MI COVID RESPONSE DATA AND MODELING UPDATE

March 15, 2022

MI COVID response Data and modeling update

March 15, 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
- As of March 10th, 7% of Michigan Counties at High COVID-19 Community Levels
- CDC updates Community Levels for every U.S county weekly and provides recommends for individuals and communities as what COVID-19
 prevention strategies to implement

Harm Reduction

- Current case rates and hospitalizations, and increased access to mitigation, indicate Michigan has entered a post-surge recovery phase
- Isolation & quarantine recommendations adjust as we cycle through periods of response, recovery and readiness; local health department decisions based on local conditions
- Statewide recommendations on universal masking dialed down in recovery. Support individuals making informed choices about their own masking decisions
- Individuals at risk of severe outcomes had higher prevalence of COVID-19 infection in Michigan; vaccination, testing and treatments need to be available to individuals with these conditions
- Vaccinations and Boosters administration slowed during the recovery phase, including in congregate care settings and among children
- MDHHS is focusing efforts to enroll VFC providers who are not yet enrolled to administer COVID-19 vaccinations which will help provide COVID-19 vaccines for those under the age of 18

Situational Awareness

- Globally, nationally, and in Michigan, most metrics are continuing to decline to levels last seen in July and August of 2021
 - We are closely monitoring the emergence of the Omicron BA.2 wave in Europe to determine threat
- The sentinel wastewater dashboard showing declines in majority of sites
- Transmission within settings like schools and long-term care facilities are declining
- COVID+ census in hospitals, hospital admission, ICU utilization, and pediatric census is declining in all regions

CDC COVID-19 Community Levels: Key Messages

As of March 10th, 7% of Michigan Counties at High COVID-19 Community Levels

- Six counties remain at "high" level for increased burden on healthcare or severe disease: Alcona, Alpena, Montmorency, Presque Isle, St. Clair, Sanilac
- These six counties met the highest level for either HSA COVID-19 Inpatient Bed Utilization or COVID-19 Hospital Admissions per 100,000

CDC Community Levels and COVID-19 prevention strategies are available here

- Levels for each individual county can be viewed at the link above
- Guidance is provided for individual, household and community leaders at all three levels

As of March 10th, 7% of Michigan Counties at High COVID-19 Community Levels



| Percent of Counties | | |
|---------------------|---------------|----------|
| | United States | Michigan |
| Low | 73% | 81% |
| <mark>Medium</mark> | 21% | 12% |
| High | 6% | 7% |

- In the US, 6% of counties have high risk for medically significant disease and healthcare strain; in Michigan, 7% of counties are at high risk.
- CDC will release COVID-19 Community Levels on Thursdays (link: <u>https://www.cdc.gov/coronavirus/2019-ncov/your-health/covid-by-county.html</u>)

CDC new COVID-19 Community Levels are Publicly Available

Link: <u>https://www.cdc.gov/coronavirus/2019-ncov/your-health/covid-by-county.html</u>

- Easy to access dashboard available on the CDC's website
 - Filter by State and County to get level
 - Or download nationwide database to view all U.S. counties
- Updated at least once weekly (Thursday)

COVID-19 by County

Updated Mar. 11, 2022 Languages
Prin

Know Your COVID-19 Community Level

COVID-19 Community Levels are a new tool to help communities decide what prevention steps to take based on the latest data. Levels can be low, medium, or high and are determined by looking at hospital beds being used, hospital admissions, and the total number of new COVID-19 cases in an area. Take precautions to protect yourself and others from COVID-19 based on the COVID-19 Community Level in your area.

| COVID-19 C Find community I | ounty Check evels and prevention ste | ps by county. | | | |
|---|---|------------------------------|----------------------|----------|----|
| Select a Location (all fields re | equired) | | | | |
| Michigan | * | Ingham County | | ~ | Go |
| < Start Over | | | | | |
| Low | | | | | |
| In Ingham County, Michigar | 1, community level is Low | Ι. | | | |
| Stay <u>up to date</u> with CO <u>Get tested</u> if you have | OVID-19 vaccines symptoms | | | | |
| People may choose to mask COVID-19 should wear a ma | < at any time. People with ask. | n symptoms, a positive test, | or exposure to someo | one with | |
| If you are immunocompron | nised. learn more about l | how to protect yourself. | | | |

Harm Reduction: Key Messages

The Michigan COVID-19 response cycle can be broken down into three key phases

- Response Local and state public health implement rapid response to a surge. The public may be advised to increase masking, testing and social distancing
- Recovery Post-surge. No immediate resurgence predicted. Local and state public health will monitor conditions that could lead to future surges
- Readiness A surge in cases is expected, with implications on severity of illness and hospital capacity. Increased communication to the
 public regarding possible new risks
- Current case rates and hospitalizations, and increased access to vaccines, testing and therapies, indicate Michigan is entering a post-surge recovery phase of the cycle

Update: Isolation and Quarantine Guidance for Michiganders in Recovery Phase

- MDHHS supports adjusting isolation & quarantine recommendations as we cycle through periods of response, recovery and readiness and following local health department decisions based on local conditions
- In the current Recovery phase, Michiganders have many effective tools including vaccination, therapeutics, masking, and access to over-thecounter tests, which can help mitigate spread
- Recommendations regarding isolation and quarantine may change as conditions evolve such changes could include the presence of a new variant that increases the risk to the public, or an increased number of cases that strains the healthcare system

Ongoing to the second s



A surge is expected due to a new variant, local outbreak, seasonal changes.

Expect increased illness severity and overwhelmed hospital capacity.

- Educate public regarding new risks.
- Ensure enough supplies of tests, masks and medications.

Response (Surge)

A surge means rapid response by local and state public health.

- Increased supplies for testing, masking and medications.
- Increased masking, testing and social distancing efforts.





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



Recovery (Post-Surge)

Expect to remain in this phase for longer periods as COVID-19 evolves.

Monitor conditions that may lead to surges, such as a new variant.

- Encourage vaccines to decrease COVID-19 risks.
- Strengthen community support with local stakeholders.
- Empower community members to make best choices for individual situations.

CDC level changes may not align exactly with transitions in the Readiness-Response-Recovery cycle



- Readiness phase may occur while still low but aware of coming surge
 - Considerations for Recovery-to-Readiness transition include a new variant with changes in transmissibility, severity, or vaccine effectiveness
- Response phase may begin before hospital strain metrics reach CDC level High

Isolation and Quarantine Guidance updated as Michigan enters the Recovery Phase based on the current COVID-19 conditions in the state

| | Who is Impacted | Public Health Recommendations |
|----------------------------------|---|--|
| Isolation Has COVID-19 | Any individual who tests positive for COVID-19 and/or displays COVID-19 symptoms (without an alternate diagnosis or negative COVID-19 test) regardless of vaccination status. | Isolate at home for 5 days; and If symptoms have improved or no symptoms developed, may leave isolation after day 5 and wear a well-fitted mask, for 5 more days (ending after day 10).* If positive with no symptoms, monitor for symptoms for 10 days as well. |
| Quarantine | Personal or household contact , regardless of vaccination status, exposed to someone with COVID-19 (see definition below). | Monitor symptoms for 10 days.Wear a mask around others for 10 days after exposure.**Test 3-7 days after exposure or if symptoms develop.Avoid unmasked activities or activities with higher risk of exposing vulnerable individuals.*** |
| Exposed to جيري COVID-19 | Other exposure (from community, social, work setting). | Monitor symptoms for 10 days. Test if symptoms develop. Consider wearing a mask around others for 10 days after exposure; at a minimum, mask in settings with higher risk of exposing vulnerable individuals.*** |

* If a mask cannot be worn, recommend 10 days of home isolation.

- ** If a mask cannot be worn, individual should home quarantine for 10 days. A Test to Stay protocol may also be developed in partnership between school and local health department.
- *** Activities with immunocompromised or other high-risk individuals, social/recreational activities in congregate settings.

Personal/household contacts include individuals who share living spaces, including bedrooms, bathrooms, living room and kitchens. It also includes those who live together, sleep over, carpool or have direct exposure to respiratory secretions from a positive individual. This would include exposure in childcare settings for those under 2 years of age.



Harm Reduction cont.: Masking, vaccination and testing still important

Masking is still an important component of our layered mitigation strategies

Statewide recommendations on universal masking has been dialed down in the recovery phase, and at this time we support individuals making informed choices about their own masking decisions

Individuals at risk of severe outcomes had higher prevalence of COVID-19 infection in Michigan; Vaccination, testing and treatments need to be available to individuals with these conditions

Vaccinations and Boosters administration has slowed during the recovery phase, including in congregate care settings and among children who are most recently eligible for vaccination

Pharmacies, local health departments, pediatricians and family practice providers most frequently vaccinate children MDHHS is focusing efforts to enroll VFC providers who are not yet enrolled to administer COVID-19 vaccinations which will help provide COVID-19 vaccines for those under the age of 18

Vaccination, masking and testing can aid in safe travel during spring break

- Do **NOT** travel if you are sick or awaiting COVID test results or a close contact recommended to quarantine.
- Remember **masking** is still required on public transportation and indoor transportation hubs (airports, train stations)
- Vaccinate or boost before travel Coronavirus COVID-19 Vaccine (michigan.gov)
- Testing is widely available

13% of MI adults reported having COVID-19 in 2020

Michigan Behavioral Risk Factor Survey: annual, statewide telephone survey of adults 18 years or older; COVID-19 questions asked of 2,155 adults in fall 2020

- 13 percent (11.2-14.9%) of adults reported ever having COVID-19
- Prevalence of COVID-19 was greater among adults 18-44 years (15.9%) and 45-64 years (13.3%) compared to adults >=65 years (6.7%)
- Adults with household income <\$20,000 (20.9%) had higher prevalence compared to other household income groups (10.3% for \$20-74K and 14.0% for \$75+K)
- Prevalence was similar by gender, race/ethnicity, education, health insurance status, and disability status

Limitations: Self-reported data may be subject to recall bias People living in institutions or group homes are not included Cross-sectional data cannot assess causation

See <u>www.Michigan/gov/brfs</u> for more information on this survey and questionnaire

| Questions on 2020 Michiga | n Behavioral Risk Factor Survey | | | |
|---|--|--|--|--|
| August to December 2020 | | | | |
| Did a doctor, nurse, or other you had COVID-19? | Did a doctor, nurse, or other health care provider tell you that you had COVID-19? | | | |
| 1. No, no healthcare provider to | old me that I had COVID-19 | | | |
| 2. No, no healthcare provider told me that I had COVID-19, but I think I had it | | | | |
| 3. Yes, I was told that I had CC it | VID-19, but I did not have a test for | | | |
| 4. Yes, I was told that I had COVID-19 and it was confirmed by a test for it | | | | |
| Has a doctor, nurse, or other that you had … | health professional ever told you | | | |
| – Arthritis | | | | |
| – Cancer | | | | |
| – Cardiovascular disease (C | VD), | | | |
| - Chronic obstructive pulmor | nary disease (COPD) | | | |
| – Current asthma | | | | |
| - Depressive disorder | | | | |
| – Diabetes | | | | |
| – Kidney disease | | | | |

COVID-19 prevalence was higher among adults living with chronic conditions



After accounting for age, gender, race/ethnicity, and household income:

Prevalence of COVID-19 infection was 1.7 times higher among people with 3+ chronic conditions than those without

Depressive disorders, diabetes, COPD, cardiovascular disease, kidney disease and asthma were associated with a significantly greater risk of COVID-19 infection among Michigan adults

Implications:

Individuals at risk of severe disease had higher prevalence of COVID-19 infection

Vaccination, testing and treatments need to be accessible to individuals with these and other conditions

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.

* **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.



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

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

CS329821-B 02/25/2022

Source: CDC COVID-19 Community Levels https://www.cdc.gov/coronavirus/2019-ncov/science/community-levels.html

Administration of vaccinations and boosters has slowed in Recovery phase

- Over 15.3 million COVID-19 vaccine doses have been administered in Michigan
 - Over 6.6 million Michiganders have received at least one dose (66.4%)
 - Over 5.9 million Michiganders have completed a primary series (59.6%)
 - Over 3.15 million additional/booster doses have been administered in Michigan
 - 53.1% of the fully vaccinated population has received a booster
 - 75.5% of the fully vaccinated population 65 years of age or older has received a booster



Initiation and Completion Trends in

https://covid.cdc.gov/covid-data-tracker/#vaccinations https://www.michigan.gov/coronavirus/0,9753,7-406-98178_103214_103272-547150--,00.html

Completed vaccination among Skilled Nursing Residents and Staff is plateauing

86.3% of SNF residents are fully vaccinated; 37 of 53 states/territories

81.6% of SNF staff are fully vaccinated, 42 of 53 states/territories3.5% 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.



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



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

Percentage of Staff in Nursing Homes with Completed Vaccination and Receiving Additional Primary or Booster Dose by Week in Michigan is plateauing



Children can be infected by COVID-19 and some experience severe events

- 482,480 cases among 0-19 year olds in Michigan
- 3,277 children 0-17 years were hospitalized
 - More than 40% of hospitalizations occurred among children with no prior conditions
- 258 children ages 5-18 have had multisystem inflammatory syndrome
 - Majority of these children spent time in intensive care units



Vaccine is effective; less than 50% of eligible children have completed COVID-19 vaccination

80%

Receipt of 2 doses of Pfizer-BioNTech COVID-19 vaccine has been shown to be effective in preventing infection with the SARS-CoV-2 B.1.617.2 (Delta) variant in persons aged ≥12 years. Two doses also reduced the risk of Omicron infection by 31% among children aged 5–11 years and by 59% among persons aged 12–15 years. (Fowlkes et al 2022)

202,325 of 825,545 Michigan children 5-11 years have completed the COVID-19 vaccine series; more than 600,000 children are eligible for vaccination

222,397 of 497,959 children 11-15 years have completed the series; more than 275,000 children eligible

257,339 of 517,739 children 16-19 years have completed the series; more than 260,000 children eligible

Cumulative COVID Vaccine Coverage by Age Group Michigan, Week Ending 3/19/22



Sources: Fowlkes AL, Yoon SK, Lutrick K, et al. Effectiveness of 2-Dose BNT162b2 (Pfizer BioNTech) mRNA Vaccine in Preventing SARS-CoV-2 Infection Among Children Aged 5–11 Years and Adolescents Aged 12–15 Years — PROTECT Cohort, July 2021–February 2022. MMWR Morb Mortal Wkly Rep. ePub: 11 March 2022. DOI: <u>http://dx.doi.org/10.15585/mmwr.mm7111e1</u> https://www.michigan.gov/coronavirus/0,9753,7-406-98178 103214 103272-547150--,00.html

Vaccination uptake among youngest eligible children increased early and since plateaued



Pharmacies, local health, pediatricians and family practice are most frequent COVID-19 vaccinators for children 5 and older



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 with focused effort to reach VFCs not yet enrolled for COVID-19 vaccinations



VFC providers are important access points for children 916 VFC Providers Enrolled to provide COVID-19 vaccine 131 in the City of Detroit and Wayne County



Green sites are those VFC providers who are enrolled to administered COVID-19 vaccine; yellow sites are VFC providers who are not yet enrolled to administer COVID vaccine

COVID Safety Reminders for Spring Break

Travel Considerations:

- Do **NOT** travel if you are sick or awaiting COVID test results or a close contact recommended to quarantine.
- Check your destination's CDC Community Levels (<u>COVID-19 by</u> <u>County | CDC</u>) and travel requirements
- Remember **masking** is still required on public transportation and indoor transportation hubs (airports, train stations)
- Vaccinate or boost before travel <u>Coronavirus COVID-19 Vaccine</u> (michigan.gov)
- Testing is widely available
 - Find a Test Near You Search Results (solvhealth.com)
 - Reorder over-the-counter tests through federal, Mi Backpack, or Rockefeller programs <u>Coronavirus - Test (michigan.gov)</u>
- Discuss these factors and safety plans with travel companions

Returning Considerations:

- Test 3-5 days after returning home
- Avoid contact with elderly or immunocompromised loved ones for 10 days after returning

SAFER TRAVEL CHECKLIST

MAKE SURE YOU ARE FULLY VACCINATED Against Covid-19 Before you travel.



CHECK THE TRAVEL REQUIREMENTS OF THE STATE OR COUNTRY YOU ARE VISITING.



PACK AND WEAR FACEMASKS.



GRAB HAND SANITIZER IN CASE YOU CAN'T Wash hands with soap and water.

Epidemiologic Surveillance: Key Messages

- Nationally case rates continue to decline. However, several European counties are experiencing increasing case rates and COVID hospitalizations.
 - We are closely monitoring epidemiology of the Omicron BA.2 sub-lineage
 - There is an increase in cases and hospital admissions but yet to see increases in lagging indicators (e.g., ICUs and deaths)
- Nationally, the proportion of specimens sequenced as BA.2 has increased while the total specimens sequenced has decreased
- Sixty percent (12/20) of sentinel wastewater surveillance sites are showing declines in COVID-19 in the previous 15-days
- Case rate continue to decline for all reported age groups & race and ethnic groups
- Michigan COVID+ hospital admissions, census, and ICU capacity has declined or remained level for all regions and age groups

Global and National Trends



Globally, 459,638,565 cases and 6,045,441 deaths (Data* through 3/14/2022)

• Several European countries are experiencing case rate increases

United States: Reported cases (7-day average) have decreased over 28.8% since the prior week[¶]

In the U.S., the case rate is 71.9 cases/100,000 in last 7 days (last week: 88.9 cases per/100,000)

All Region 5 (Midwest) states are declining

• Minnesota and Illinois have the highest case rates *in Region 5*

We are Closely Monitoring Epidemiology of the Omicron BA.2 sub-lineage



- Many countries in Europe are experiencing a surge attributed to the BA.2 lineage of Omicron
 - There is an increase in cases and hospital admissions but yet to see increases in lagging indicators (e.g., ICUs and deaths)

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

SARS-CoV-2 Variants Circulating in the United States, Jan 23 – Mar 12 (NOWCAST)

Variants of Concern in Michigan, Mar 14



Data last updated Mar 14, 2022

Source: MDSS

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

each region

| Variant | MI Reported Cases | # of Counties | MDHHS VOC Sequenced Prev. [¶] |
|---------------------|-------------------|---------------|--|
| B.1.617.2 (delta) | 31,009 | 83 | 1% |
| B.1.1.529 (omicron) | 6,952 | 79 | 99% |

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.



| r | Site | Sewershed Population | Consecutive Weeks of Virus Detection | Trend As Of | 15-Day Trend |
|---|--------------------------|-------------------------|--|-------------|--------------|
| | Alma WWTP | 8976 | 30 | 2/28/2022 | + |
| | Battle Creek WWTP | 51093 | 0 | 3/2/2022 | + |
| e | Bay City WWTP | 34000 | 0 | 3/3/2022 | 1 |
| | Delhi Township WWTP | 22500 | 21 | 2/24/2022 | + |
| | Escanaba WWTP | 12600 | 27 | 3/2/2022 | 1 |
| | GLWA Detroit River Inter | rce 492000 | 71 | 2/23/2022 | → |
| | GLWA North Interceptor- | - 1482000 | 48 | 2/23/2022 | |
| 2 | GLWA Oakwood- | 840600 | 72 | 2/23/2022 | → |
|) | Grand Rapids WWTP | 265000 | 30 | 3/3/2022 | → |
| | Holland WWTP North | 45606 | 1 | 3/2/2022 | + |
| | Holland WWTP South | 36912 | 0 | 3/2/2022 | + |
| | Jackson WWTP | 90000 | 32 | 2/28/2022 | + |
| | Kalamazoo WWTP | 150000 | 1 | 3/2/2022 | 1 |
| | Petoskey WWTP | 7900 | 1 | 3/3/2022 | + |
| | Portage Lake WWTP | 14000 | 25 | 3/2/2022 | + |
| | Saginaw Township WWT | P 40000 | 29 | 3/3/2022 | + |
| | Tecumseh WWTP | 8680 | 8 | 2/27/2022 | + |
| | Traverse City WWTP | 45000 | 30 | 3/3/2022 | + |
| | Warren WWTP | 135000 | 25 | 2/24/2022 | → |
| | Ypsilanti WWTP | 330000 | 0 | 2/26/2022 | + |
| | | | | | |

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 3/9/2022. 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 15days
 - 15% (3/20) of sentinel sites are showing increasing trends over last 15days

Case rate continue to decline for all age groups & race and ethnic groups

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



- Case rates by onset date for all age groups are between 51.8 and 83.8 cases per million (through 3/7)
- Case counts and case rates are highest for 30-39-year-olds this week, followed by 80+, and 40-49-year-olds

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



Note: Case information sourced from MDHHS and reflects date of onset of symptoms Source: MDHHS – Michigan Disease Surveillance System

Case rates continue to decline in the school-aged population statewide

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



Sources: MDSS case data as of 3/14/2022 (data through 3/3/22), line charts use statewide age group population, map uses ISD enrolled populations from EOG mask tracker data.

Cases continue to decline in staff and residents in Long Term Care Facilities



- Case counts in residents decreased again for AFC/HFA (20) but increased for SNFs (67)
- Case counts in staff continues to decrease in both AFC/HFA (36) and SNF (84)
- As has been the case throughout the Delta and Omicron surges, the number of cases among staff continues to exceed the number of cases among residents

Abbreviations: AFC: Adult Foster Care; HFAs: Homes for the Aged; and SNF: Skilled Nursing Facilities

Hospital admissions due to COVID-19 continue to decline



- Trends for daily average hospital admissions declined (-21%) since last week (vs. -14% prior week)
- All age groups saw declines this week
- Between 14 and 23 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





Statewide Hospitalization Trends: Regional COVID+ Census



This week hospitalizations have decreased or remained flat in all regions.

All regions have fewer than 90/Million population hospitalized with COVID.

| Region | COVID+ Hospitalizations (% Δ from last week) | COVID+ Hospitalizations / MM |
|-----------|---|------------------------------------|
| Region 1 | 62 (-9%) | 57/M |
| Region 2N | 105 (-15%) | 47/M |
| Region 2S | 199 (-19%) | 89/M |
| Region 3 | 54 (-34%) | 48/M |
| Region 5 | 61 (-23%) | 64/M |
| Region 6 | 108 (-25%) | 74/M |
| Region 7 | 38 (-21%) | 76/M |
| Region 8 | 14 (0%) | 45/M |

Statewide Hospitalization Trends: ICU COVID+ Census

Hospitalization Trends 3/1/2021 – 3/14/2022 Confirmed Positive in ICUs



Overall, the volume of COVID+ patients in ICUs has decreased by 25% from last week (previous week was down by 22%). All regions show decreasing trends in ICU census except Region 8, which has increased by 2 patients overall.

All regions have 11% or fewer of ICU beds filled with COVID+ patients.

| Region | Adult COVID+ in ICU (% ∆ from last week) | ICU Occupancy | % of ICU beds COVID+ |
|-----------|--|------------------|-------------------------|
| Region 1 | 11 (-21%) | 70% | 6% |
| Region 2N | 13 (-38%) | 65% | 2% |
| Region 2S | 51 (-20%) | 74% | 7% |
| Region 3 | 14 (-30%) | 87% | 5% |
| Region 5 | 8 (-27%) | 64% | 5% |
| Region 6 | 20 (-33%) | 71% | 8% |
| Region 7 | 14 (-18%) | 71% | 11% |
| Region 8 | 3 (200%) | 58% | 5% |



Statewide Hospitalization Trends: Pediatric COVID+ Census





Vaccines

Protect against severe outcomes

Vaccines are available for ages 5 and up. Boosters are available for ages 12 and up.

Masks, Distancing & Ventilation

Prevent spread

People with symptoms, a positive test, or exposure to someone with COVID-19 should wear a mask. Masking may also be based on personal preference, and informed by personal level of risk.



Tests

Prevent spread

Over-the-counter tests allow for testing at home; an important addition to on-site antigen and PCR testing.

Treatment

Protect against severe outcomes

Oral antivirals and monoclonal antibodies can reduce the risk of hospitalization and death from COVID-19.

APPENDIX

CDC COVID-19 Community Levels are defined by County Case Rates and Health Service Area (HSA) Hospitalizations

Health Service Areas



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

• Notes

Source: CDC COVID-19 Community Levels https://www.cdc.gov/coronavirus/2019-ncov/science/community-levels.html

Recent statewide trends



MERC Regional breakdown: Positivity, cases, hospitalization



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 51.8 and 83.8 cases per million (through 3/7/22)
- Case counts and case rates are highest for 30-39-year-olds this week, followed by 80+, and 40-49

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 ethnicity category



Updates since last week:

- Cases per million are decreasing for all reported racial and ethnic groups
- In the past 30 days, 22% (↓1%) of race data and 28% (↓2%) 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



Average and total new deaths, by age group

- Through 3/7, the 7-day avg. death rate is more than 17 daily deaths per million people for those over the age of 80
- In the past 30 days, there were between 1 and 5 deaths among confirmed and probable COVID-19 cases under the age of 20
- 30-day proportion of deaths among those under 60 years of age is 13.8%

Vital Infrastructure: K-12 school clusters and outbreaks, week ending March 10

Number of reported outbreaks/clusters decreased since last week (185 to 172), with the only new reported outbreaks in Pre-K-Elementary School and decreases in the number of ongoing outbreaks in all Grade Levels.

| Region | ١ | Number of reported | cases, # | # Ongoing - Excluding New 🚺 # New | outbreaks | per outbreak |
|----------------------|-----|--------------------|----------|-----------------------------------|---------------------|-----------------------------|
| Region 1 | | 913 5 | | | 42 | 3-85 |
| Region 2n | 19 | 0 | | | 5 | 3-8 |
| Region 2s | 80 | 22 | | | 20 | 3-13 |
| Region 3 | | | 2,444 0 | | 58 | 3-153 |
| Region 5 | 10 | 4 | | | 3 | 3-7 |
| Region 6 | | 808 0 | | | 33 | 3-145 |
| Region 7 | | 348 0 | | | 9 | 3-119 |
| Region 8 | 34 | 0 | | | 2 | 15-19 |
| Total | | | 4,656 | 31 | 172 | 3-153 |
| Grade level | ٦ | Number of reported | cases, # | # Ongoing - Excluding New 📃 # New | Number of outbreaks | Range of cases per outbreak |
| Pre-school - elem. | | 1,585 | 28 | | 94 | 3-82 |
| Jr. high/middle scho | ool | 1,054 3 | | | 29 | 3-95 |
| High school | | 2,017 | 0 | | 49 | 3-153 |
| Administrative | (| 0 | | | 0 | N/A |
| Total | | | 4,656 | 31 | 172 | 3-153 |

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 <u>CSTE school cluster and outbreak definition</u> which impacts how transmissions within school-sponsored settings are reported to the health department Source: LHD Weekly Sitreps

<u>Michigan</u> 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 | AND | 88.5 X |
|---------------------------------------|-----|-----------------------------|
| Risk of Testing Positive for COVID-19 | | Risk of Dying from COVID-19 |
| | | |

47

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 | Percent of Hospitalizations In People | Percent of Deaths In People Not | | | |
| Fully Vaccinated | Not Fully Vaccinated | Fully Vaccinated | | | |
| (1,202,306 / 1,628,439) | (26,924 / 32,323) | (14,133 / 17,573) | | | |
| 73.8% | 83.3% | 80.4% | | | |
| 1,202,306 | 26,924 | 14,133 | | | |
| Total Cases Not Fully Vaccinated | Total Hospitalized Not Fully Vaccinated | Total Deaths Not Fully Vaccinated | | | |
| Total Breakthrough Cases 426,133 | Total Breakthrough Hospitalizations 5,399 | Total Breakthrough Deaths 3,440 | | | |
| 7.71% | 0.098% | 0.062% | | | |
| Percent of Fully Vaccinated People who | Percent of Fully Vaccinated People Who Were | Percent of Fully Vaccinated People Who Died of | | | |
| Developed COVID-19 (389,840 / 5,529,781) | Hospitalized for COVID-19 (5,399 / 5,529,781) | COVID-19 (3,440 / 5,529,781) | | | |
| 26.2% | 16.7% | 19.6% | | | |
| Percent of Cases Who Were Fully Vaccinated | Percent of Hospitalizations Who Were Fully | Percent of Deaths Who Were Fully Vaccinated | | | |
| (426,133 / 1,628,439) | Vaccinated (5,399 / 32,323) | (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 COVID19 (the same as breakthrough COVID-19).

- Individuals who get hospitalization will lag after infection and may occur after case investigation.

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 (10.5 deaths/million)

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