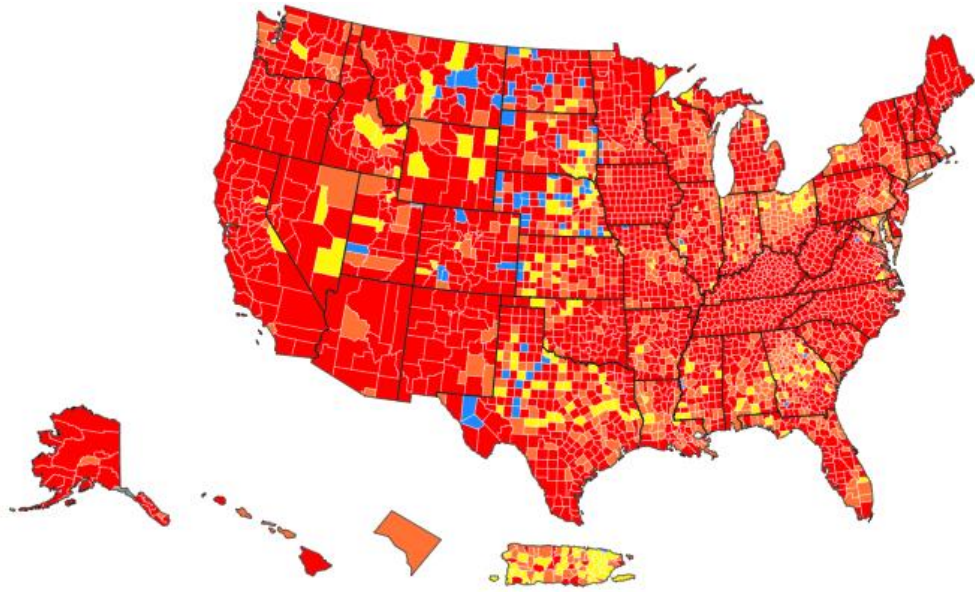


Indicator - If the two indicators suggest different transmission levels, the higher level is selected	Low Transmission Blue	Moderate Transmission Yellow	Substantial Transmission Orange	High Transmission Red
Total new cases per 100,000 persons in the past 7 days	0-9.99	10-49.99	50-99.99	≥100
Percentage of NAATs ¹ that are positive during the past 7 days	0-4.99%	5-7.99%	8-9.99%	≥10.0%

COVID-19 Community Levels – Use the Highest Level that Applies to Your Community				
New COVID-19 Cases Per 100,000 people in the past 7 days	Indicators	Low	Medium	High
Fewer than 200	New COVID-19 admissions per 100,000 population (7-day total)	<10.0	10.0-19.9	≥20.0
	Percent of staffed inpatient beds occupied by COVID-19 patients (7-day average)	<10.0%	10.0-14.9%	≥15.0%
200 or more	New COVID-19 admissions per 100,000 population (7-day total)	NA	<10.0	≥10.0
	Proportion of staffed inpatient beds occupied by COVID-19 patients (7-day average)	NA	<10.0%	≥10.0%

- On February 25, CDC proposed new COVID-19 Community Levels to assess and predict severe COVID outcomes (i.e., hospitalization capacity, ICU utilization, death)
- New COVID-19 Community Levels consist of Low, Medium, and High as determined by cases per 100K, hospital admissions, and COVID hospital occupancy

Comparison between former Levels of Community Transmission and new COVID-19 Community Levels



Community Transmission in US by County

	Total	Percent	% Change
High	2248	69.77%	-20.92%
Substantial	686	21.29%	14.84%
Moderate	219	6.8%	5.4%
Low	67	2.08%	0.65%

	% of Counties	% of Pop.
Low	23.0%	29.5%
Medium	39.6%	42.2%
High	37.3%	28.2%

- Under the former levels, 69.8% of U.S. counties were classified with high community transmission, whereas new levels classify 37.3% of counties with high risk for medically significant disease and healthcare strain
- Under the former levels, 86% (71/83) of Michigan counties were classified as high, whereas new levels classify 20% (17/83) of MI counties as high
- These new COVID-19 Community Levels will be released at least once weekly (link: <https://www.cdc.gov/coronavirus/2019-ncov/your-health/covid-by-county.html>)

Considerations for Individuals, Households, and Communities using the new COVID-19 Community Levels

What people can do to protect themselves

Low	Medium	High
Limited impact on healthcare system, low levels of severe disease	Some impact on healthcare system, more people with severe disease	High potential for healthcare system strain; high level of severe disease
Get vaccinated, boosted	Get vaccinated, boosted	Get vaccinated, boosted
Get tested if sick	Get tested if sick	Get tested if sick
	If at potential increased risk , talk to your healthcare provider about wearing a mask	Wear a mask in public indoor settings including schools
People may choose to mask at any time. People with symptoms, a positive test, or exposure to someone with COVID-19 should wear a mask.		



The majority of counties in **Michigan** are currently classified as **Medium Individual- and household-level preventative behaviors** at **Medium** level include:

- Stay up to date on COVID-19 vaccinations and boosters
- Follow CDC recommendations for quarantine and isolation, including testing if exposed
- Maintain improved indoor ventilation when possible
- Be considerate and respect special precautions for others who are at high risk for severe disease
- Those who are immunocompromised/high risk for severe disease should consult with healthcare provider regarding extra precautions to keep themselves safe (e.g., rapid testing, PrEP, masking)

Community-level prevention strategies at **Medium** level include (as recommended by state/local authorities):

- Protect those at high risk for severe illness and death with equitable access to vaccination, testing, treatment, support services, and information
- Consider implementing screening programs and other enhanced prevention measures in high-risk settings
- Maintain improved ventilation in public indoor spaces
- Ensure access to testing, including through point-of-care and at-home tests for all people
- Ensure access and equity in vaccination, testing, treatment, community outreach, support services for disproportionately affected populations

Considerate Mask Use

- Masking is one of the most considerate things you can do for other vulnerable members of your community
 - Extra precautions are needed to protect our friends, neighbors, and loved ones who are at increased risk of severe illness.
 - People who are at increased risk of severe illness—and family, friends, and coworkers who spend time with them—should consider taking extra precautions even when the COVID-19 Community Level is low.
 - These precautions can include wearing masks and getting tested before gathering together
 - If you think you are at increased risk of severe COVID-19, talk to your healthcare provider about the precautions you should take
- Be respectful of others decision to wear a mask, regardless of the reason



REGARDLESS OF YOUR COVID-19 COMMUNITY LEVEL, YOU SHOULD MASK IF YOU HAVE



Symptoms
of COVID-19



Positive
COVID-19 Test



Exposure
to someone
with COVID-19



[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)

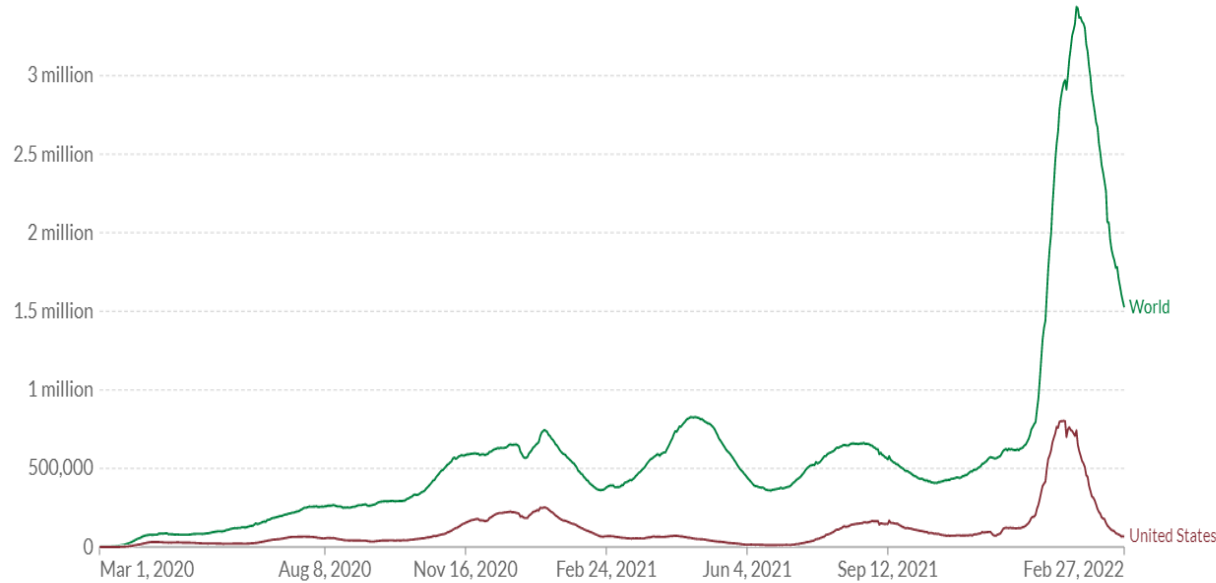
CS329821-B 02/25/2022

Global and National Trends

Daily new confirmed COVID-19 cases

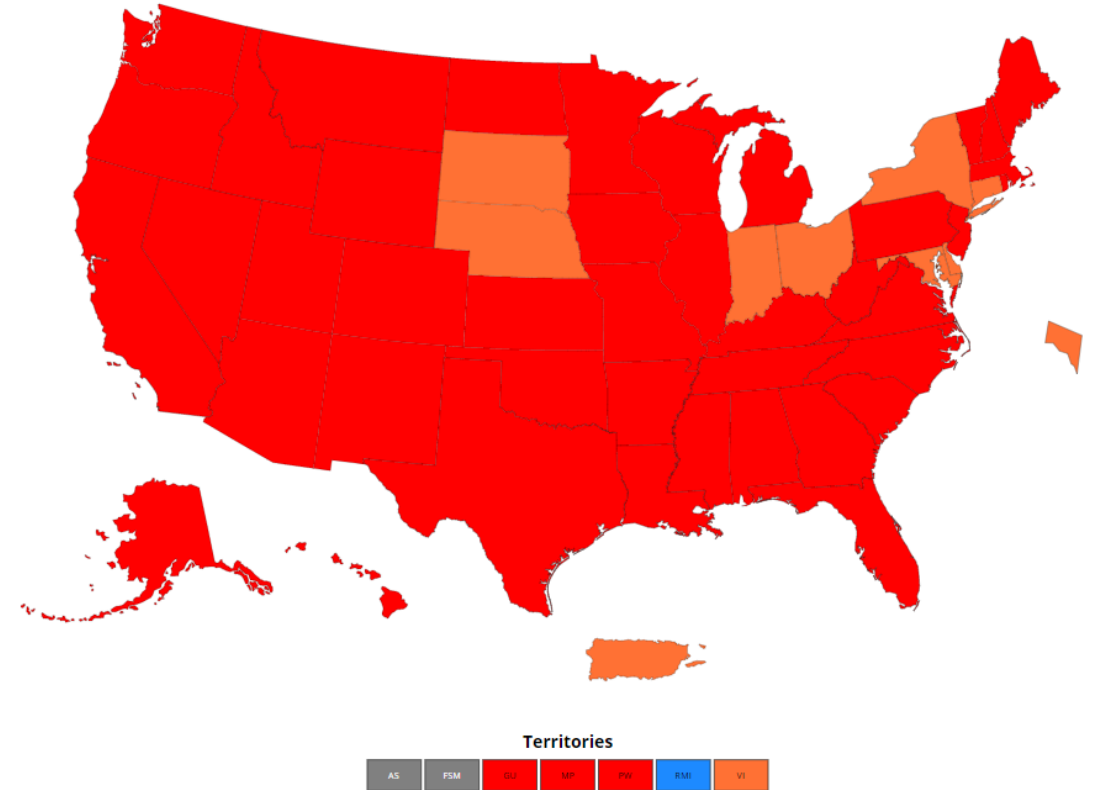
7-day rolling average. Due to limited testing, the number of confirmed cases is lower than the true number of infections.

LINEAR LOG



Our World in Data

Level of Community Transmission of COVID-19, by State/Territory



Globally, 435,788,712 cases and 5,951,810 deaths (Data* through 2/28)

- Globally, cases are declining

United States: Reported cases (7-day average) have decreased over 37.7% since the prior week[†]

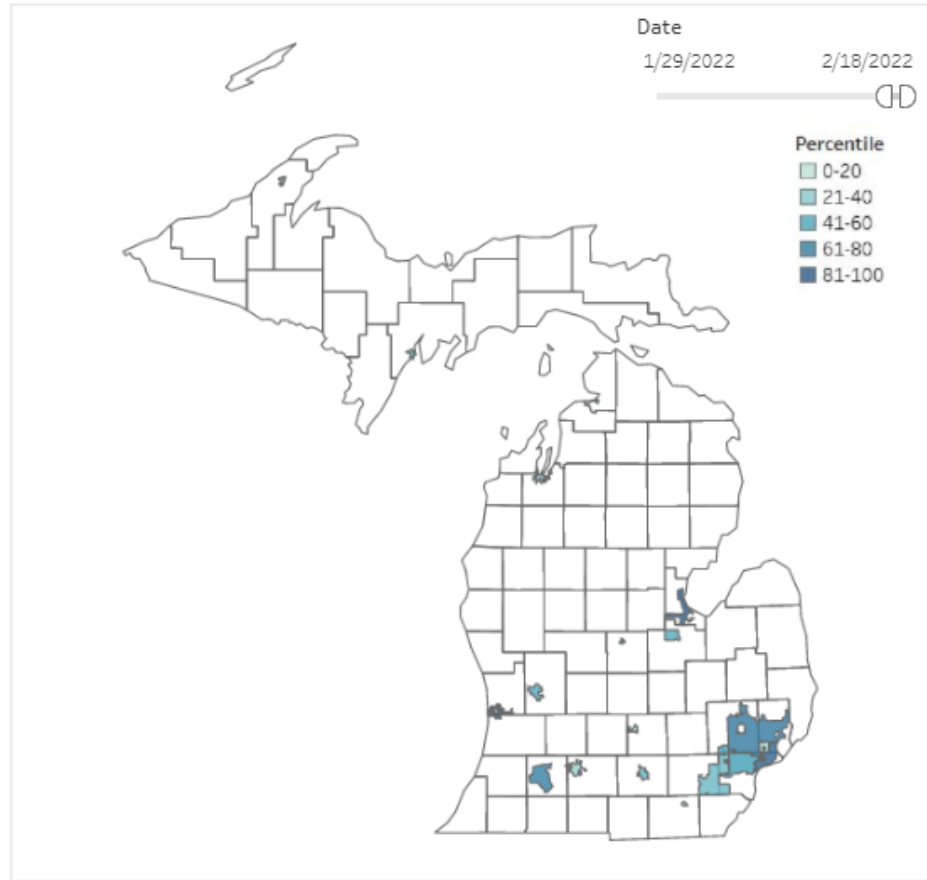
- In the U.S., the case rate is 145 cases/100,000 in last 7 days (last week: 287.9 cases per/100,000)

Most Midwestern states are declining

- Minnesota and Michigan have the highest case rates *in Midwest*; Michigan has returned to late-July case rates and mid-August hospitalization occupancy

Michigan COVID-19 SWEEP Sentinel Wastewater Dashboard

The map below shows 20 sewershed sites in Michigan where wastewater is being monitored for the presence of SARS-CoV-2, the virus that causes COVID-19. These sentinel sites serve as a subset of wastewater surveillance in Michigan distributed across the Michigan Economic Recovery Council (MERC) Regions. Click on each site on the map to see wastewater and clinical case data over time. In the top right corner of the map, slide the white buttons to select the time period for which the site-specific percentile is calculated.

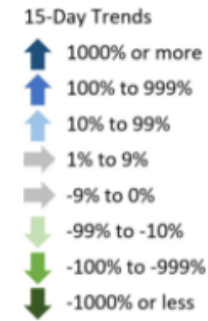


Site	Sewershed Population	Consecutive Weeks of Virus Detection	Trend As Of	15-Day Trend
Alma WWTP	8976	28	2/14/2022	↓
Battle Creek WWTP	51093	18	2/14/2022	↑
Bay City WWTP	34000	25	2/17/2022	↓
Delhi Township WWTP	22500	20	2/17/2022	↑
Escanaba WWTP	12600	25	2/16/2022	↓
GLWA Detroit River Interce..	492000	69	2/9/2022	→
GLWA North Interceptor-	1482000	46	2/9/2022	→
GLWA Oakwood-	840600	70	2/9/2022	→
Grand Rapids WWTP	265000	28	2/17/2022	↓
Holland WWTP North	45606	30	2/16/2022	↓
Holland WWTP South	36912	30	2/16/2022	↑
Jackson WWTP	90000	30	2/17/2022	↓
Kalamazoo WWTP	150000	25	2/15/2022	↓
Petoskey WWTP	7900	30	2/17/2022	↓
Portage Lake WWTP	14000	23	2/16/2022	↓
Saginaw Township WWTP	40000	27	2/17/2022	↓
Tecumseh WWTP	8680	6	2/18/2022	↓
Traverse City WWTP	45000	28	2/17/2022	↑
Warren WWTP	135000	24	2/17/2022	→
Ypsilanti WWTP	330000	30	2/17/2022	↓

Abbreviations: GLWA - Great Lakes Water Authority; WWTP - Waste Water Treatment Plant

Definitions and descriptions of data calculations can be found in the "About" tab.

Current results reflect data that were uploaded to MDHHS as of 2/23/2022. Labs are required to report test results to local partners within 24 hours. Data is subject to change as additional wastewater data and case data are received.



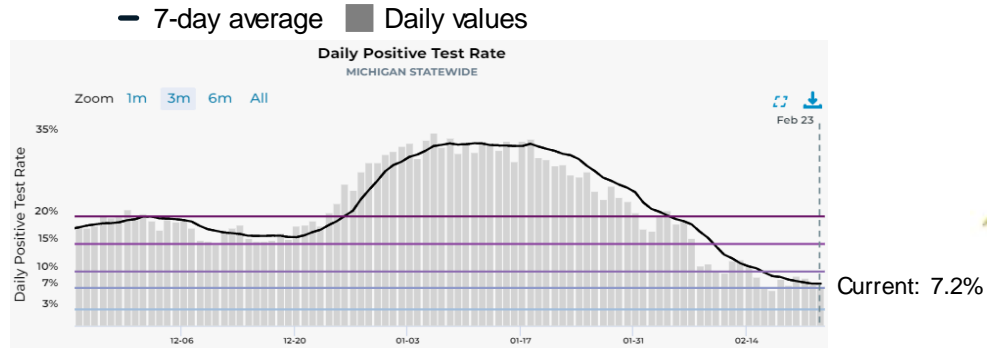
Sentinel Summary

- 60% (12/20) of sentinel sites are showing declines in the previous 15-days
- 20% (4/20) of sentinel sites are showing increasing trends over last 15 days

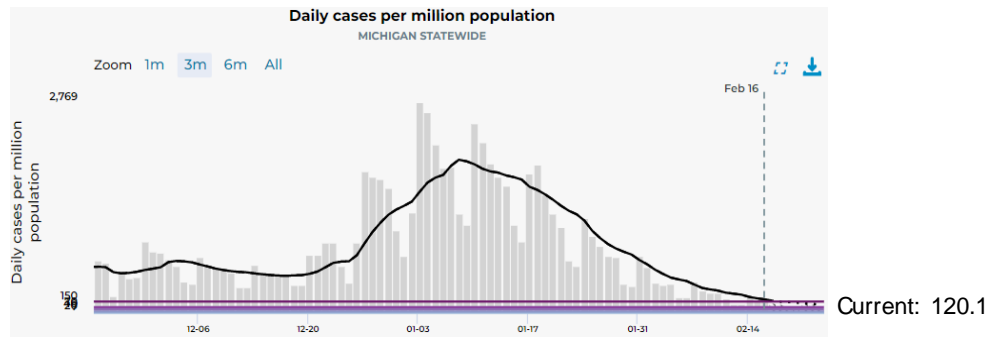
Recent statewide trends

Statewide trends

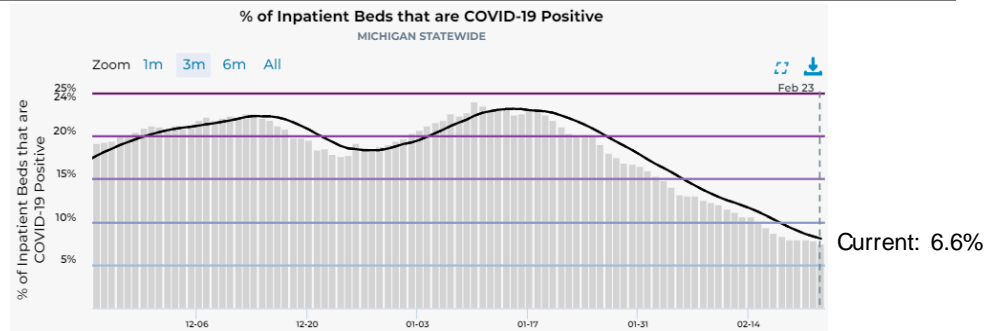
Positivity, %



Daily cases per million



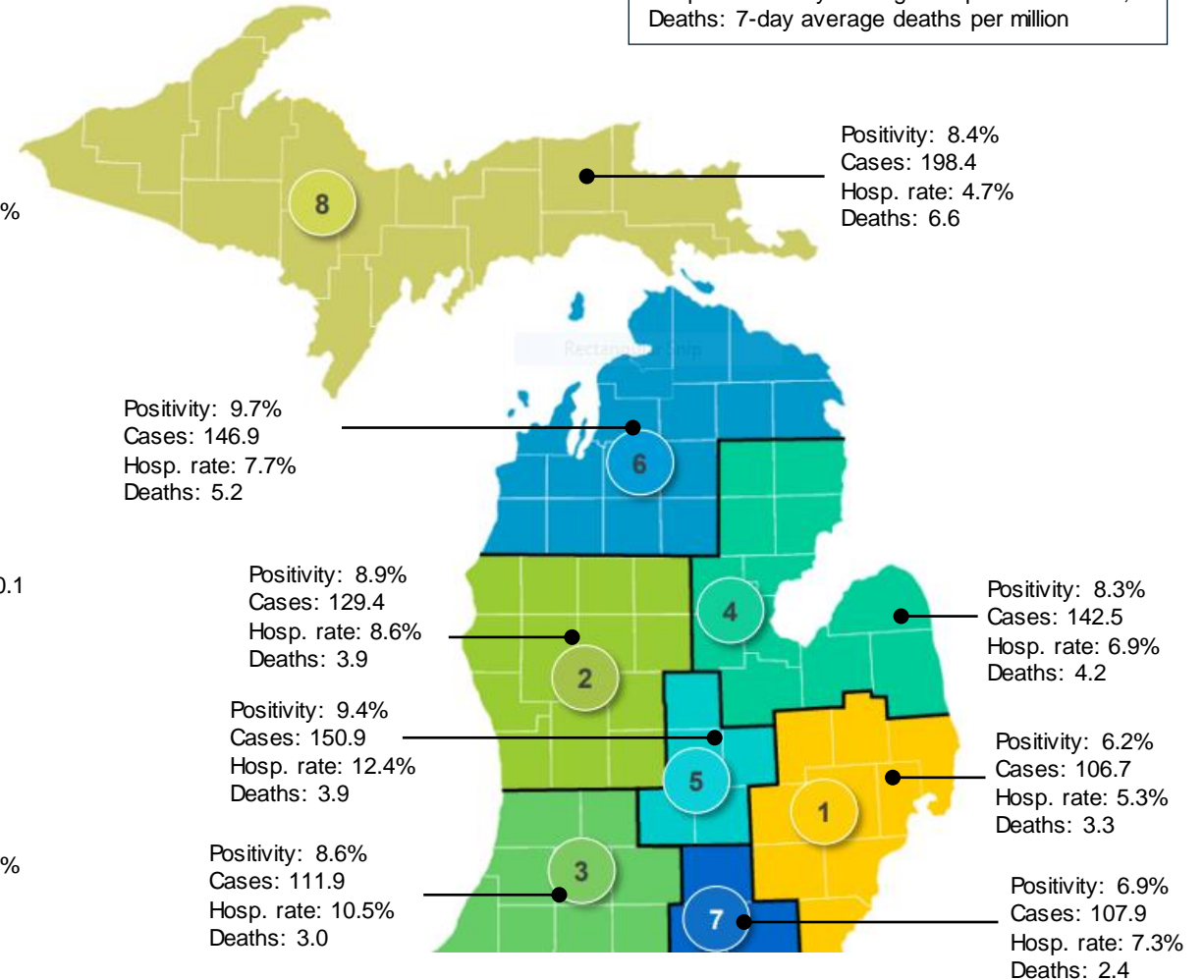
Daily hospitalization rate, %



Source: <https://mistartmap.info/>

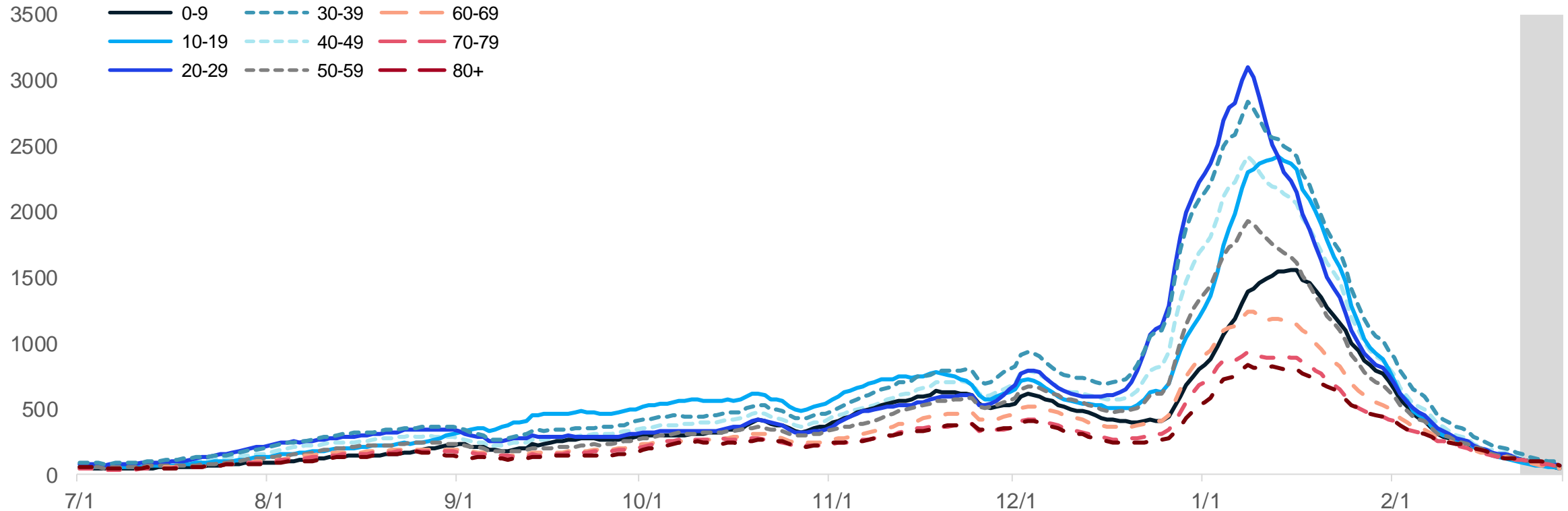
MERC Regional breakdown: Positivity, cases, hospitalization rate, and deaths

Positivity: 7-day average positivity, %
Cases: 7-day average cases per million
Hosp. rate: 7-day average hospitalization rate, %
Deaths: 7-day average deaths per million



Case Rate Trends by Age Group

Daily new confirmed and probable cases per million by age group (7-day rolling average)



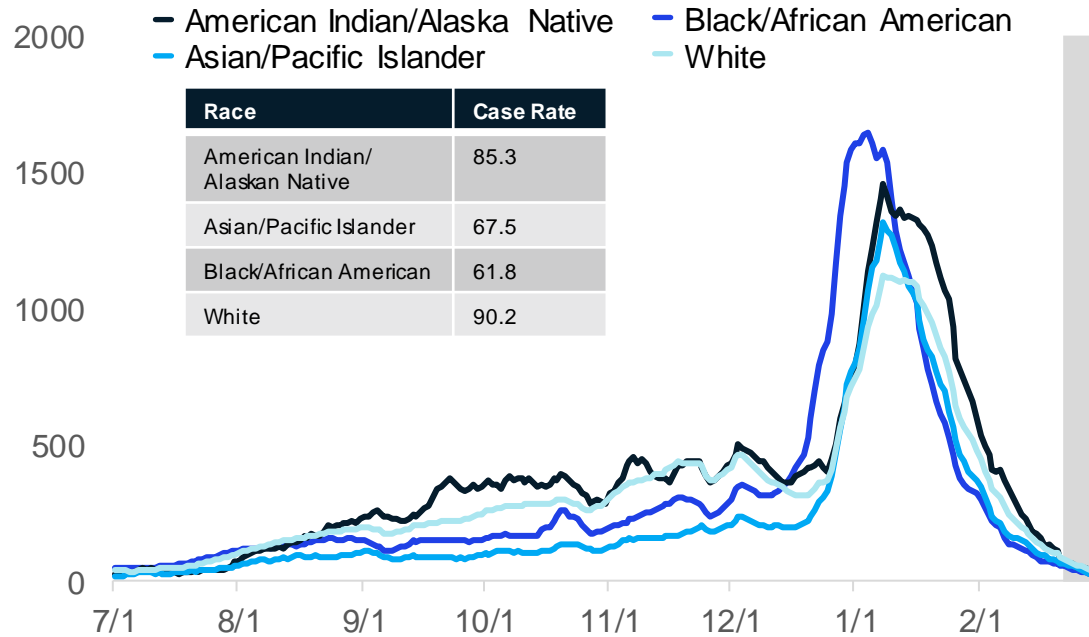
- Case rate trends for all age groups saw decreases over the past week
- Case rates by onset date for all age groups are between 97.5 and 164.4 cases per million (through 2/21)
- Case counts and case rates are highest for 30-39-year-olds this week, followed by 40-49, and 20-29

Note: Case information sourced from MDHHS and reflects date of onset of symptoms

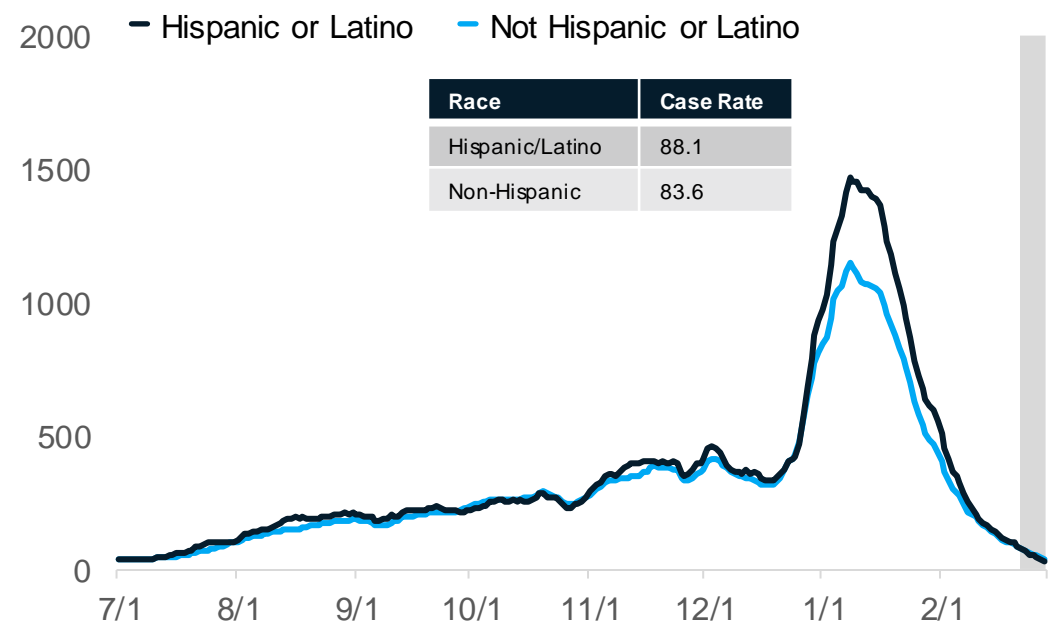
Source: MDHHS – Michigan Disease Surveillance System

Case Rates by Reported Racial and Ethnic Group

Daily new confirmed and probable cases per million (7 day rolling average) by race category



Daily new confirmed and probable cases per million (7 day rolling average) by ethnicity category



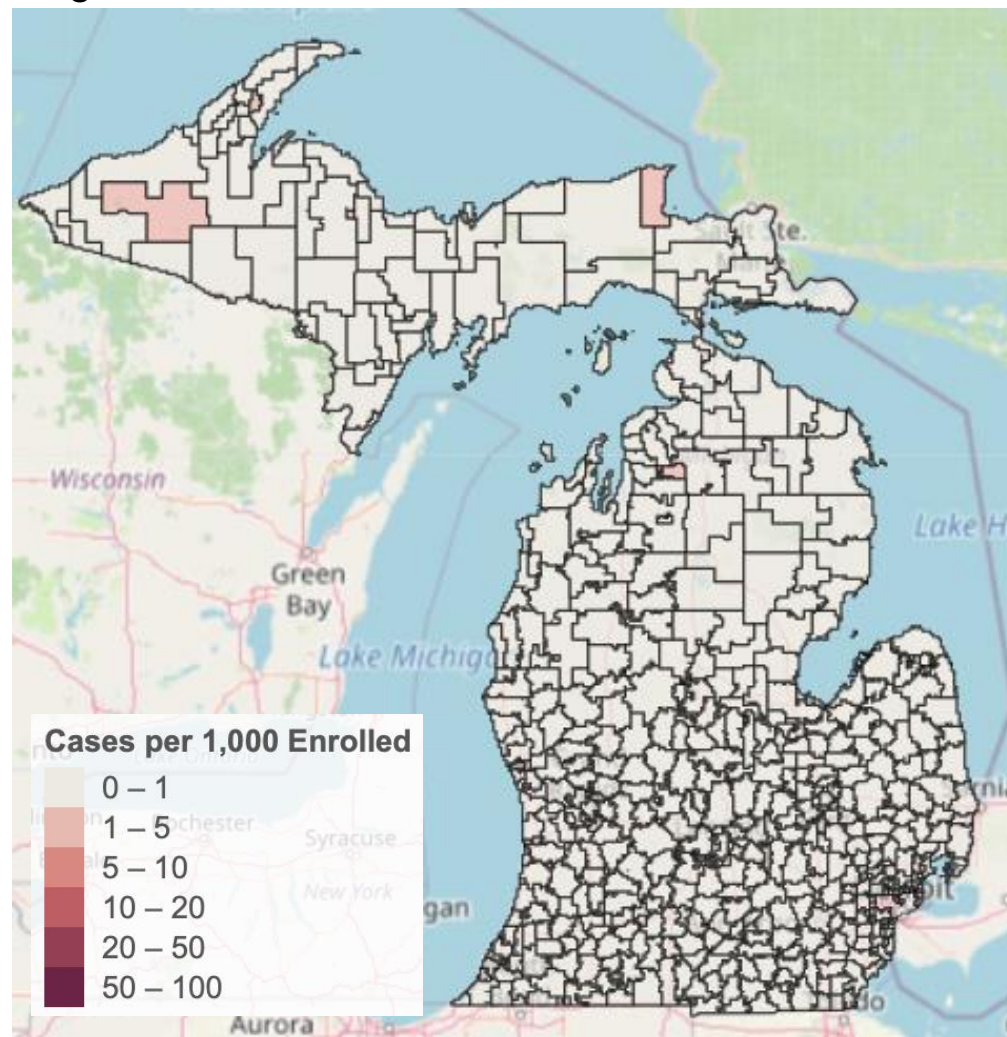
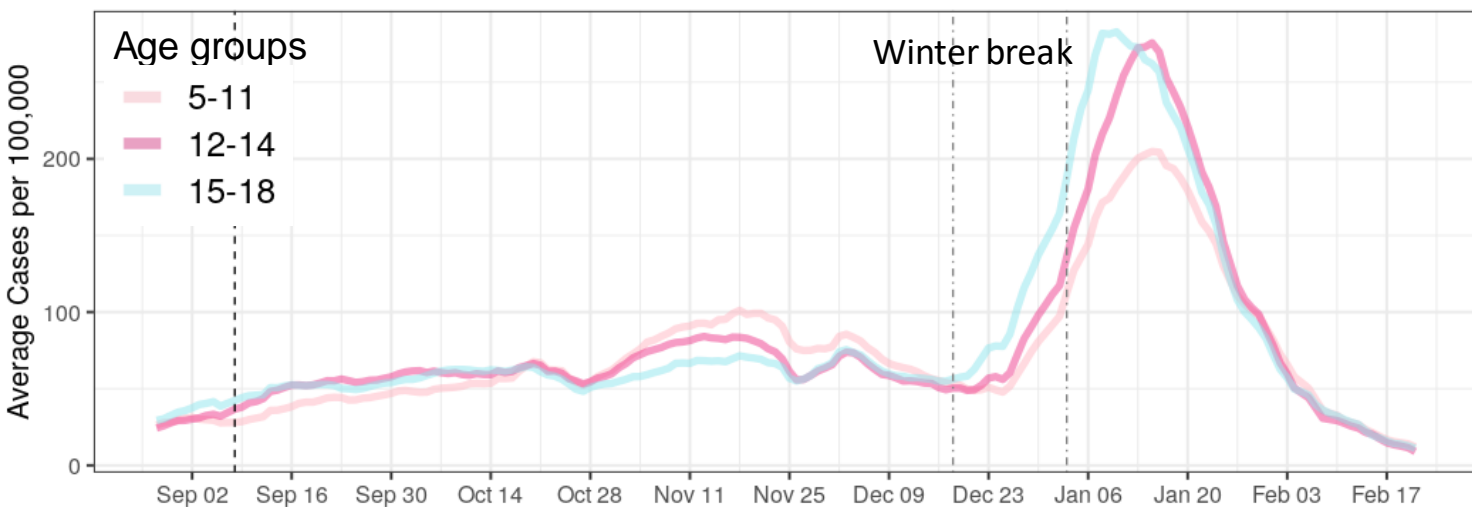
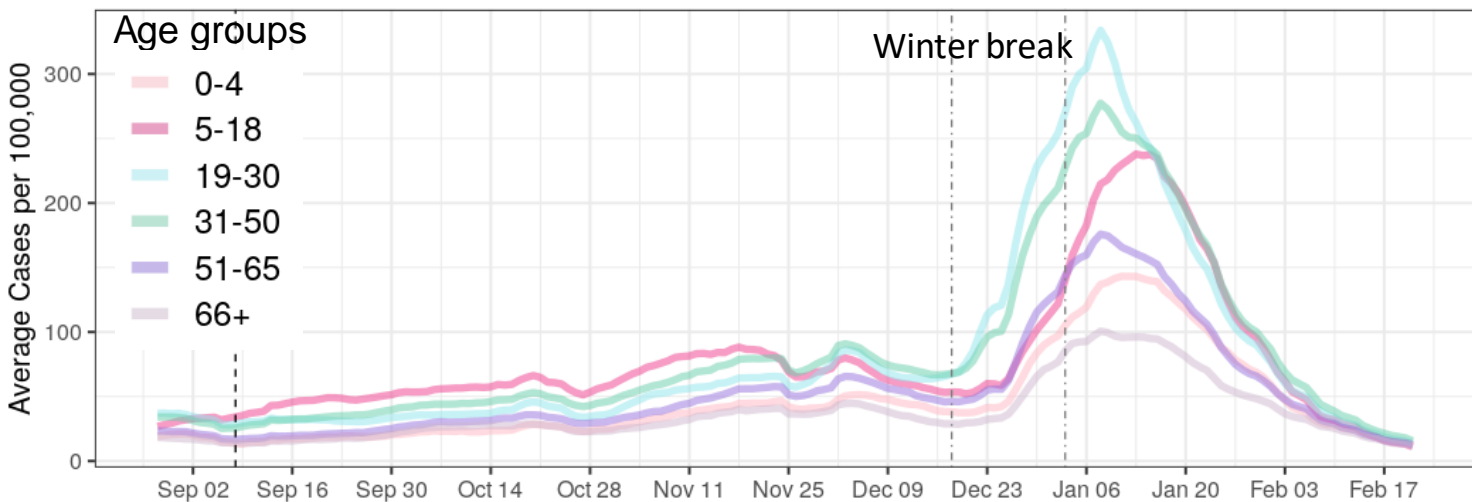
Updates since last week:

- Cases per million are decreasing for all reported racial and ethnic groups
- In the past 30 days, 26% (↔) of race data and 34% (↓1%) ethnicity data was either missing or reported as unknown

Note: Case information sourced from MDHHS and reflects date of death of confirmed and probable cases.
Source: MDHHS – Michigan Disease Surveillance System

Case rates in the school-aged (5-18y) population statewide and by district

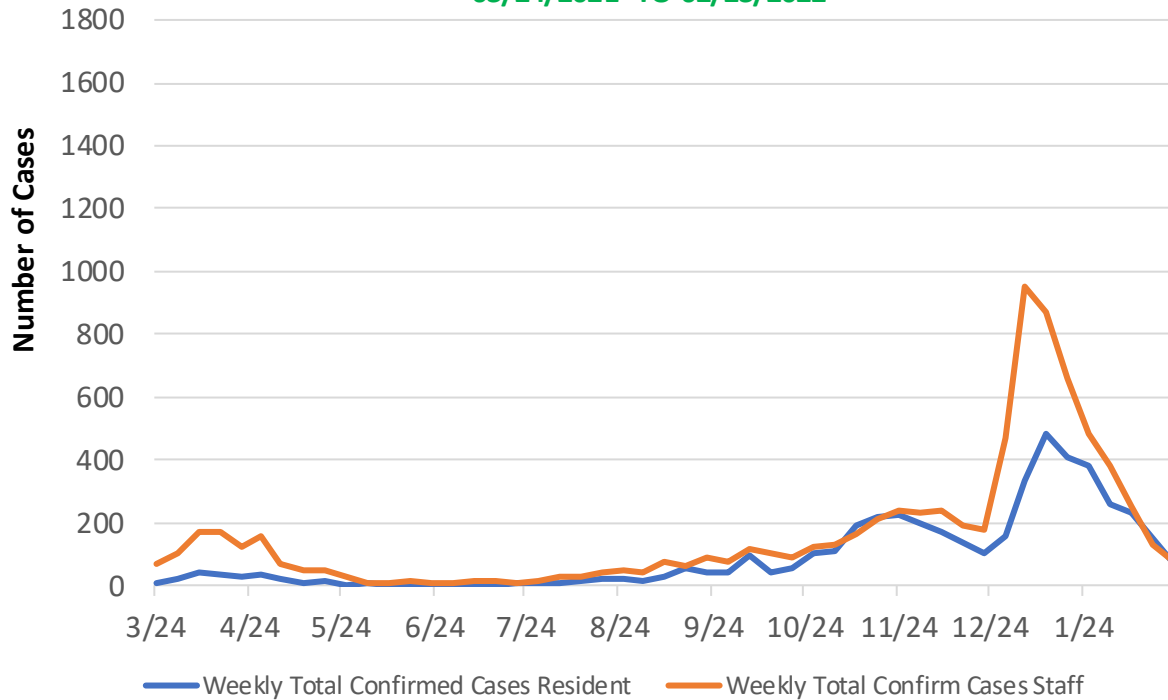
- Case rates in 5–18-year-olds have recently become more similar to 19–50-year-olds
- Case rates among all populations (school-aged and non) are currently declining



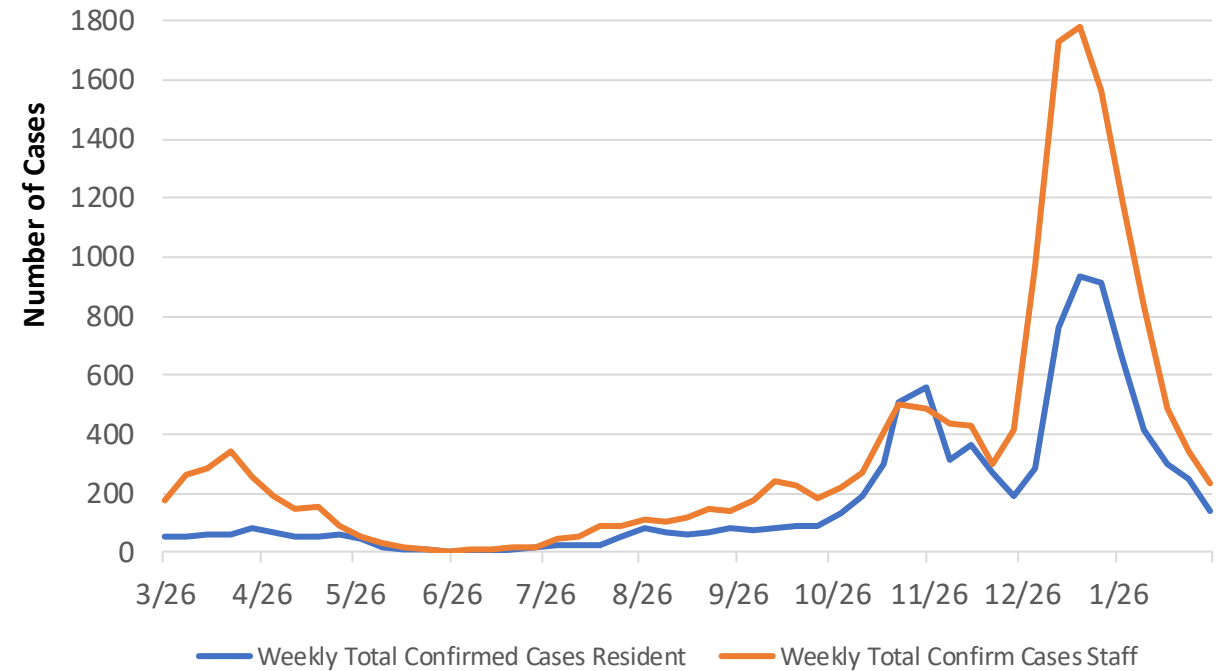
Sources: MDSS case data as of 2/28/2022 (data through 2/21/22), line charts use statewide age group population, map uses ISD enrolled populations from EOG mask tracker data.

Reported Cases within Long Term Care Facilities: Adult Foster Care, Homes for the Aged, and Skilled Nursing Cases for Residents and Staff

STATE OF MICHIGAN WEEKLY TOTAL CONFIRMED COVID-19 CASES IN AFC/HFA RESIDENTS AND STAFF
03/24/2021 TO 02/23/2022



STATE OF MICHIGAN WEEKLY TOTAL CONFIRMED COVID-19 CASES IN SNF RESIDENTS AND STAFF
03/26/2021 TO 02/25/2022



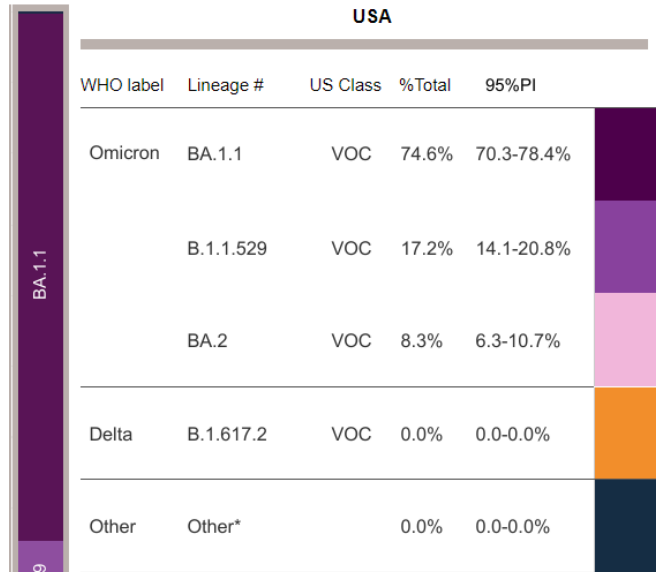
- Case counts in residents trending downwards in both AFC/HFA (67) and SNF(141)
- Case counts in staff trending downwards in both AFC/HFA (79) and SNF (230)
- Cases within LTCF continue to be higher among staff than residents

The data is from weekly reporting by facilities with bed occupancy of at least 13 beds.

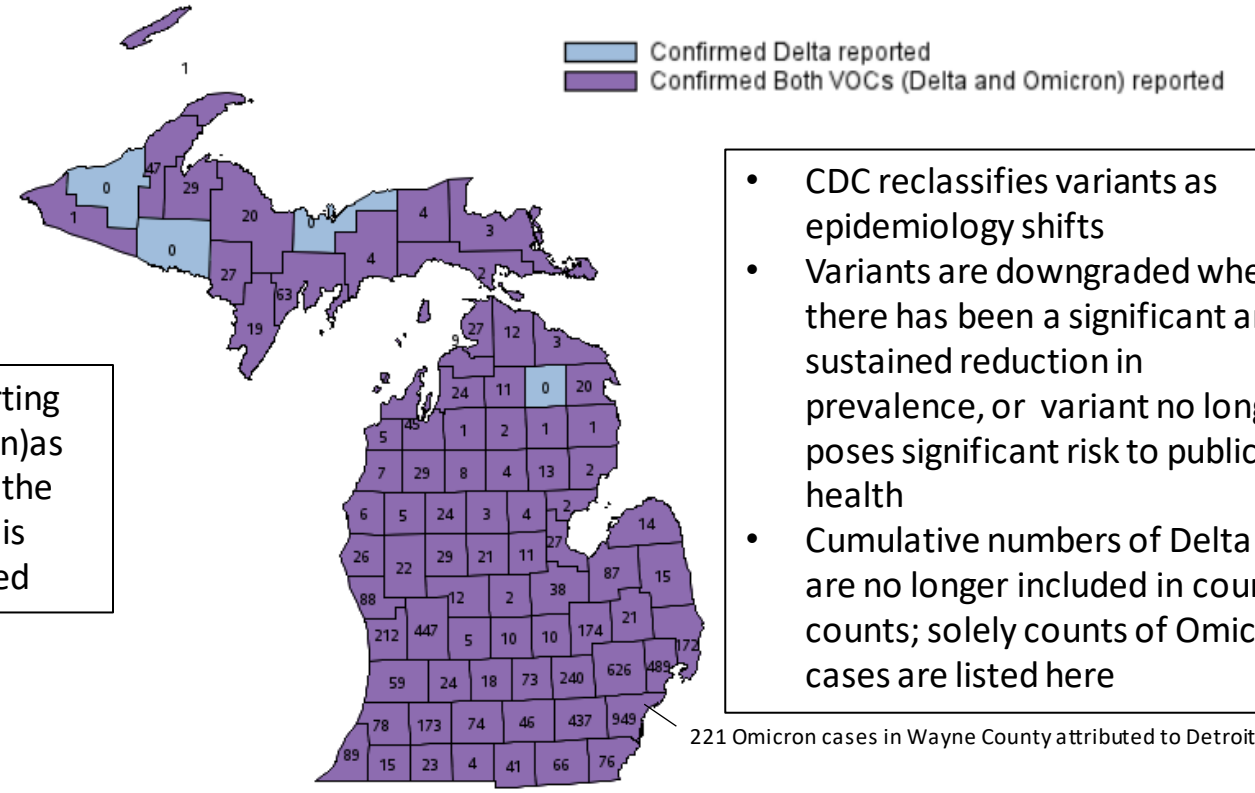
Identified COVID-19 Cases Caused by Variants of Concern (VOC) in US and Michigan

SARS-CoV-2 Variants Circulating in the United States, Feb 20 – Feb 26 (NOWCAST)

Variants of Concern in Michigan, Feb 28



Currently, CDC is reporting B.1.1.529 (i.e., Omicron) as the dominant strain in the U.S.; sub-lineage BA-2 is now also being reported



- CDC reclassifies variants as epidemiology shifts
- Variants are downgraded when there has been a significant and sustained reduction in prevalence, or variant no longer poses significant risk to public health
- Cumulative numbers of Delta are no longer included in county counts; solely counts of Omicron cases are listed here

221 Omicron cases in Wayne County attributed to Detroit City

Variant	MI Reported Cases	# of Counties	MDHHS VOC Sequenced Prev. [¶]
B.1.617.2 (delta)	30,981	83	1%
B.1.1.529 (omicron)	5,595	79	99%

Data last updated Feb 28, 2022

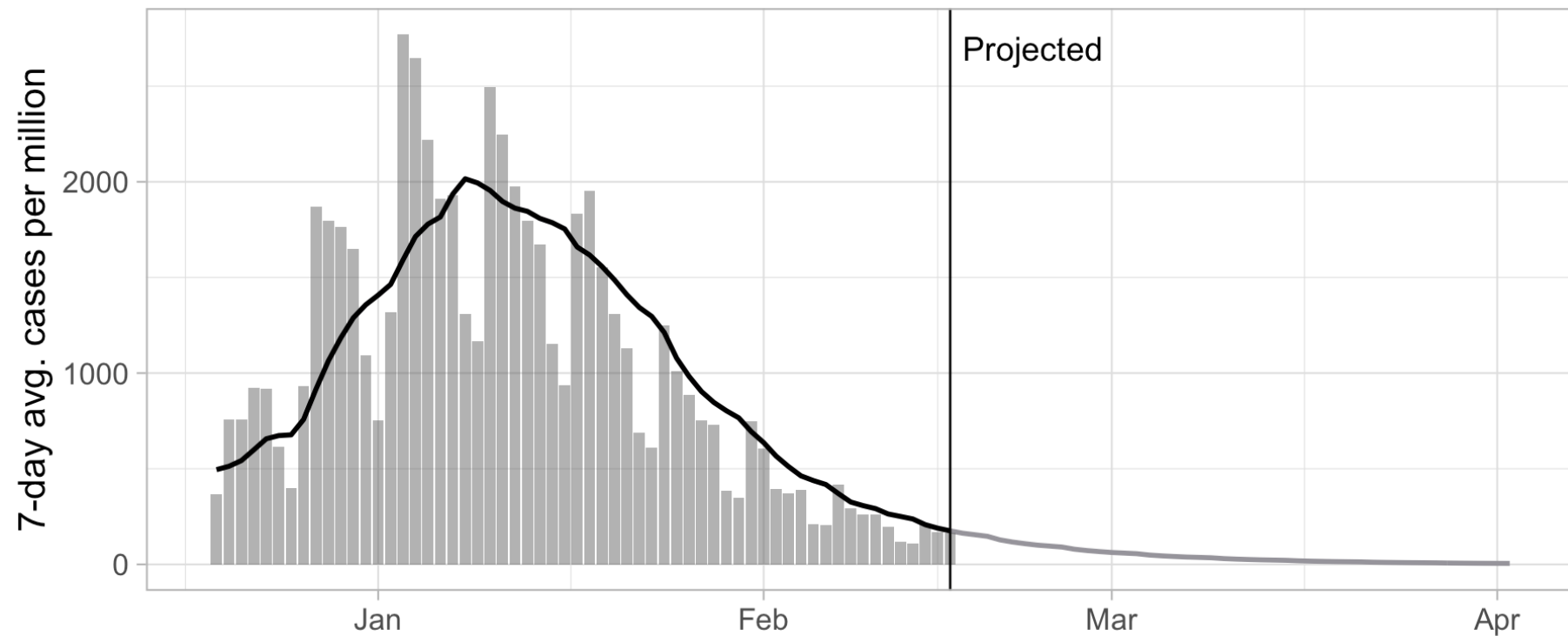
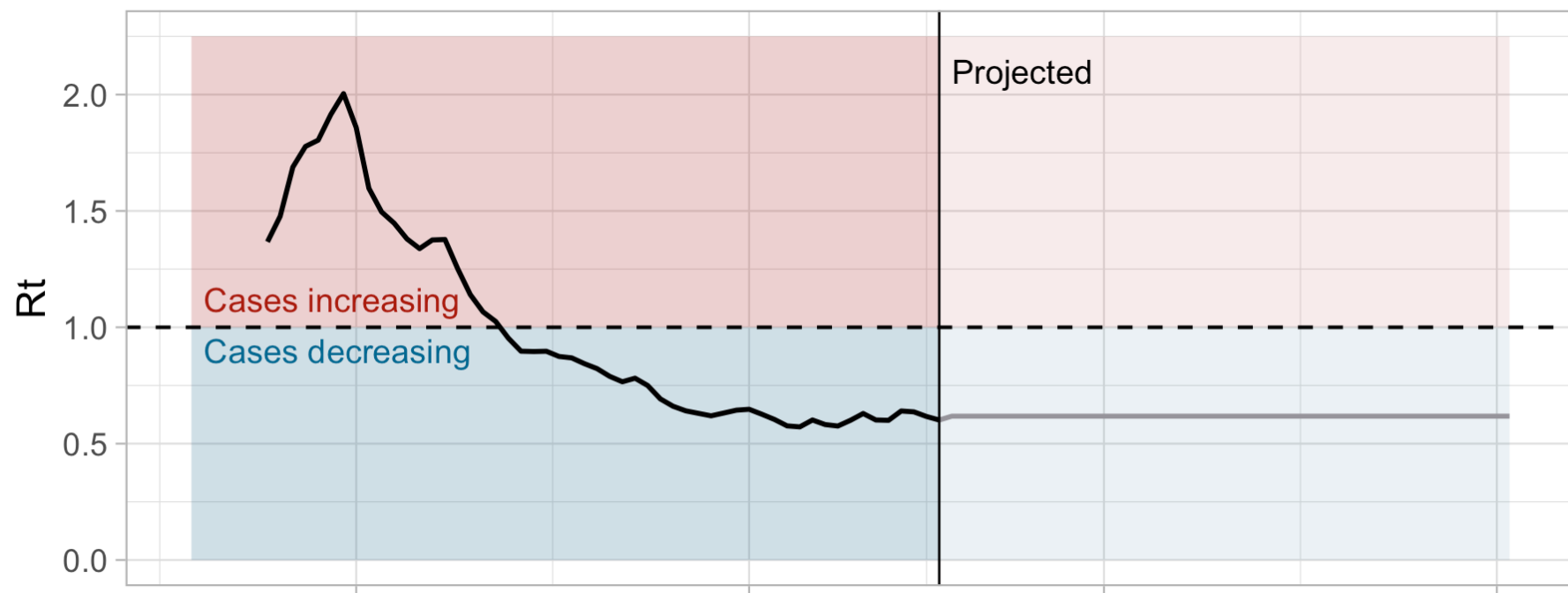
Source: MDSS

[¶] Sequence specimens are from the most recent week by onset date which may change as more specimens are sent in

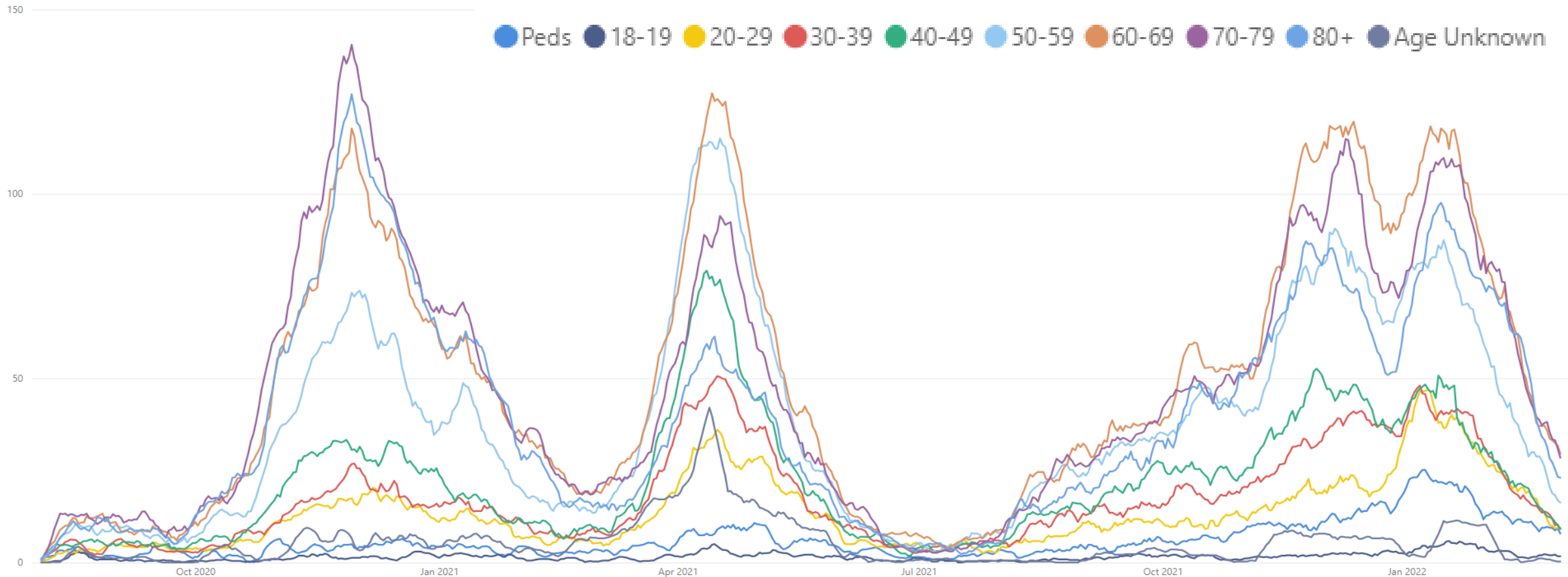
* Enumerated lineages are US VOC and lineages circulating above 1% nationally in at least one week period. "Other" represents the aggregation of lineages which are circulating <1% nationally during all weeks displayed.
 ** These data include Nowcast estimates, which are modeled projections that may differ from weighted estimates generated at later dates
 # AY.1-AY.133 and their sublineages are aggregated with B.1.617.2. BA.1 and BA.3 are aggregated with B.1.1.529. For regional data, BA.1.1 is also aggregated with B.1.1.529, as it currently cannot be reliably called in each region.

R_t in Michigan is below 1—if R_t stays at the current level, cases will continue to decline

- R_t is at its lowest since May 2021
- Case rates are now similar to late summer/early fall 2021 levels
- Projection shows cases if R_t remains at most recent 7-day avg. level
- Note that projections don't account for how changes in masking/distancing may alter R_t



Average Hospital Admissions by Age Group

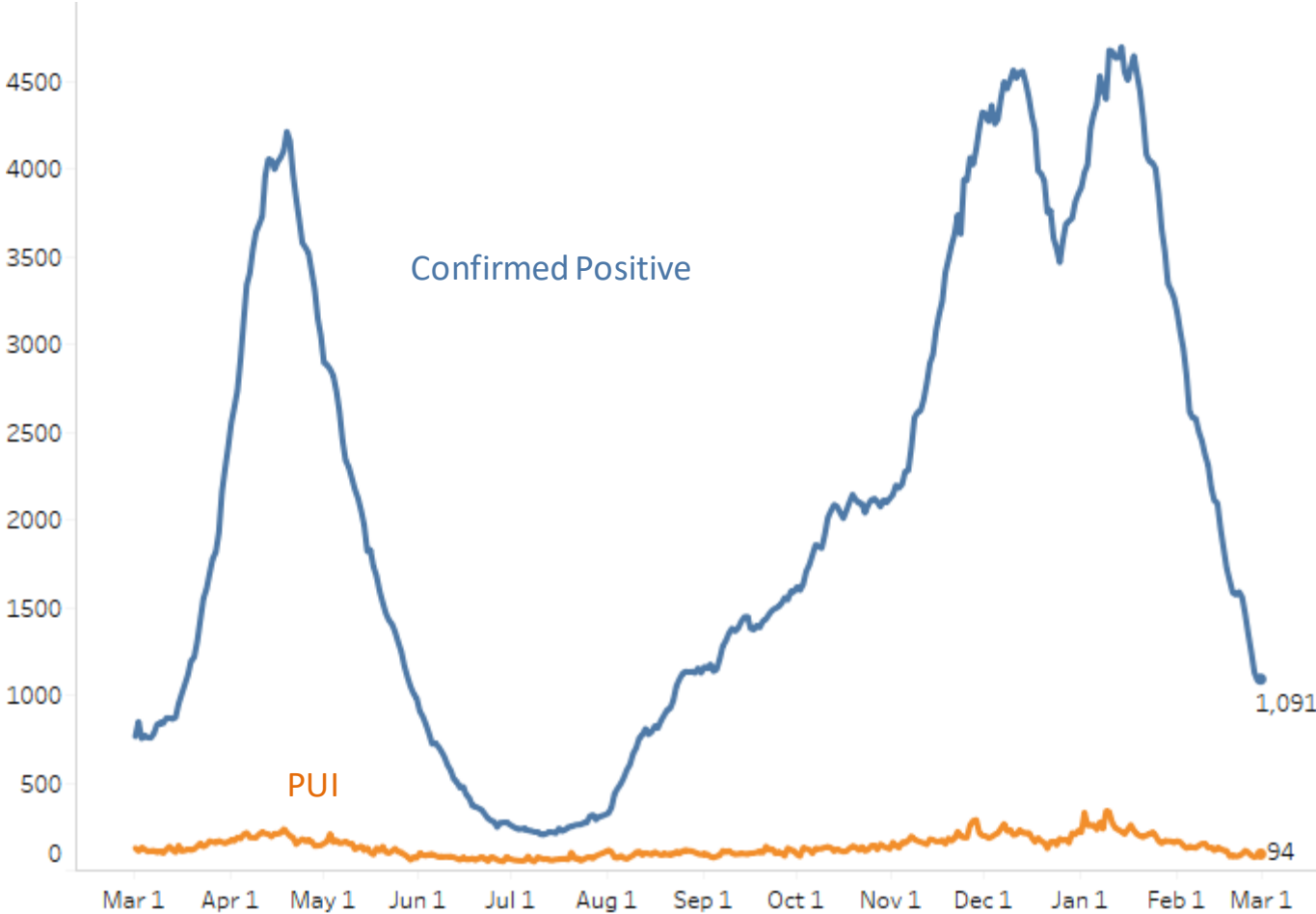


- Trends for daily average hospital admissions declined (-29%) since last week (vs. -34% prior week)
- Overall, most age groups saw declines this week
- More than 20 daily hospital admissions was seen for each of the age groups of 60-69, 70-79, and 80+

Source: CHECC & EM Resource

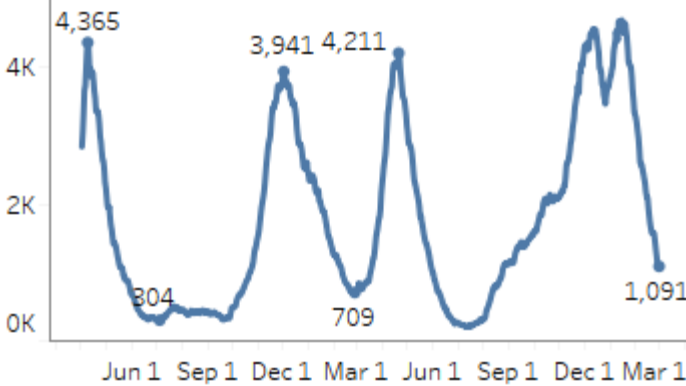
Statewide Hospitalization Trends: Total COVID+ Census

Hospitalization Trends 3/1/2021 – 2/28/2022
Confirmed Positive & Persons Under Investigation (PUI)



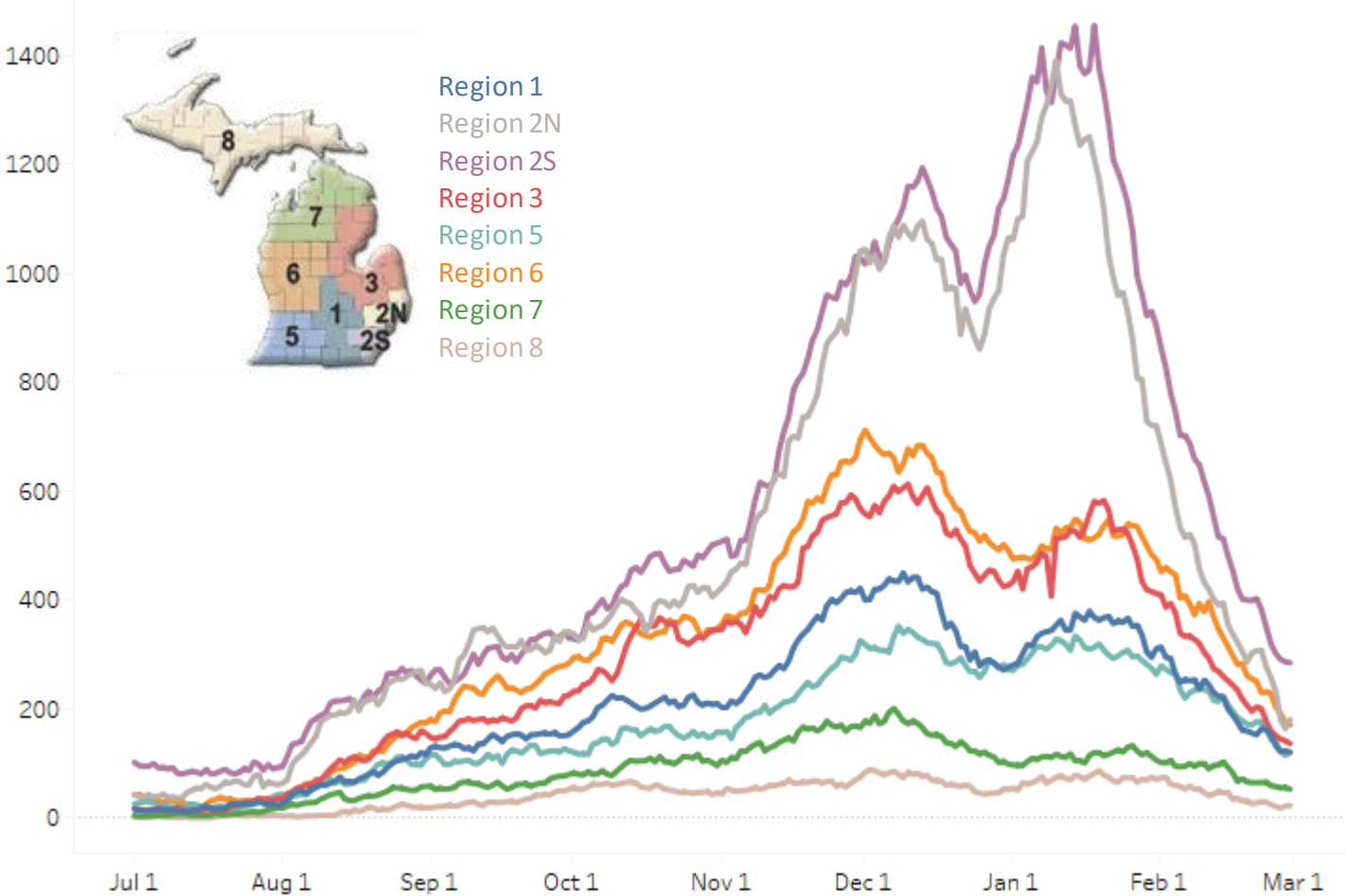
The COVID+ census in hospitals continues to decrease and is down 31% from last week (previous week was down 24%).

Hospitalized COVID Positive Long Term Trend (beginning March 2020)



Statewide Hospitalization Trends: Regional COVID+ Census

Hospitalization Trends 7/1/2021 – 2/28/2022
Confirmed Positive by Region



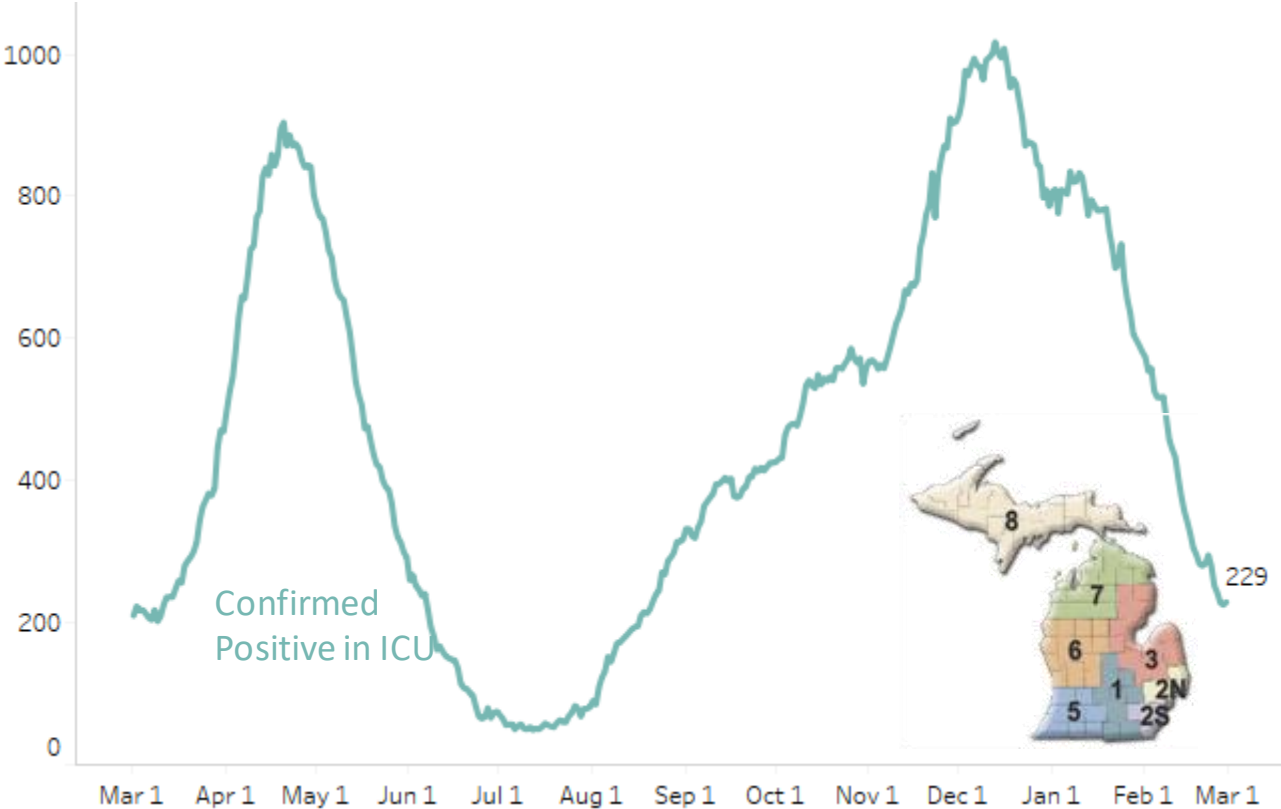
This week hospitalizations have decreased in all regions.

All regions have fewer than 150 hospitalized per Million population.

Region	COVID+ Hospitalizations (% Δ from last week)	COVID+ Hospitalizations / MM
Region 1	121 (-21%)	112/M
Region 2N	181 (-41%)	82/M
Region 2S	285 (-29%)	128/M
Region 3	137 (-33%)	121/M
Region 5	120 (-32%)	126/M
Region 6	171 (-32%)	117/M
Region 7	53 (-18%)	106/M
Region 8	23 (-18%)	74/M

Statewide Hospitalization Trends: ICU COVID+ Census

Hospitalization Trends 3/1/2021 – 2/28/2022
Confirmed Positive in ICUs



Overall, the census of COVID+ patients in ICUs has decreased by 19% from last week (previous week was down by 21%). All regions show decreasing or flat trends in ICU census.

All regions except Region 3 have ICU occupancy below 85%. All regions have 15% or fewer of ICU beds filled with COVID+ patients.

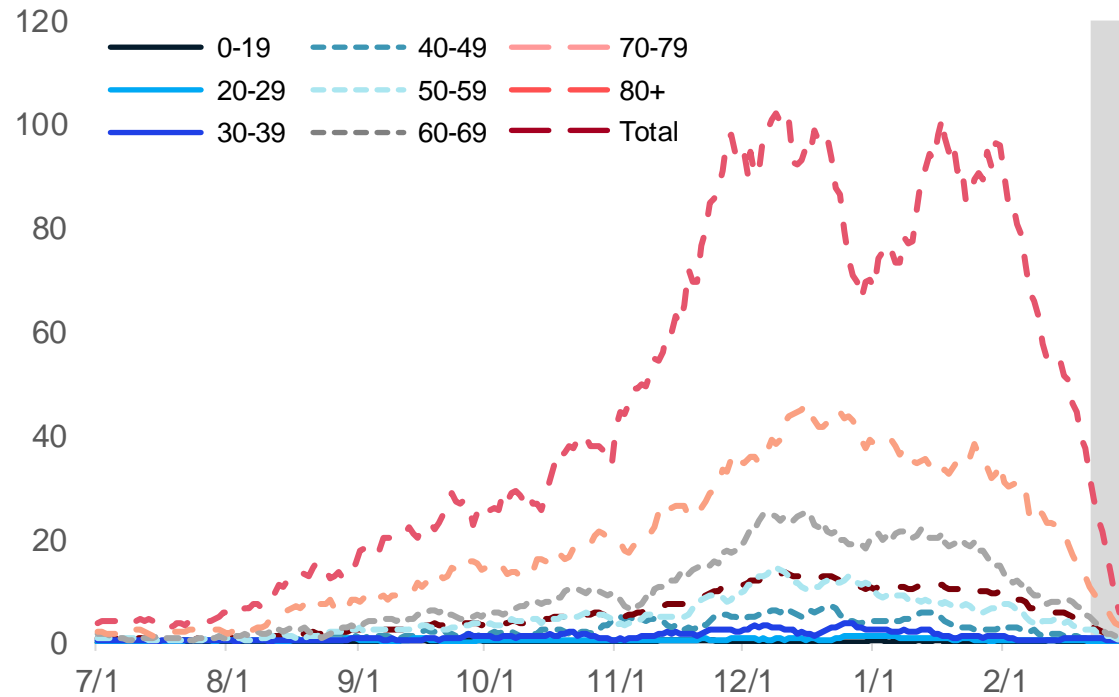
Region	Adult COVID+ in ICU (% Δ from last week)	ICU Occupancy	% of ICU beds COVID+
Region 1	18 (-25%)	79%	10%
Region 2N	28 (-36%)	70%	5%
Region 2S	70 (-18%)	79%	10%
Region 3	37 (-16%)	87%	12%
Region 5	18 (-18%)	67%	10%
Region 6	37 (-10%)	79%	15%
Region 7	15 (-12%)	75%	11%
Region 8	6 (0%)	56%	10%

Statewide Hospitalization Trends: Pediatric COVID+ Census



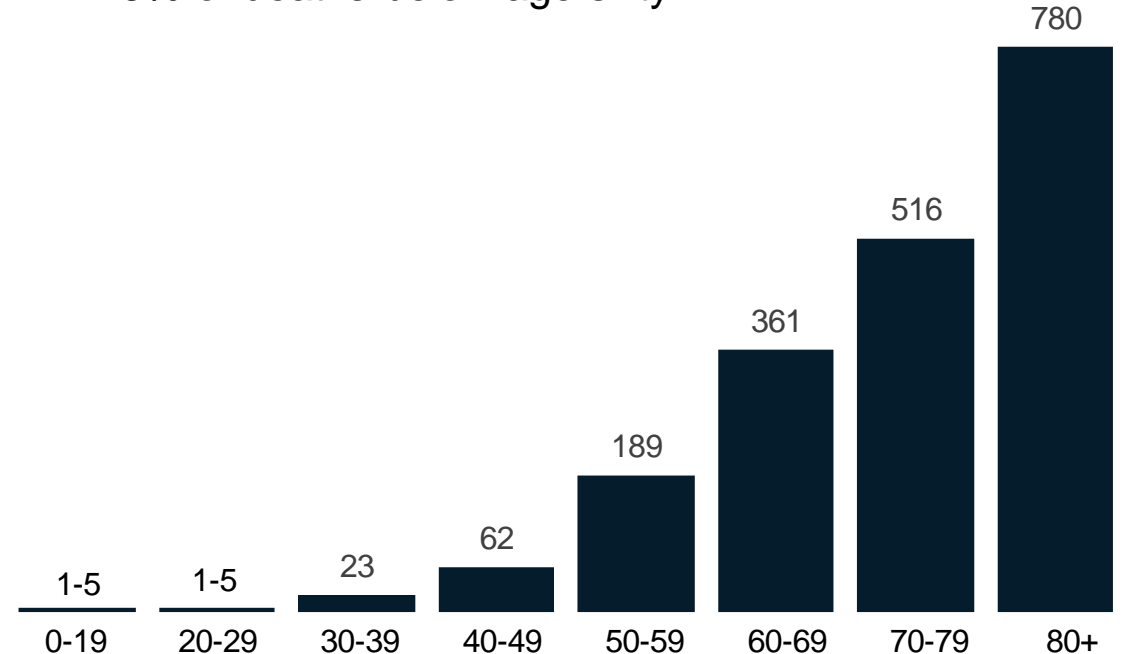
Average and total new deaths, by age group

Daily COVID-19 deaths in confirmed and probable cases per million by age group (7 day rolling average)



Total COVID-19 deaths in confirmed and probable cases by age group (past 30 days, ending 2/21/2022)

- 15% of deaths below age sixty



- Through 2/21, the 7-day avg. death rate is more than 30 daily deaths per million people for those over the age of 80
- In the past 30 days, fewer than 6 deaths among confirmed & probable COVID-19 cases occurred for those under the age of 20
- 30-day proportion of deaths among those under 60 years of age is 15%

Vaccines

Protect against severe outcomes

Boosters are more important than ever, and available for individuals 12+



Masks, Distancing & Ventilation

Prevent spread

Well-fitting, high-quality masks in all indoor public or crowded settings are more important than ever



Protect Yourself, Protect Your Community



Tests

Prevent spread

We encourage testing before gatherings, with symptoms, and after exposure

Treatment

Protect against severe outcomes

Oral antivirals and monoclonal antibody infusions are available



Understanding Personal and Household Risk

Protect yourself from COVID-19 by understanding levels of risk, practicing good hygiene and hand washing, staying home when sick, and staying up to date with vaccinations. Masking is a personal and local community choice. Know your risk; know that others may have a risk different from yours. Respect the choice.



Masking is a proven way to reduce your risk of COVID-19.

When making decisions about risk, consider the setting, your vaccination status and current level of community transmission in addition to the personal and family risk factors* noted below.



Up to Date on vaccine includes any booster doses as defined by the CDC. Additionally, individuals who have tested positive for COVID-19 in the past 90 days would fall into similar risk categories as those who are up to date on vaccination.



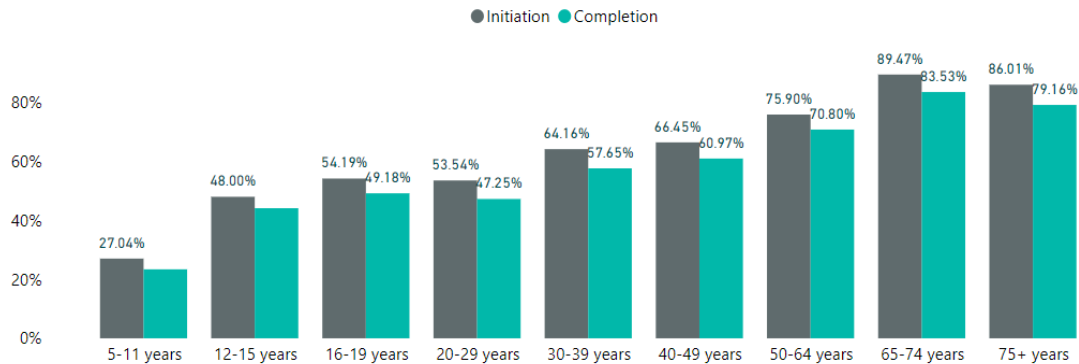
Visit Michigan.gov/Coronavirus for current COVID-19 information.

***Risk factors** include older adults (60+) and those who have serious chronic medical conditions like heart disease, diabetes or lung disease (at any age), and those who live in high-risk congregate settings (like nursing homes, corrections facilities and shelters). If you live with others who have risk factors, consider their health in addition to your personal health.

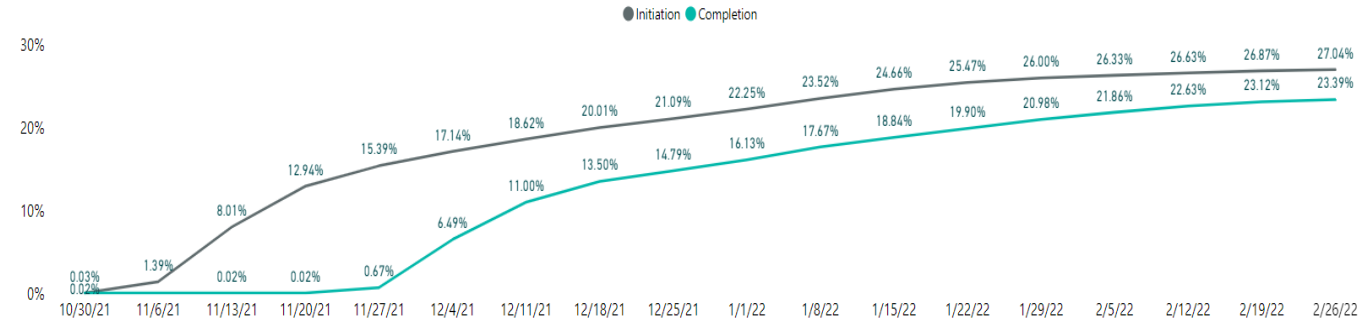
Vaccinations and Boosters

- Over 15.2 million COVID-19 vaccine doses have been administered in Michigan
 - Over 6.6 million Michiganders have received at least one dose (66.1%)
 - Over 5.9 million Michiganders have completed a primary series (59.3%)
 - Over 3 million additional/booster doses have been administered in Michigan
 - 51.7% of the fully vaccinated population has received a booster
 - 74.5% of the fully vaccinated population 65 years of age or older has received a booster

COVID Vaccine Coverage by Age Group



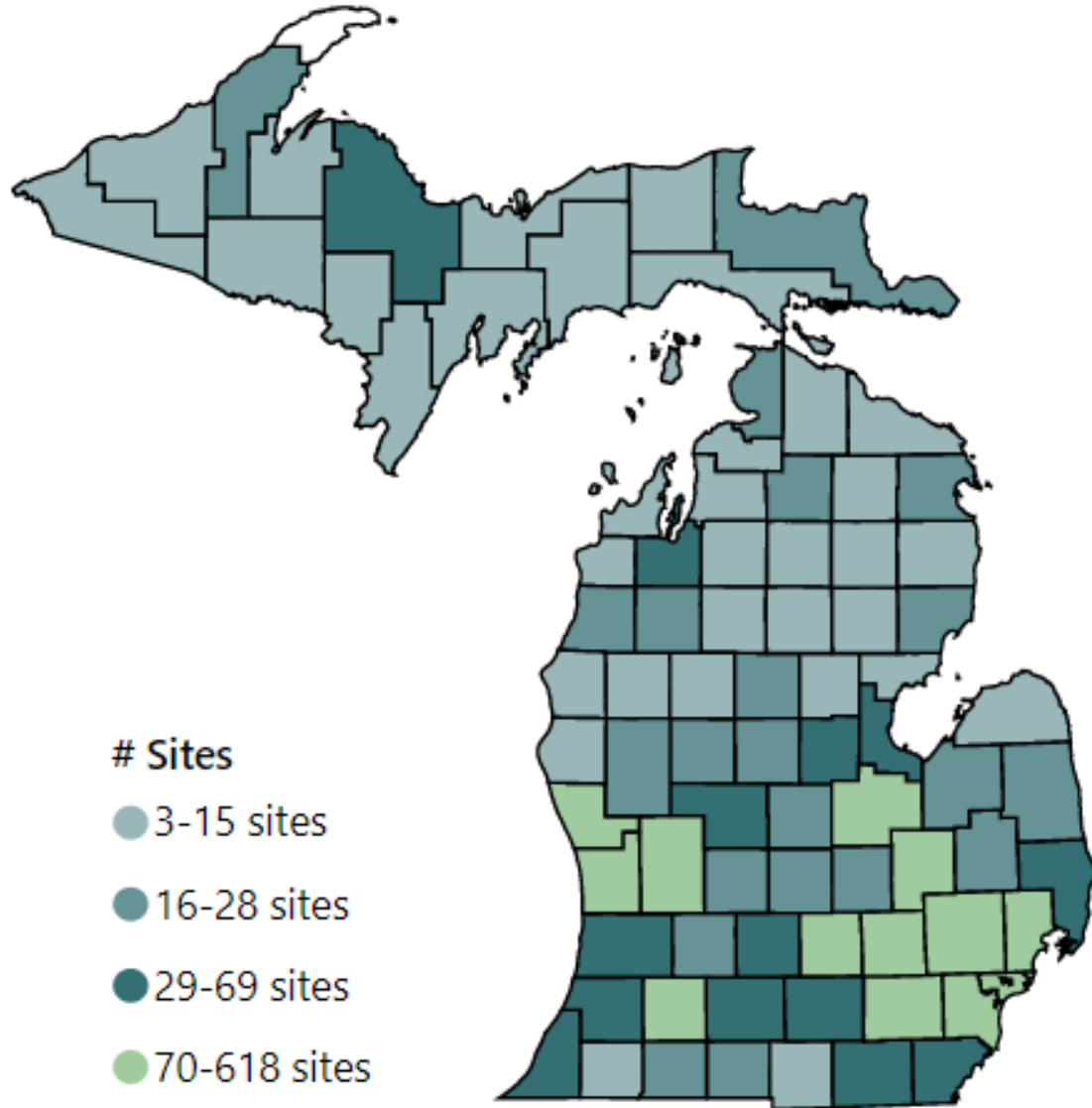
Initiation and Completion Trends in 5-11-year-olds



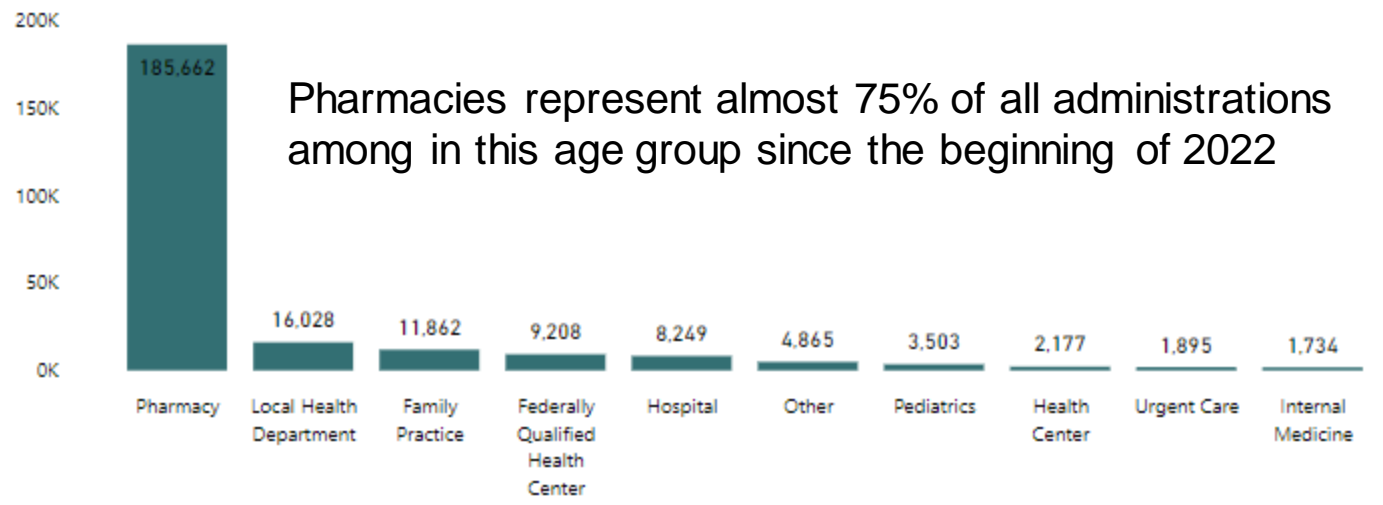
<https://covid.cdc.gov/covid-data-tracker/#vaccinations>

https://www.michigan.gov/coronavirus/0,9753,7-406-98178_103214_103272-547150--,00.html

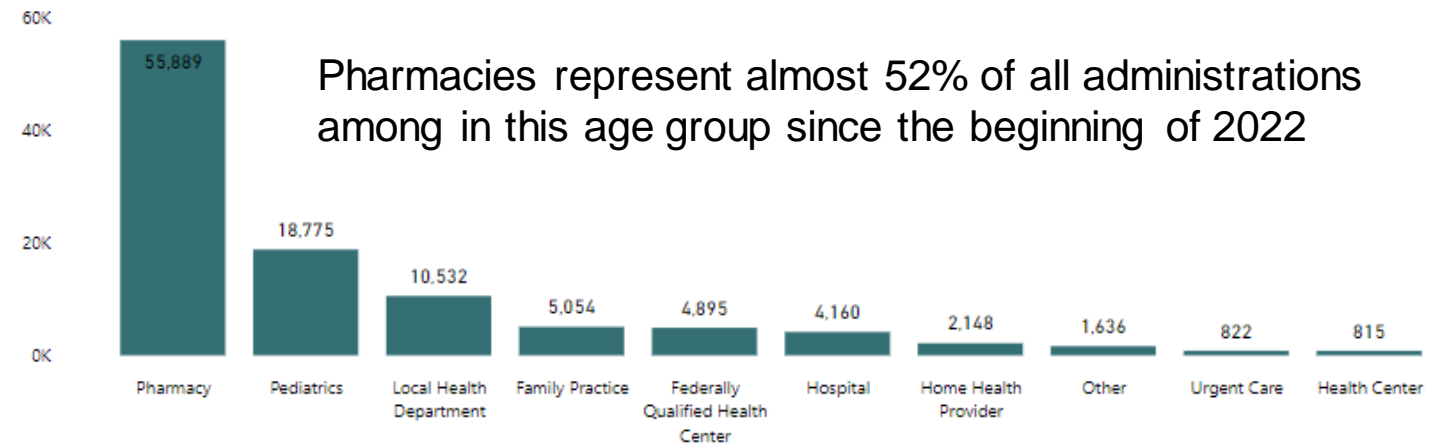
Michigan Vaccine Provider Sites by County



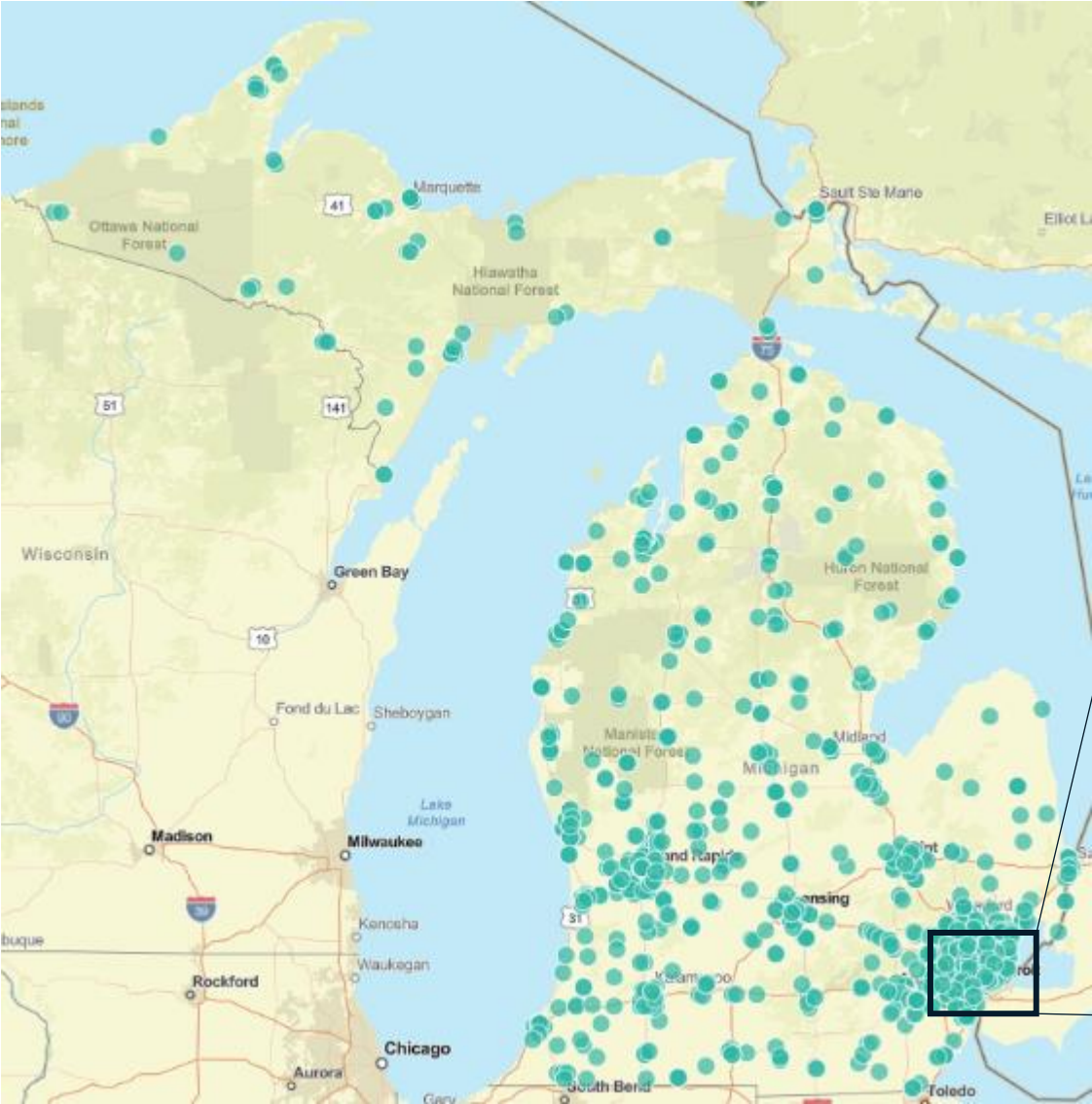
Doses Administered by Provider Type, Patients 12 and up, since 1/1/2022



Doses Administered by Provider Type, Patients 5 to 11, since 1/1/2022



Vaccines for Children (VFC) Program Providers Enrolled for COVID-19 Vaccine



916 VFC Providers Enrolled to provide COVID-19 vaccine
131 in the City of Detroit and Wayne County



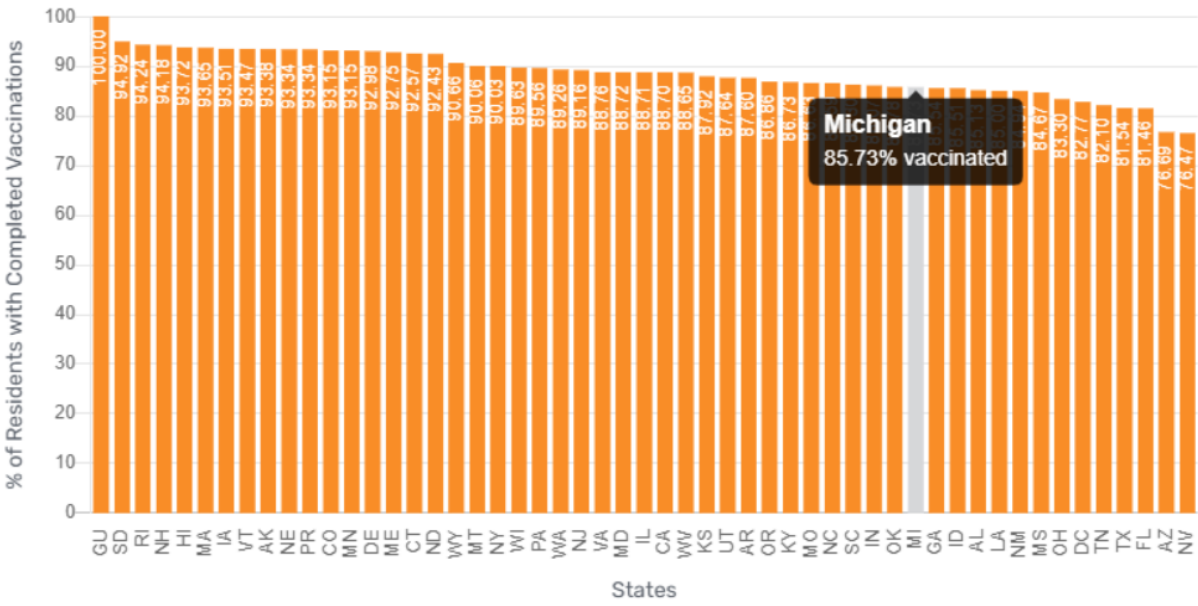
Completed vaccination among Skilled Nursing Cases for Residents and Staff

86% of SNF residents are fully vaccinated; 40 of 53 states/territories

81.0% of SNF staff are fully vaccinated, 43 of 53 states/territories
4.7% of SNF staff are partially vaccinated

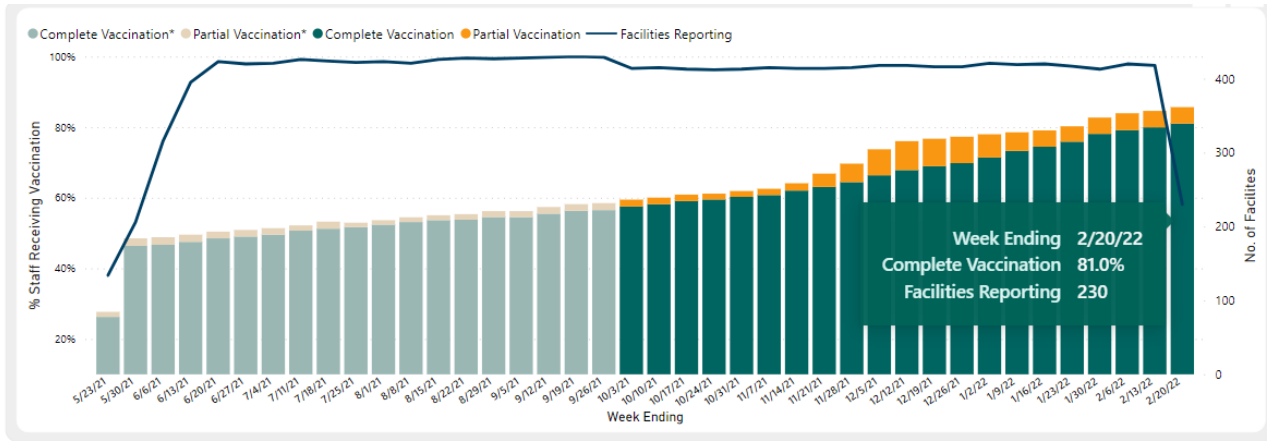
Percentage of Current Residents with Completed COVID-19 Vaccinations per Facility

Note: This shows the average percentage among facilities who have reported vaccination data in the current or prior week.



<https://data.cms.gov/covid-19/covid-19-nursing-home-data>

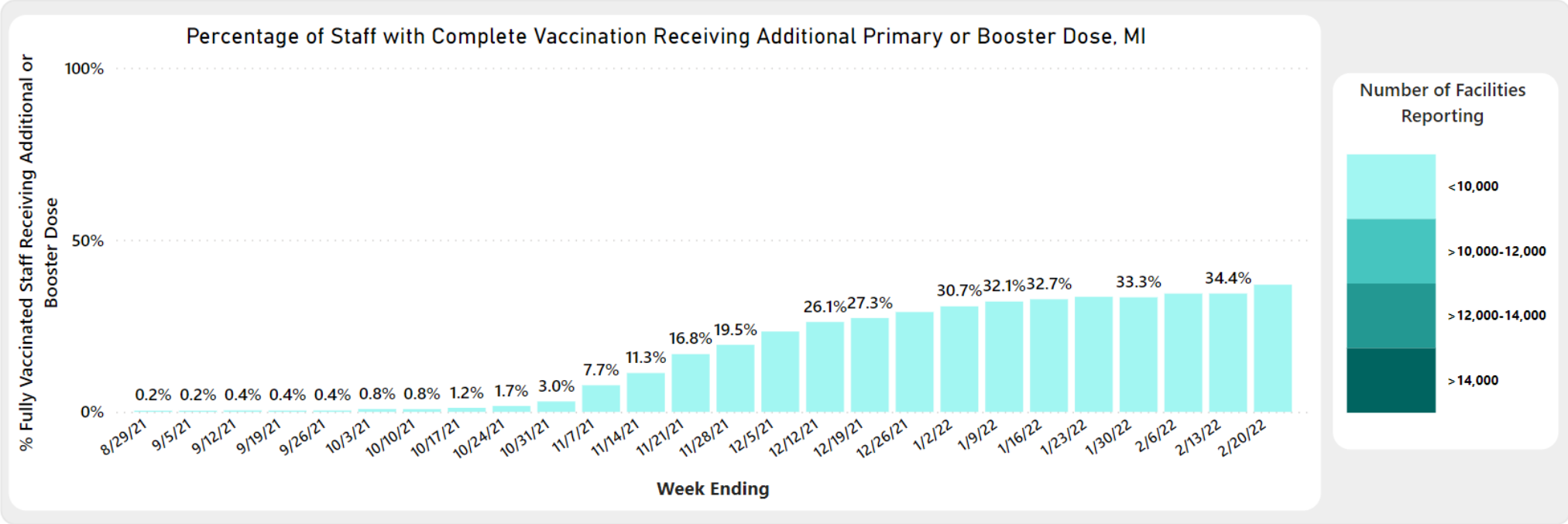
COVID-19 Vaccination Coverage and Reporting among Staff in Nursing Homes, by Week



Data are not displayed if less than 5 facilities reported in a state during time period of interest. All data can be modified from week to week by facilities. Exclusions: for best epidemiological understanding, data that appear inconsistent with surveillance protocols are excluded. Vaccination coverage is calculated as the total number of staff vaccinated divided by (the total number of staff minus the number of staff with medical contraindications) multiplied by 100. Differences in how each facility implements this COVID-19 vaccination data collection, including variation in which staff collect the data, may affect facility reporting patterns.
*As of week-ending 10/3/2021, the staff categories that make up the denominator for staff vaccination coverage were modified to match those used for reporting influenza vaccination coverage.
Data source: Centers for Disease Control and Prevention, National Healthcare Safety Network: Accessibility: [Right click on the graph area to show as table]
For more information: <https://www.cdc.gov/nhsn/ltc/weekly-covid-vac/index.html>

<https://www.cdc.gov/nhsn/covid19/ltc-vaccination-dashboard.html>

Percentage of Staff in Nursing Homes with Completed COVID-19 Vaccination and Receiving Additional Primary or Booster Dose by Week in Michigan



For weeks ending 8/29-9/26, facilities reporting 100% of fully vaccinated individuals received an additional primary or booster dose were excluded. Data for the most recent week are still accruing.

Data source: Centers for Disease Control and Prevention, National Healthcare Safety Network: Accessibility: [Right click on the graph area to show as table]

For more information: <https://www.cdc.gov/nhsn/ltc/weekly-covid-vac/index.html>

Data as of 2/21/2022 5:30 AM

APPENDIX

Vital Infrastructure: K-12 school clusters and outbreaks, week ending Feb 24

Number of reported outbreaks/clusters decreased since last week (392 to 321), with decreases in Pre-K-Elementary (211 to 174), and High Schools (115 to 96), and Middle/Jr High (65 to 50). Administration stayed the same (1 outbreak).

Region	Number of reported cases, #	# Ongoing - Excluding New	# New	Number of outbreaks	Range of cases per outbreak
Region 1	1,275	0		67	3-103
Region 2n	230	0		16	3-67
Region 2s	140	33		24	3-15
Region 3	3,140	14		94	2-152
Region 5	210	0		25	3-23
Region 6	1,158	16		67	3-141
Region 7	472	8		22	3-116
Region 8	146	0		6	5-56
Total	6,771	71		321	2-152

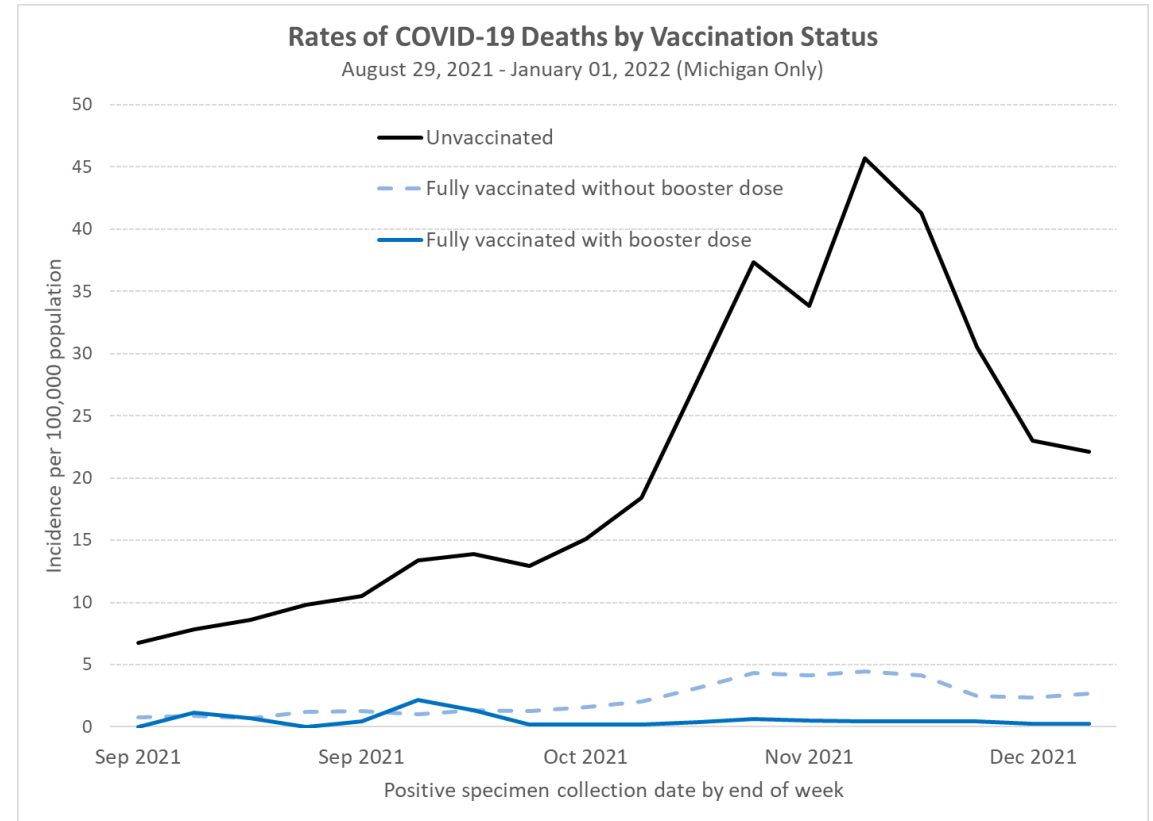
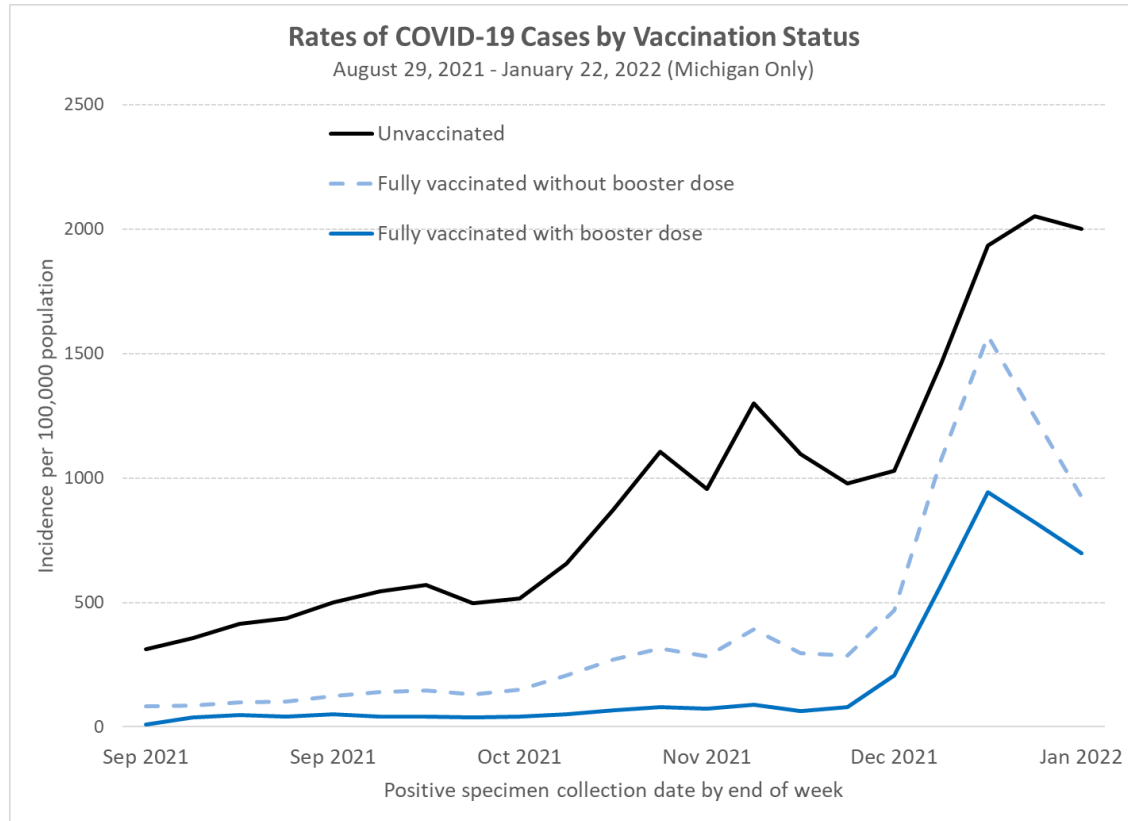
Grade level	Number of reported cases, #	# Ongoing - Excluding New	# New	Number of outbreaks	Range of cases per outbreak
Pre-school - elem.	2,508	39		174	2-80
Jr. high/middle school	1,337	4		50	3-95
High school	2,918	28		96	3-152
Administrative	8	0		1	8
Total	6,771	71		321	3-152

Many factors, including the lack of ability to conduct effective contact tracing in certain settings, may result in significant underreporting of outbreaks. This chart does not provide a complete picture of outbreaks in Michigan and the absence of identified outbreaks in a particular setting in no way provides evidence that, in fact, that setting is not having outbreaks.

NOTE (10/4): MDHHS adopted the new [CSTE school cluster and outbreak definition](#) which impacts how transmissions within school-sponsored settings are reported to the health department

Source: LHD Weekly Sitreps

Michigan Age-Standardized Rates of COVID-19 Cases and Deaths by Vaccination + Booster Status



In December, unvaccinated adults aged 18 years and older had:

4.9 X
Risk of Testing Positive for COVID-19

AND

88.5 X
Risk of Dying from COVID-19

compared to fully vaccinated adults with booster doses

Footnotes: Incidence rates were age-standardized using the 2000 U.S. Census standard population; and rates are not adjusted for time since vaccination, underlying conditions, or other demographic factors besides age. Incidence rate ratios for the past one month were calculated by dividing the average weekly incidence rates among unvaccinated people by that among fully vaccinated people.

Cumulative COVID-19 Cases by Vaccination Status, Michigan, 1/15/21–2/11/22

Fully Vaccinated People (5,529,781)		
Cases	Hospitalization	Deaths
Percent of Cases In People Not Fully Vaccinated (1,202,306 / 1,628,439) 73.8%	Percent of Hospitalizations In People Not Fully Vaccinated (26,924 / 32,323) 83.3%	Percent of Deaths In People Not Fully Vaccinated (14,133 / 17,573) 80.4%
1,202,306 Total Cases Not Fully Vaccinated	26,924 Total Hospitalized Not Fully Vaccinated	14,133 Total Deaths Not Fully Vaccinated
Total Breakthrough Cases 426,133	Total Breakthrough Hospitalizations 5,399	Total Breakthrough Deaths 3,440
7.71% Percent of Fully Vaccinated People who Developed COVID-19 (389,840 / 5,529,781)	0.098% Percent of Fully Vaccinated People Who Were Hospitalized for COVID-19 (5,399 / 5,529,781)	0.062% Percent of Fully Vaccinated People Who Died of COVID-19 (3,440 / 5,529,781)
26.2% Percent of Cases Who Were Fully Vaccinated (426,133 / 1,628,439)	16.7% Percent of Hospitalizations Who Were Fully Vaccinated (5,399 / 32,323)	19.6% Percent of Deaths Who Were Fully Vaccinated (3,440 / 17,573)
Total Cases: 1,628,439	Total Hospitalizations: 32,323	Total Deaths: 17,573

Michigan Disease Surveillance System may underestimate the frequency of COVID-19 hospitalizations:













- Case investigation and follow-up is more difficult for individuals who get hospitalized (e.g., they are too ill to speak to investigators, don't answer their phone, or otherwise).
- These hospitalizations include individuals who are hospitalized for issues other than COVID-19 (the same as breakthrough COVID-19).
- Individuals who get hospitalization will lag after infection and may occur after case investigation.

Exposure/Quarantine Timeline and Recommendations

Have you been exposed to COVID-19?



Follow these guidelines if you have been a close contact of someone who has COVID-19.

Not Up-To-Date on COVID Vaccinations	Day 0	Up-To-Date ¹ on Vaccination (Up To Date on Vaccination and/or COVID-19+ in the previous 90 days)
Last day of exposure ²	Day 0	Last day of exposure ²
 Stay home for 5 days. ³  Monitor for symptoms.  Wear a well-fitting mask around others and take precautions. ⁴ <div data-bbox="580 811 958 861" style="background-color: #00728f; color: white; padding: 2px; text-align: center;">Test on day 5, if possible.</div>	Day 1  Day 5	 You do not need to stay home unless you develop symptoms.  Monitor for symptoms.  Wear a well-fitting mask around others and take precautions. ⁴ <div data-bbox="1098 811 1475 861" style="background-color: #00728f; color: white; padding: 2px; text-align: center;">Test on day 5, if possible.</div>
 Monitor for symptoms.  Wear a well-fitting mask around others and take precautions. ⁴	Day 6  Day 10	 Monitor for symptoms.  Wear a well-fitting mask around others and take precautions. ⁴


1. Up to date means a person has received all recommended COVID-19 vaccines, including any booster dose(s) when eligible (bit.ly/CDCStayUptoDate).
2. Household Contacts: If you can completely separate from the person in your home with COVID, then Day 0 is the last day of contact. If you are unable to separate, then your quarantine begins when they complete their isolation period.
3. Some schools may allow exemptions to quarantine under Test-to-Stay bit.ly/K-12Guidance.
4. Precautions include avoiding travel and avoiding being around people who are at high risk.



https://www.michigan.gov/images/coronavirus/Quarantine-04_747970_7.png

Isolation Timeline and Recommendations



Do you have COVID-19?



MICHIGAN DHHS
Michigan Department of Health & Human Services

Visit [Michigan.gov/Coronavirus](https://www.michigan.gov/Coronavirus) for more information.

When you are sick or when you have been infected with the virus, even if you do not have symptoms.

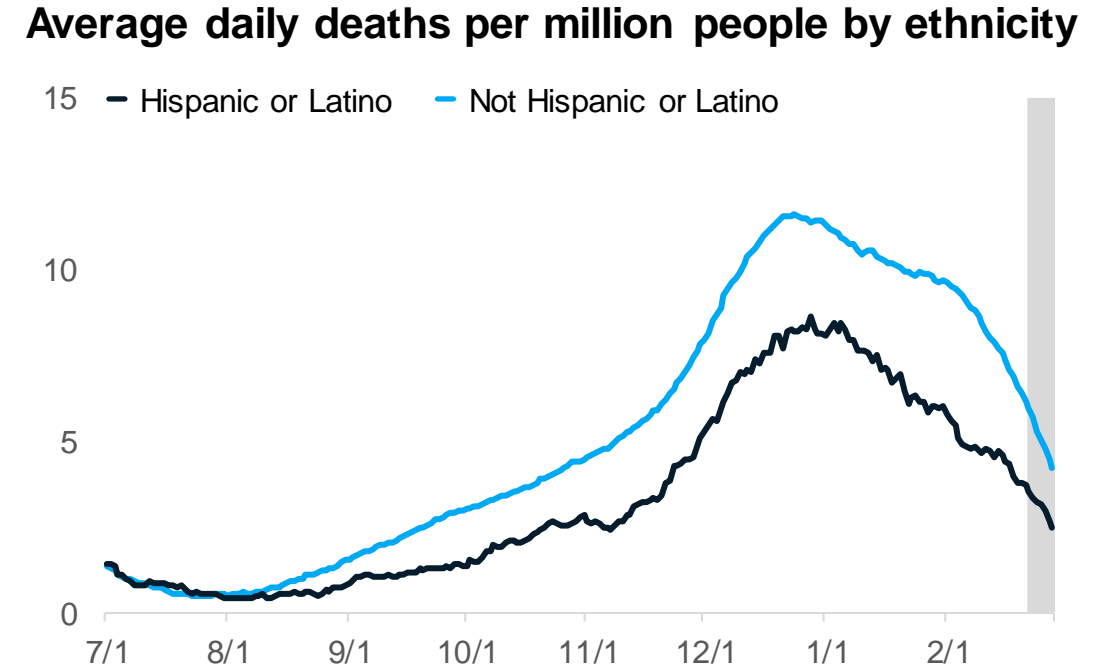
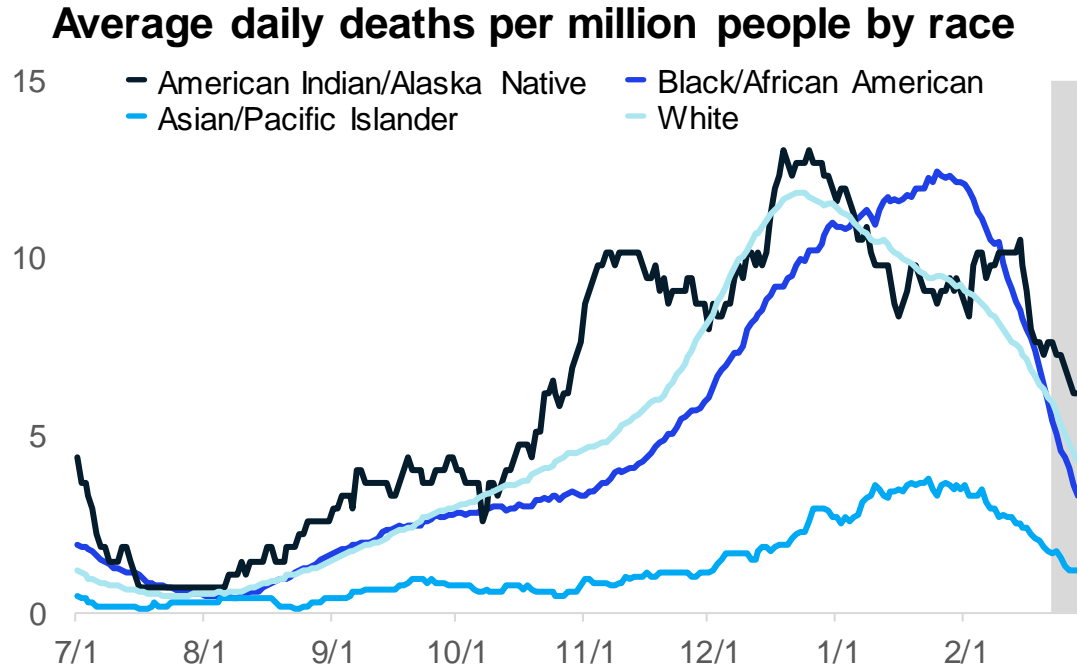
Regardless of Vaccination Status	
Day 0	First day of symptoms or test collection day
Day 1 ↓ Day 5	 <p>Stay home for 5 days. Wear a well-fitting mask around others.</p>
Day 6 ↓ Day 10	<p>May leave your house on days 6–10 if you have no symptoms or symptoms have improved.*</p>  <p>Continue to wear a well-fitting mask around others and take precautions.**</p>

* Symptoms have improved means that a person no longer feels ill, they can keep up and do their daily routine just as they did before they were ill, and any remaining symptoms are very mild, intermittent, or infrequent and do not interfere with daily living.

** Precautions include avoiding travel and avoiding being around people who are at high risk.

https://www.michigan.gov/images/coronavirus/Isolation-02_747969_7.png

30-day rolling average daily deaths per million people by race and ethnicity

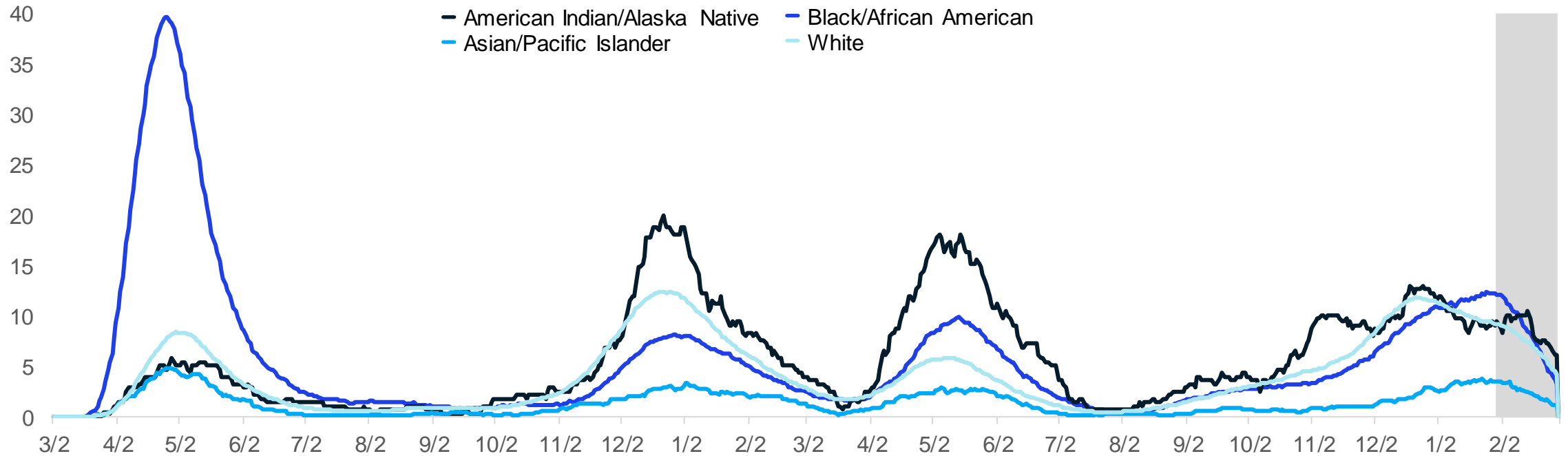


- Deaths are lagging indicator of other metrics
- Currently, American Indian/Alaska Natives have the highest death rate (7.6 deaths/million)

Note: Death information sourced from MDHHS and reflects date of death of confirmed and probable cases.
Source: MDHHS – Michigan Disease Surveillance System

30-day rolling average daily deaths per million people by race and ethnicity

Average daily deaths per million people by race

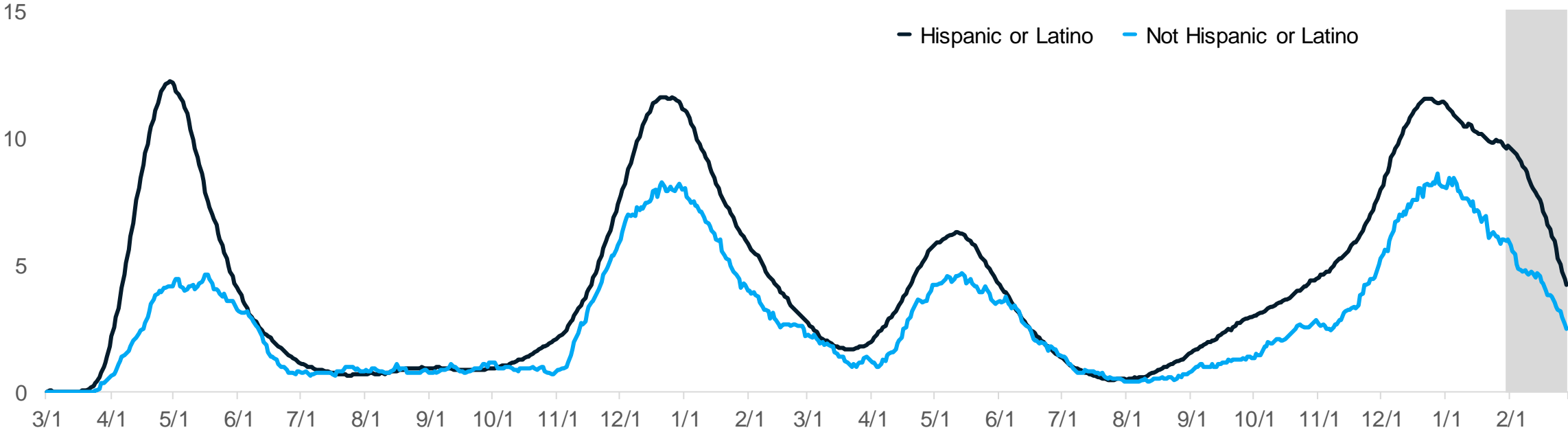


- Deaths are lagging indicator of other metrics
- Currently, American Indian/Alaska Natives have the highest death rate (7.6 deaths/million)

Note: Death information sourced from MDHHS and reflects date of death of confirmed and probable cases.
Source: MDHHS – Michigan Disease Surveillance System

30-day rolling average daily deaths per million people by ethnicity

Average daily deaths per million people by ethnicity




Deaths are lagging indicator of other metrics

Note: Death information sourced from MDHHS and reflects date of death of confirmed and probable cases.
Source: MDHHS – Michigan Disease Surveillance System

Outpatient therapy now available for those with COVID-19. Supplies may be limited.

Eligibility guidelines ensure those with the highest risks have priority access to treatments.



Those at highest risk	Treatment window after symptoms appear:	Paxlovid PO	Sotrovimab IV	Remdesivir IV	Molnupiravir PO
		5 days	10 days	7 days	5 days
 <ul style="list-style-type: none"> ● 75+ years old and not up to date* ● Moderately or severely immunocompromised regardless of vaccine status ● 65–74 years old and not up to date* with MI priority risk factor** ● Pregnant and not up to date* ● 65–74 years and not up to date* ● Under 65 years old and not up to date* with MI priority risk factor** ● 75+ years old and up to date* ● 65–74 years old and up to date* with MI priority risk factor** ● 65–74 years old and up to date* with <u>CDC risk factors</u> ● 65–74 years old and up to date* ● Younger than 65 years old and up to date* with <u>CDC risk factors</u> 	✓	✓	✓	✓ <i>If other therapies not available or appropriate</i>	
	✓	✓	✓	✓ <i>If other therapies not available or appropriate</i>	
	✓	✓	✓	✓ <i>If other therapies not available or appropriate</i>	
	✓	Not currently eligible	Not currently eligible	✓ <i>If other therapies not available or appropriate</i>	
	Not currently eligible	Not currently eligible	Not currently eligible	✓	
	Not currently eligible	Not currently eligible	Not currently eligible	✓	

*Up to date means a person has received all recommended COVID-19 vaccines, including booster dose(s) when eligible (bit.ly/CDCStayUptoDate).

**MI priority risk factors include:

Obesity (Body Mass Index >35), chronic respiratory disease, pregnancy (note: in pregnancy, molnupiravir should not be used and Paxlovid and remdesivir should be used with caution when sotrovimab is unavailable), chronic kidney disease (special considerations with Paxlovid), cardiovascular disease, and diabetes.

Talk to your health care provider or visit Michigan.gov/COVIDtherapy to learn more.



Hospital Admissions and Admission Rates by Age Group

Daily new hospital admission per million by age group (7-day rolling average)

Age Group	Average† daily number of hospital admissions	Average† Daily Hospital Admission Rate*	One Week % Change (Δ #)
0-11	17.0	12.2	+0% (+0)
12-17	6.4	8.5	+5% (+<1)
18-19	5.0	19.0	-15% (-5)
20-29	33.7	24.4	-13% (-1)
30-39	40.7	33.6	+2% (+1)
40-49	34.4	29.2	-16% (-6)
50-59	70.3	52.1	-14% (-12)
60-69	102.9	80.6	-8% (-9)
70-79	97.4	127.1	-10% (-10)
80+	82.1	198.3	-11% (-10)
Total¶	10.7	50.1	-10% (-53)

* Rate per 1 million residents; † Rolling 7-day average; ¶ Total may not reflect state due to missing age data
 Note: Hospital Admission data reflects date data was submitted
 Source: CHECC and EM Resource

- Through Jan 24, there were an average of 500.7 hospital admissions per day due to COVID-19; a decrease from last week (-10%, -53)
- Most age groups saw plateaus or decreases this week
- The largest one-week count decrease was among those 50-59 years (-12)
- Average daily hospital admission count (102.9 hospital admissions per day) were highest among those 60-69
- Average daily hospital admission rate (198.3 hospital admissions/million) were highest for those aged 80+
- More than 70 daily hospital admissions were seen for those aged 50-59, 60-69, 70-79, and 80+

Note: for some age groups, small changes in number of hospitalization admissions can cause large change in One Week Percent Change

Guiding Principles

To prioritize **equity** in each of the following objectives

01

Prevent death and severe outcomes

Prioritize uptake of vaccinations and booster doses.

Protect the most vulnerable

- ❖ Mitigate risks in congregate settings using all available tools.

Maximize early access to testing and therapeutics.

02

Protect health care capacity (from hospitals to first responders to LTFS)

Reduce community spread during a surge through all available tools.

Reduce severity of cases, need for ICU/ventilators through vaccines and therapeutics.

03

Keep vital infrastructure (schools, corrections) functioning safely, while planning for recovery

Establish a new normal at every phase of the pandemic.

- ❖ Utilizing all available tools and the concept of "risk budget".

Provide tools to the public to protect themselves.

- ❖ Including OTC testing and instructions for isolation and contact tracing.