MI COVID RESPONSE DATA AND MODELING UPDATE

October 4, 2022

Epidemiologic Surveillance: Key Messages

COVID-19 pandemic is plateauing in some parts of the globe; decreases are seen in parts of the United States

- However, case rates Europe continue to increase
- Within the U.S., case rates decreased 13.1% over the past week
- Midwestern states (region 5) are showing signs of declines or plateaus

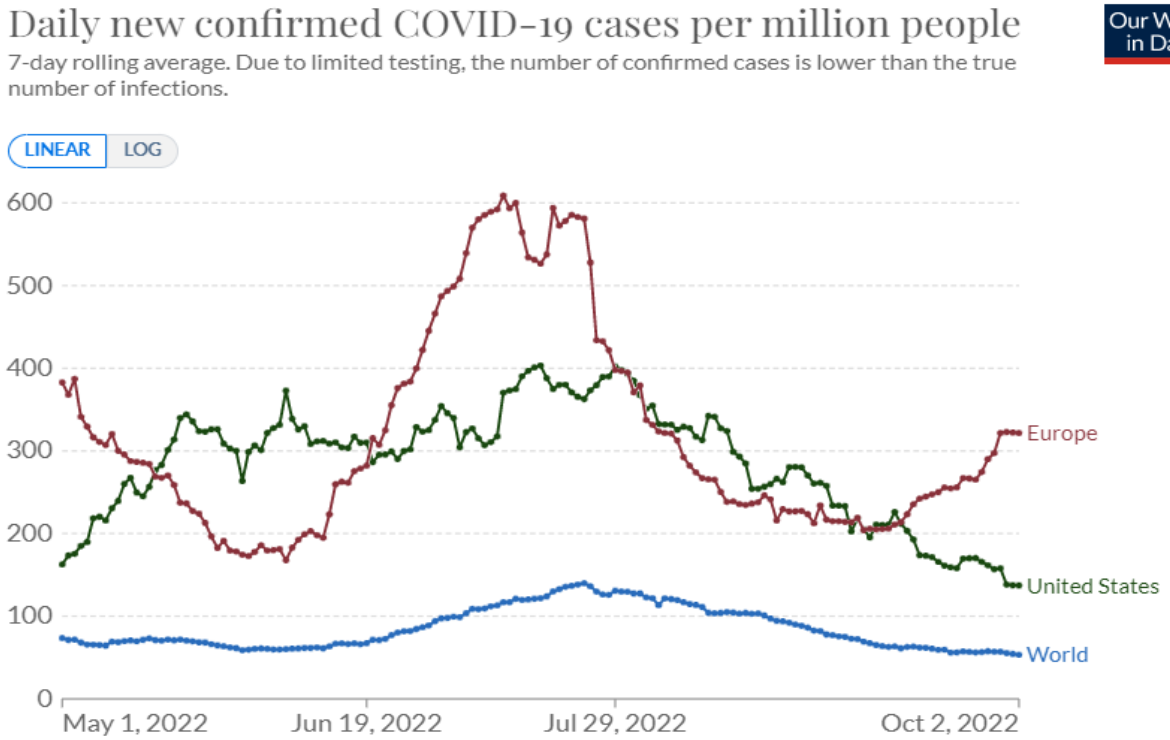
COVID spread in Michigan is plateaued with early signs of slow decline

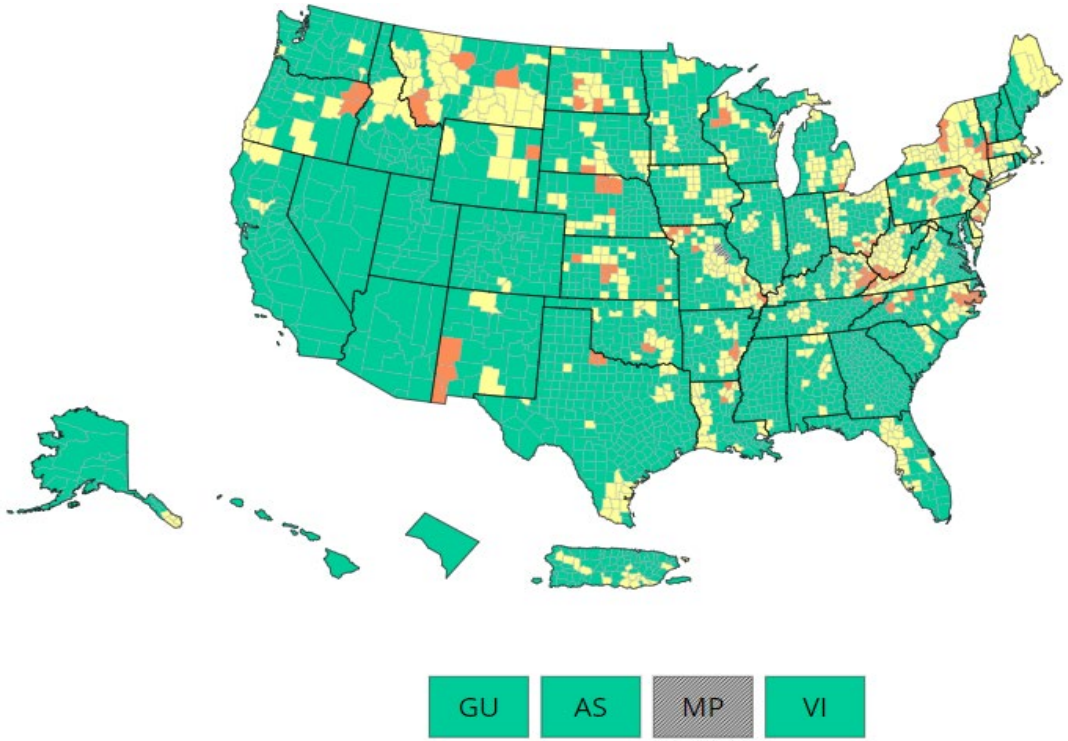
- COVID spread is assessed from many different markers including CDC community levels and other surveillance systems
- As of September 29, 31% of Michigan counties are at medium or high COVID-19 community levels
  - 1 Michigan county is classified as High this week according to CDC's Community Levels (1%). This represents 2% of the population.
  - 25 Michigan counties are currently at Medium level (30%). This represents 68% of the population.
- The R_t for Michigan is around 1 indicating COVID is plateaued
- The proportion of specimens sequenced and identified as BA.5 in the U.S. and Michigan continues to remain the most dominant
- 45% of SWEEP wastewater sites saw a decrease in the most recent week; 40% of SWEEP sites saw increases

COVID-19 hospital metrics in Michigan remain lower than past surges

- COVID-19 hospital admissions, hospital census, and ICU census, however, showed moderate increases this week

Global and National Trends





Globally, 618,169,169 cases and 6,547,254 deaths (Data* through 10/3/2022)

- Case rates for some countries in Europe are continuing to increase

United States: Reported cases (7-day average) have decreased 13.1% since the prior week¶

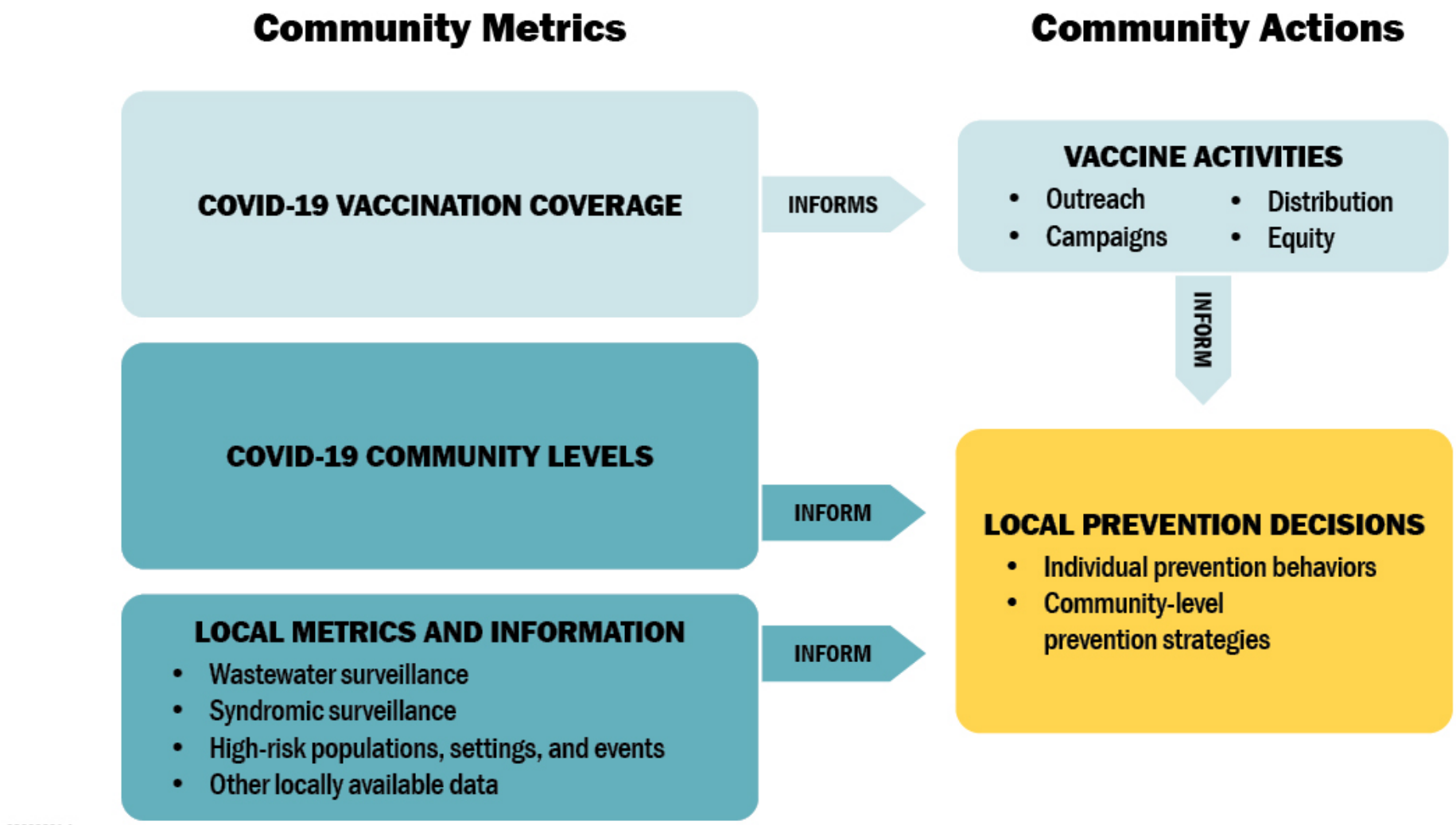
- In the U.S., the case rate is 96.4 cases/100,000 in last 7 days (last week: 112.5 cases per/100,000)

Region 5 (Midwest) states are declining or plateaued

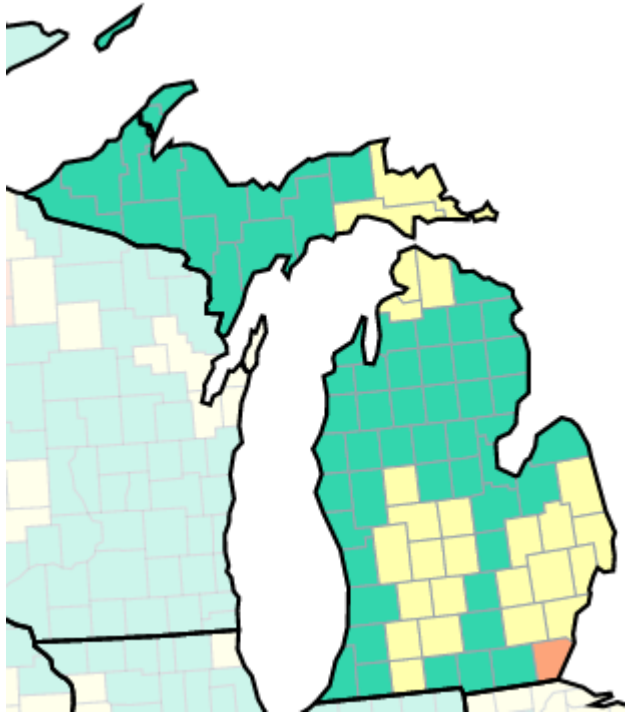
- Indiana and Illinois have the lowest case rates *in Region 5* (9/29/2022)

Source: * Johns Hopkins Coronavirus Resource Center; ¶ CDC COVID Data Tracker Weekly Review; † CDC COVID Data Tracker – CDC recently updated their methodology for reporting case rates

Local Prevention Decisions Should Use Community Levels in Concert with Other Pandemic Indicators



As of Sep 29, 1 Michigan County is at High COVID-19 Community Level



- In the US, 3% of counties have high risk for medically significant disease and healthcare strain
- In Michigan, 1% (1/83) of counties are at high risk. This represents 2% of the population
- 25 Michigan counties are currently at Medium level (30%). This represents 68% of the population
- 57 Michigan counties are currently at Low level (69%). This represents 30% of the population

Percent of Counties

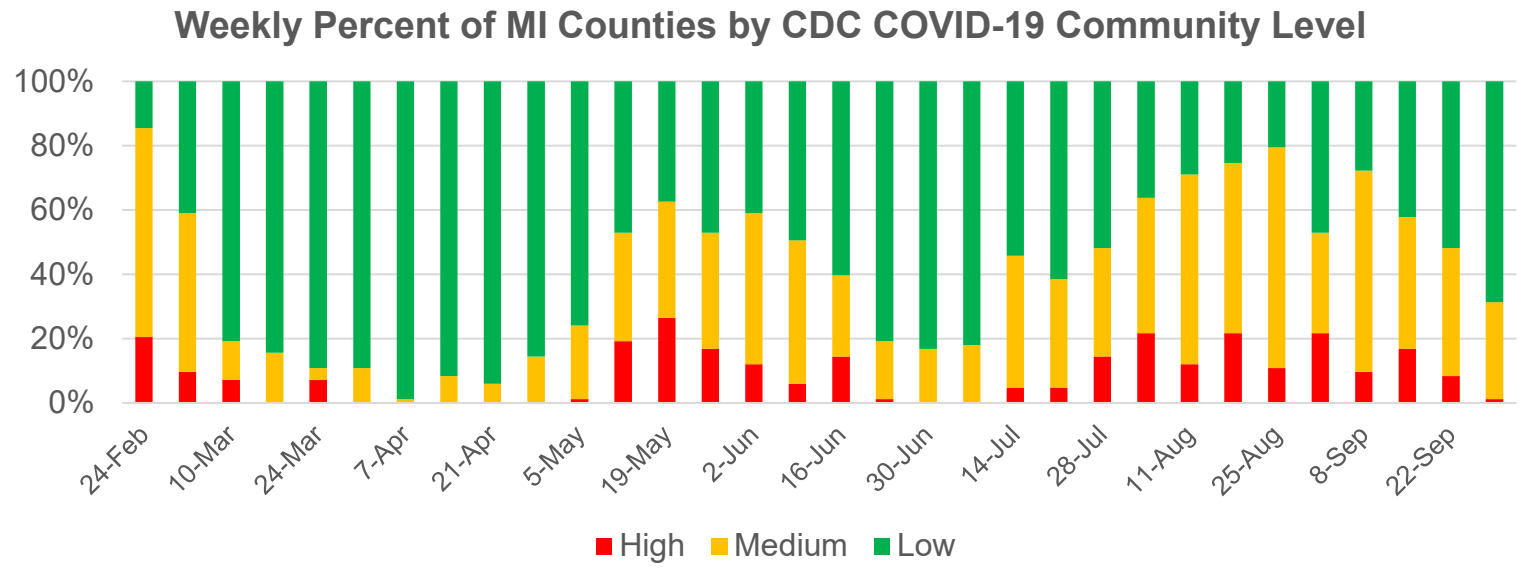
	United States	Michigan	Percent of MI Population
Low	74%	69%	30%
Medium	23%	30%	68%
High	3%	1%	2%

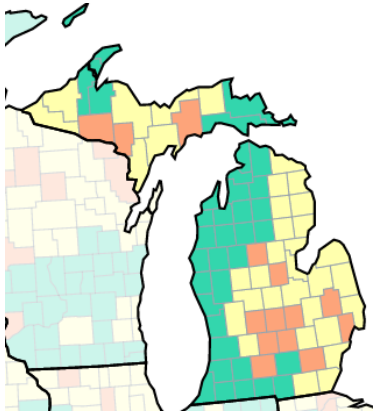
Low	Medium	High
• Stay up to date with COVID-19 vaccines • Get tested if you have symptoms	• If you are at high risk for severe illness, talk to your healthcare provider about whether you need to wear a mask and take other precautions • Stay up to date with COVID-19 vaccines • Get tested if you have symptoms	• Wear a mask indoors in public • Stay up to date with COVID-19 vaccines • Get tested if you have symptoms • Additional precautions may be needed for people at high risk for severe illness

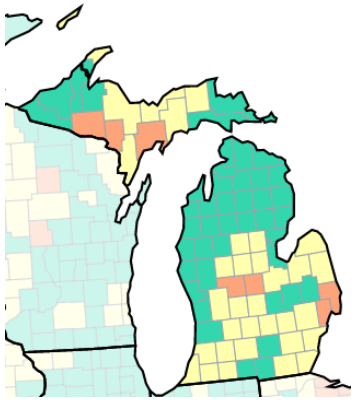
Source: CDC COVID-19 Community Levels https://covid.cdc.gov/covid-data-tracker/#county-view?list_select_state=all_states&list_select_county=all_counties&data-type=CommunityLevels

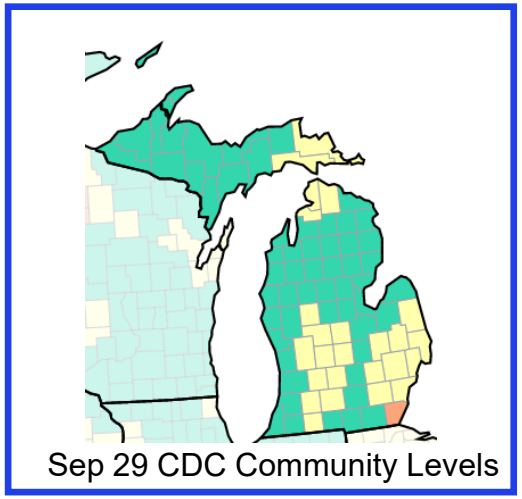
Michigan Trends of COVID-19 Community Levels

- As of September 29, 1 (1%) Michigan county is at high COVID-19 community level and another 25 Michigan counties are currently at Medium level (30%)
- The proportion of Michigan counties at medium and high is lower than last week
- Current number of counties at high and medium are the lowest since July 7




Sep 15 CDC Community Levels


Sep 22 CDC Community Levels


Sep 29 CDC Community Levels

This metric uses three indicators for categorization: (1) new COVID-19 cases per 100,000 population in the last 7 days lagged 1 day behind the date the COVID-19 Community Level is calculated; (2) new COVID-19 hospital admissions per 100,000 population in the last 7 days; and (3) percent of staffed inpatient beds occupied by patients with confirmed COVID-19 (7-day average) lagged 1 day behind the 7-day case rate .

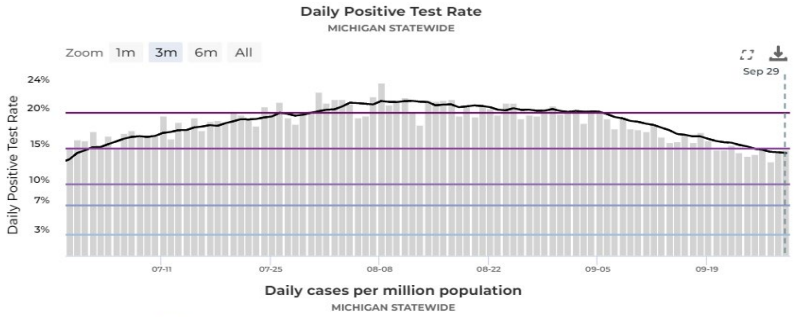
Source: CDC COVID-19 Community Levels https://covid.cdc.gov/covid-data-tracker/#county-view?list_select_state=all_states&list_select_county=all_counties&data-type=CommunityLevels

Recent statewide trends are plateaued with early signs of slow decline

Statewide trends

7-day average Daily values

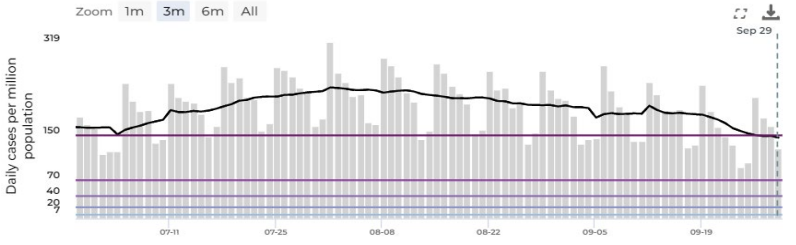
Positivity, %



Current: 14.4%

Last Week: 15.0%

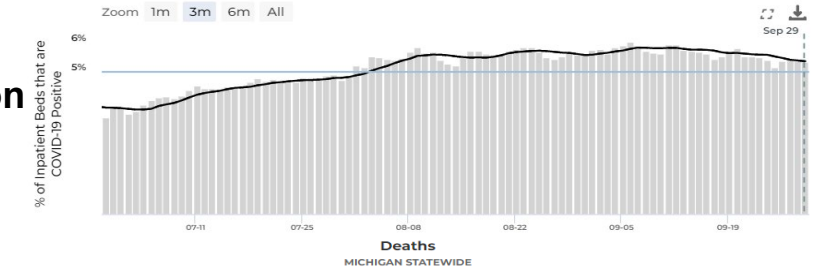
Daily cases per million



Current: 163.6

Last Week: 183.9

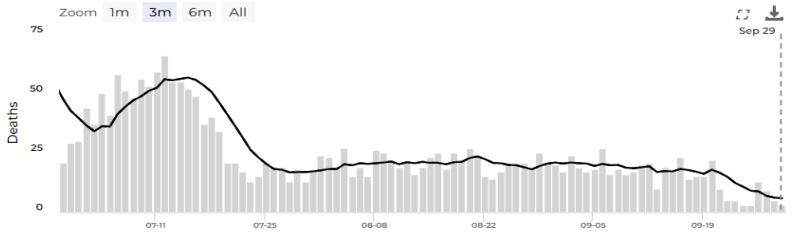
Daily hospitalization rate, %



Current: 5.3%

Last Week: 5.6%

Deaths

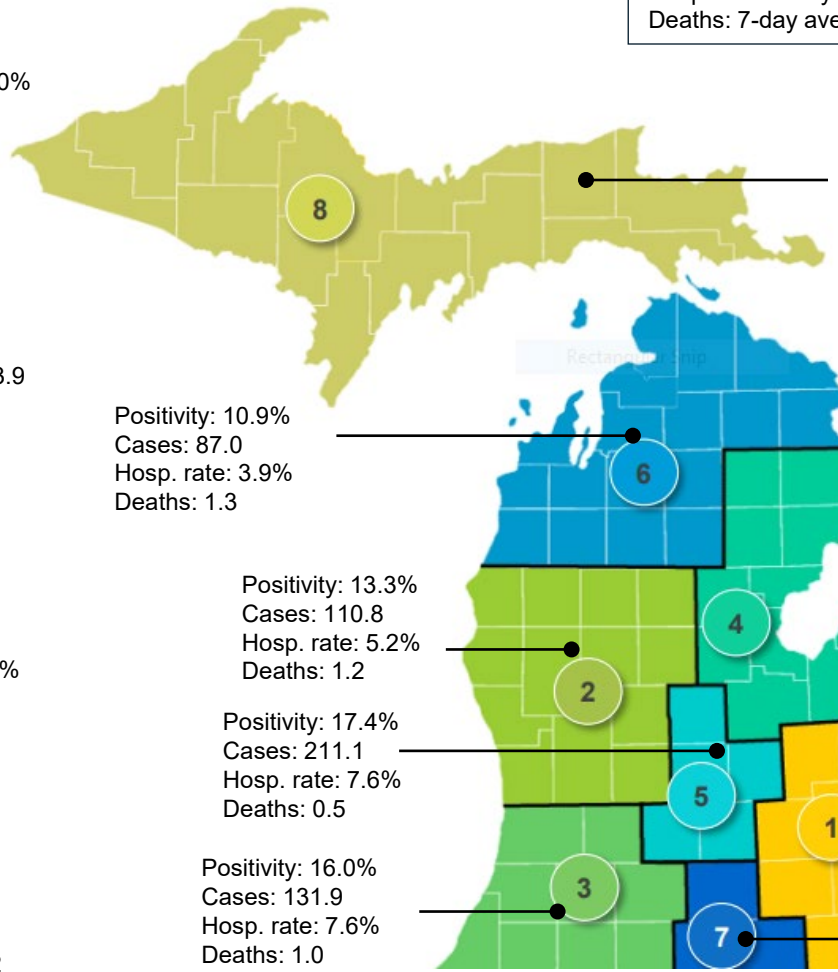


Current: 1.2

Last Week: 1.2

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



Positivity: 9.2%
Cases: 131.7
Hosp. rate: 3.1%
Deaths 0.9

Positivity: 10.9%
Cases: 87.0
Hosp. rate: 3.9%
Deaths: 1.3

Positivity: 13.3%
Cases: 110.8
Hosp. rate: 5.2%
Deaths: 1.2

Positivity: 13.2%
Cases: 123.4
Hosp. rate: 4.5%
Deaths: 1.4

Positivity: 17.4%
Cases: 211.1
Hosp. rate: 7.6%
Deaths: 0.5

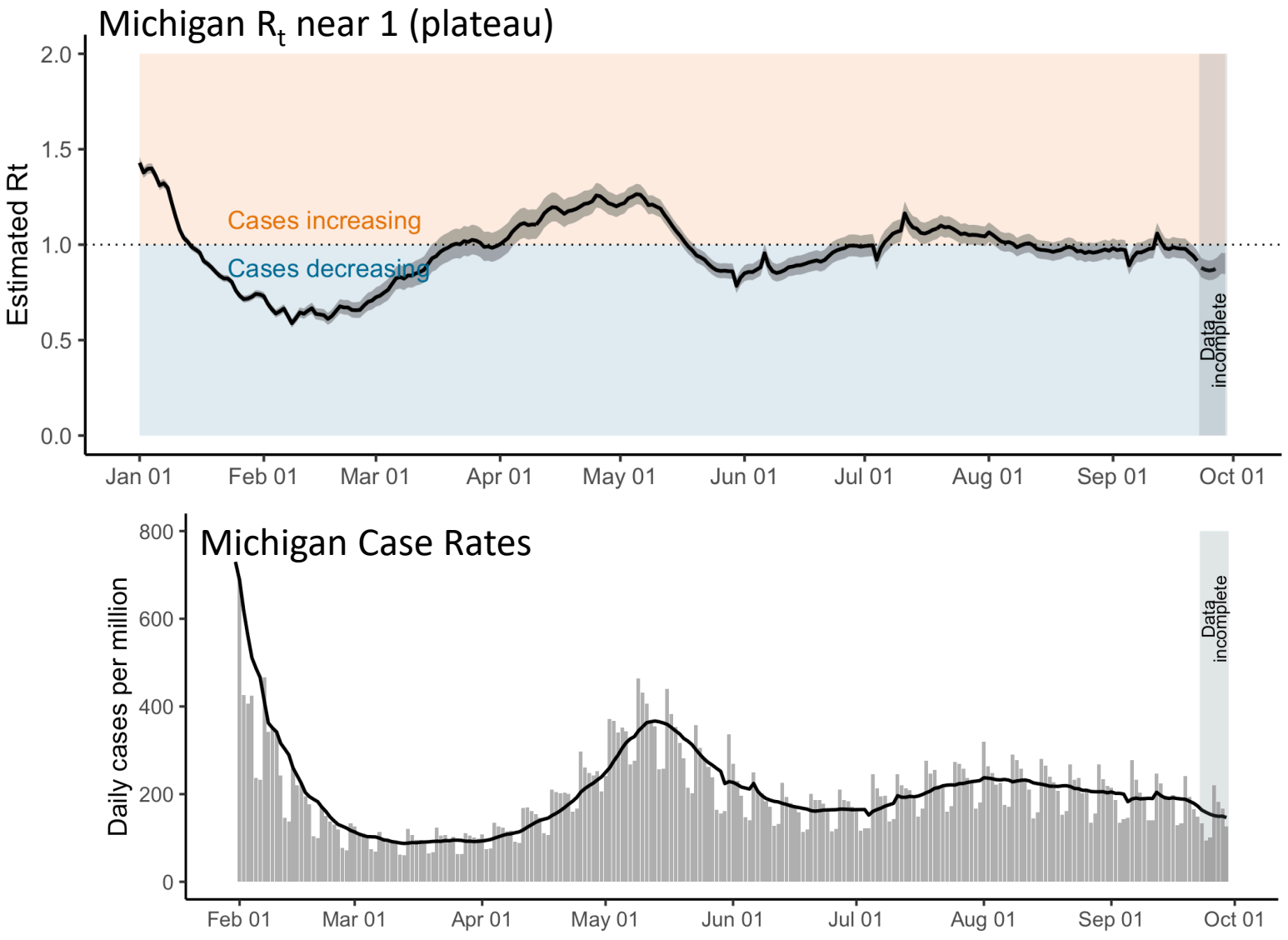
Positivity: 15.0%
Cases: 193.3
Hosp. rate: 5.2%
Deaths: 1.4

Positivity: 16.0%
Cases: 131.9
Hosp. rate: 7.6%
Deaths: 1.0

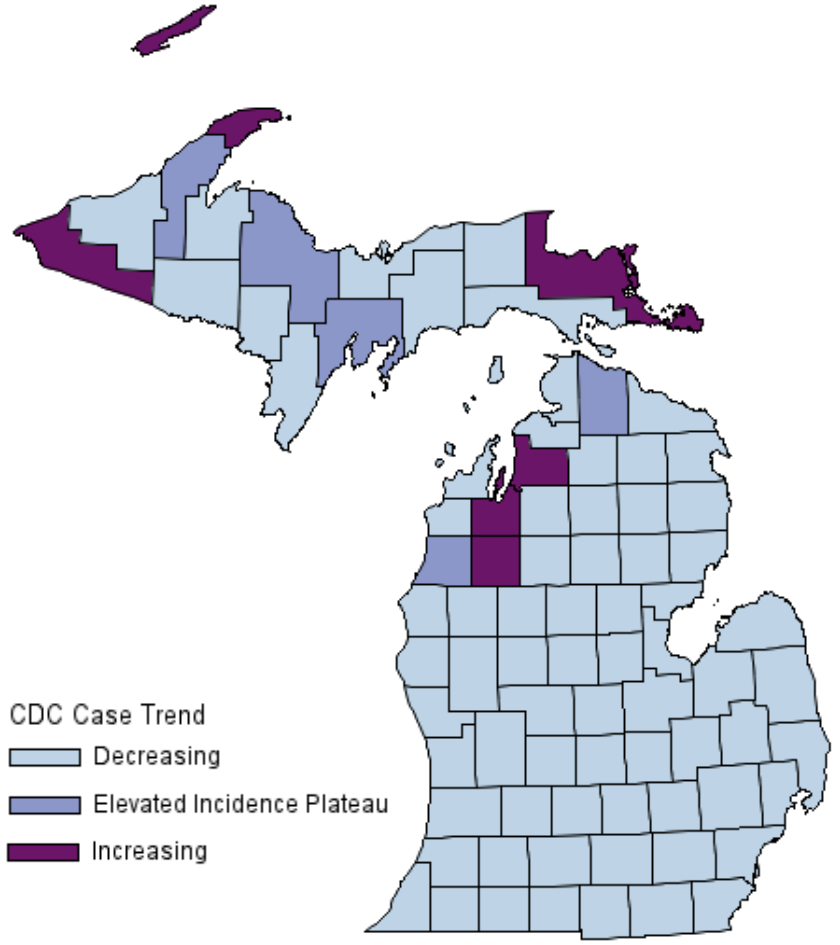
Positivity: 11.6%
Cases: 144.6
Hosp. rate: 6.2%
Deaths: 0.5

Source: https://mistartmap.info/

Cases are plateaued in Michigan with early signs of slow decline



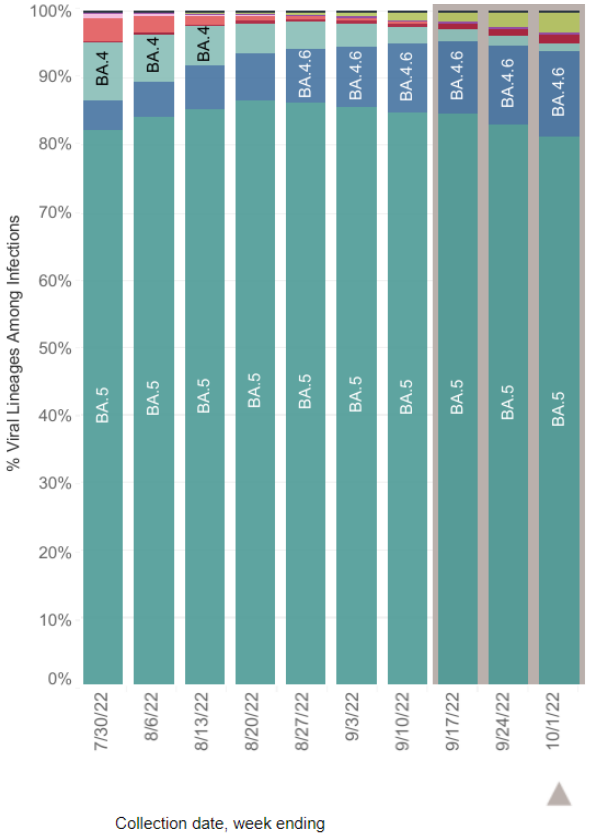
6 counties currently showing increases and 5 in elevated incidence plateaus (via mistartmap.info as of 9/30/22, data through 9/22/22).



Sources: MDSS cases plotted by onset date as of 9/30/22.

Identified COVID-19 Cases Caused by Variants of Concern (VOC) in US and Michigan: Predominately BA.5 and BA.4 lineages

SARS-CoV-2 Variants Circulating in the United States, Jul 24– Oct 1 (NOWCAST)

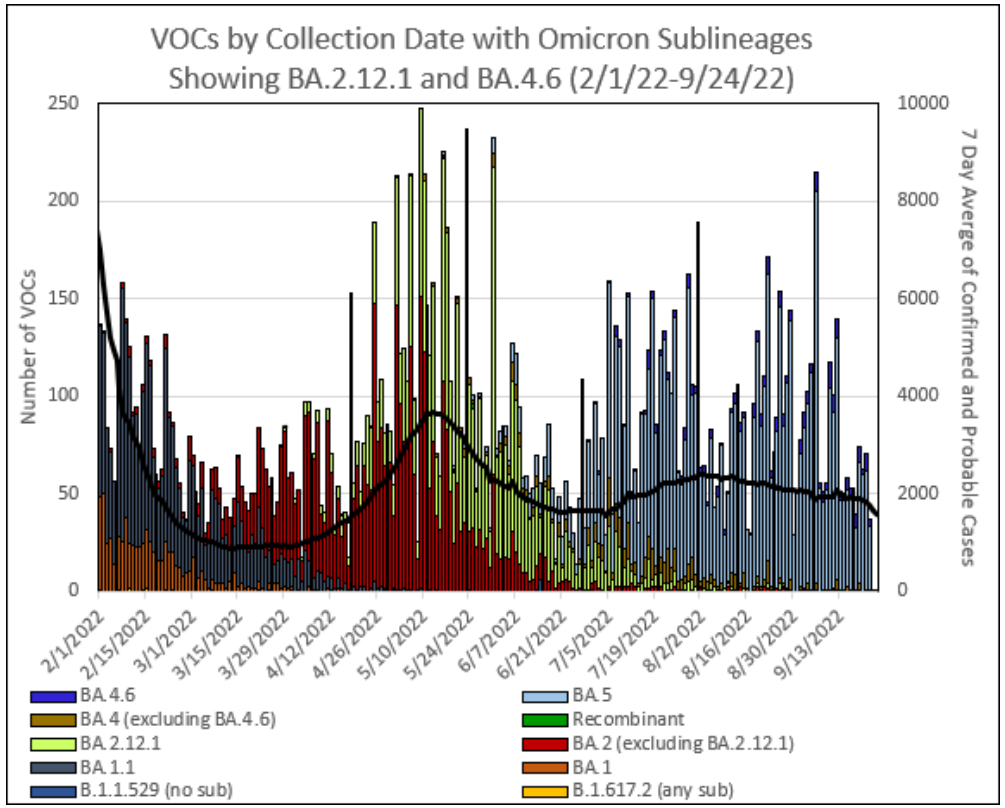


USA

WHO label	Lineage #	US Class	%Total	95%PI
Omicron	BA.5	VOC	81.3%	79.6-83.0%
	BA.4.6	VOC	12.8%	11.5-14.1%
	BF.7	VOC	3.4%	2.6-4.4%
	BA.2.75	VOC	1.4%	1.1-1.9%
	BA.4	VOC	1.1%	1.0-1.2%
	BA.2.12.1	VOC	0.0%	0.0-0.0%
	BA.2	VOC	0.0%	0.0-0.0%
	B.1.1.529	VOC	0.0%	0.0-0.0%
	BA.1.1	VOC	0.0%	0.0-0.0%
Delta	B.1.617.2	VBM	0.0%	0.0-0.0%
Other	Other*		0.0%	0.0-0.0%

* 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, BA.3 and their sublineages (except BA.1.1 and its sublineages) are aggregated with B.1.1.529. Except BA.2.12.1, BA.2.75 and their sublineages, BA.2 sublineages are aggregated with BA.2. Except BA.4.6, sublineages of BA.4 are aggregated to BA.4. Except BF.7, sublineages of BA.5 are aggregated to BA.5. Sublineages of BA.1.1 and BA.2.75 are aggregated to the parental BA.1.1 and BA.2.75 respectively. Previously, BA.2.75 was aggregated with BA.2, and BF.7 was aggregated with BA.5. Lineages BA.4.6, BF.7, and many BA.2.75 contain the spike substitution R346T.

VOC Distribution in Michigan

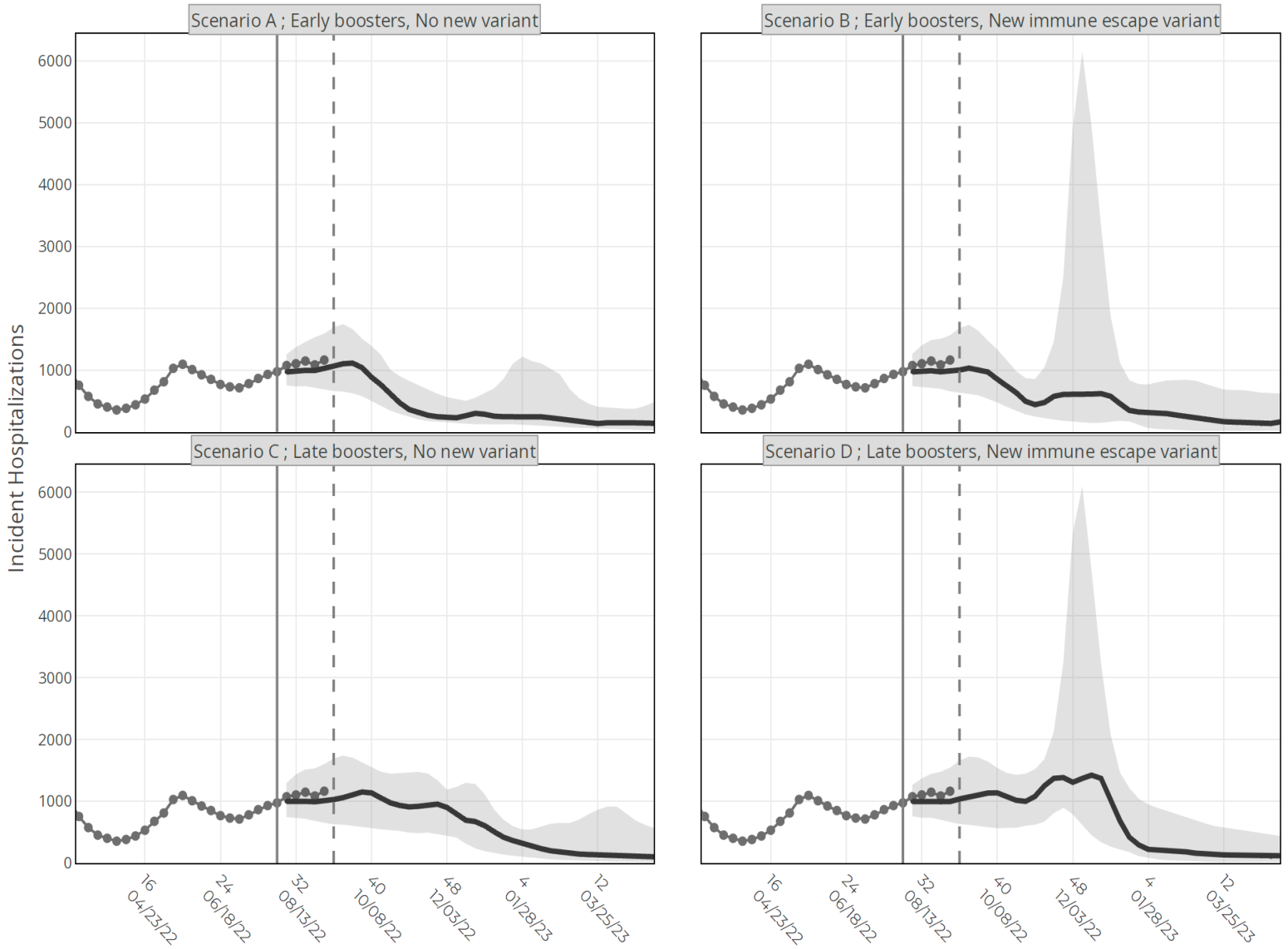


- Since September 1, there have 1,704 VOC specimens sequenced
- 100% of specimens sequenced are Omicron, 90% of those are BA.5 lineage
  - Since September 1, only 9% of specimens sequenced and reported (n=161) have been identified as BA.4; however, 82% of those specimens are BA.4.6 (n=132)

Data last updated Oct 4, 2022
Source: CDC COVID Data Tracker: Genomic Surveillance and Michigan's MDSS; sequence data may take up to four weeks to process and get reported back to health departments

Scenario Hub projections suggest plateau/smaller fall surge + potential winter surge

- Explored scenarios with early/late boosters and potential new variant
- Fall: smaller surge or plateau
- Winter
  - If no new immune escape variant, suggests plateau through winter (left two plots)
  - If new variant, potential for larger winter surge (right two plots)
- Similar patterns for cases and deaths (see link below)

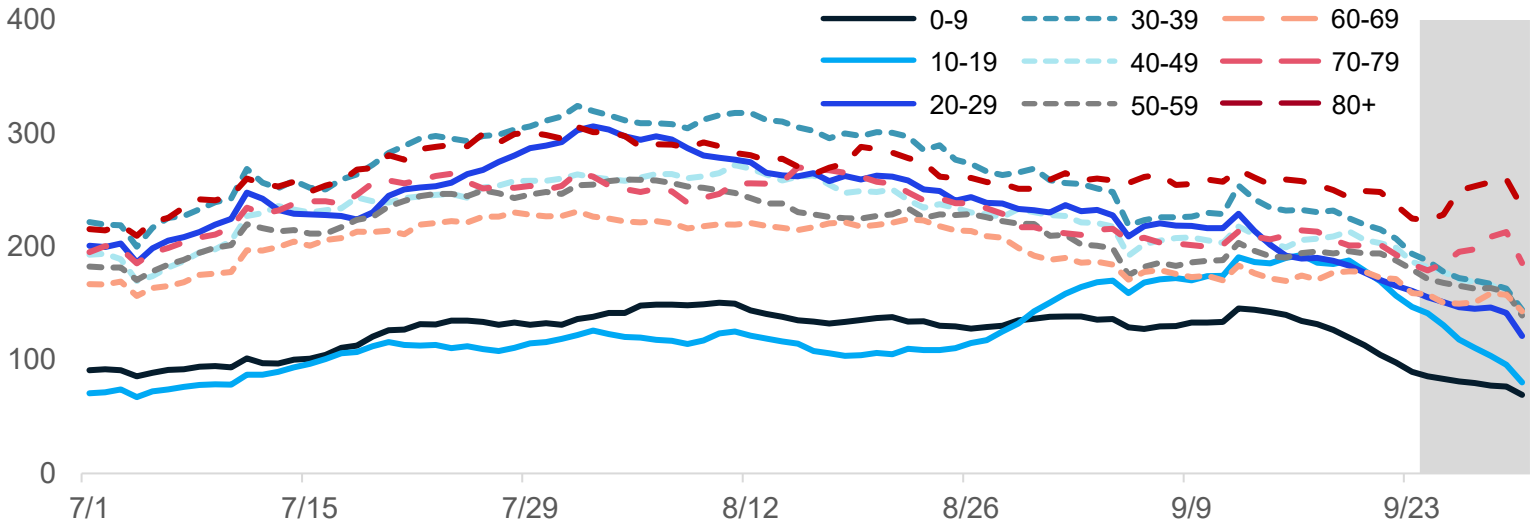


Plotted with 50% uncertainty interval

Source: [Round 15 Scenario Modeling Hub Projections]

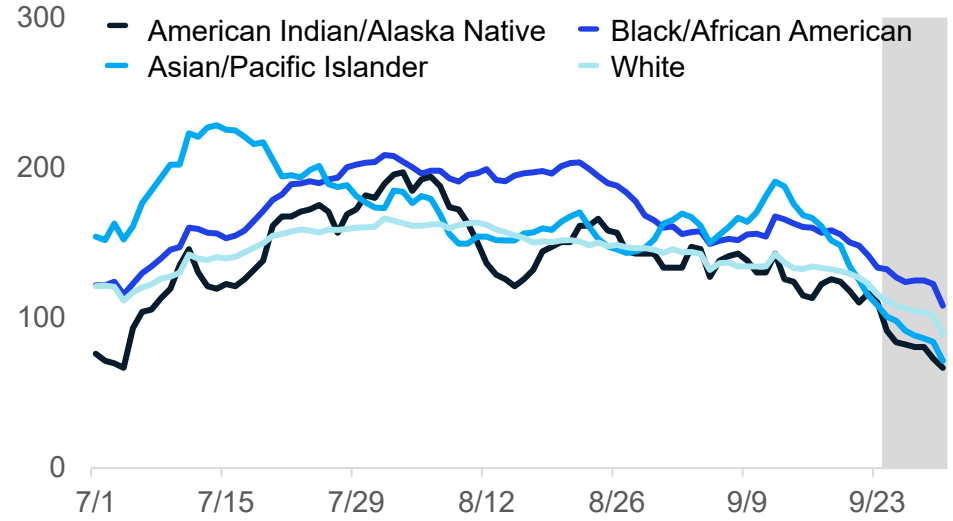
Case rates by age, race, and ethnicity

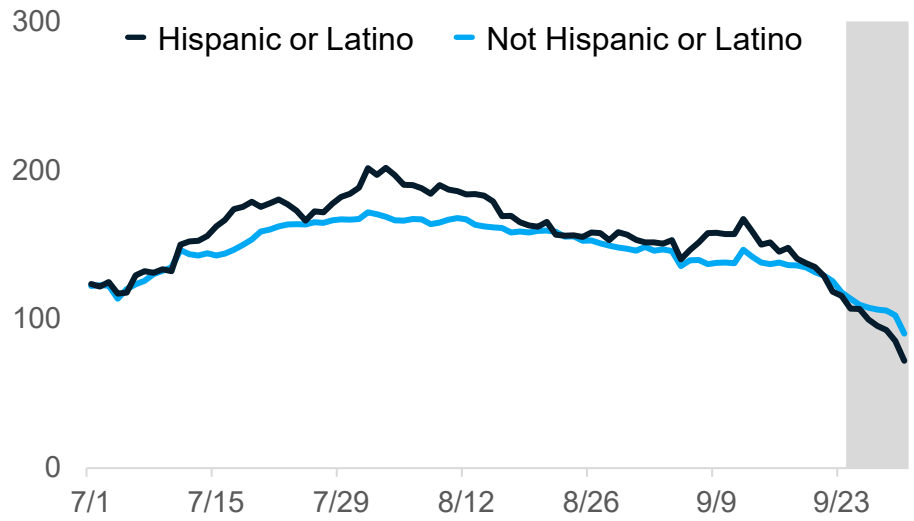
Daily new confirmed and probable cases per million by age group (7-day rolling average)



- Case rates by onset date for all age groups are between 89.6 and 224.9 cases per million (through 9/23)
- Case counts and case rates are highest for 80+-year-olds this week, followed by 30-39-year-olds and the 40-49-year-old age groups

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





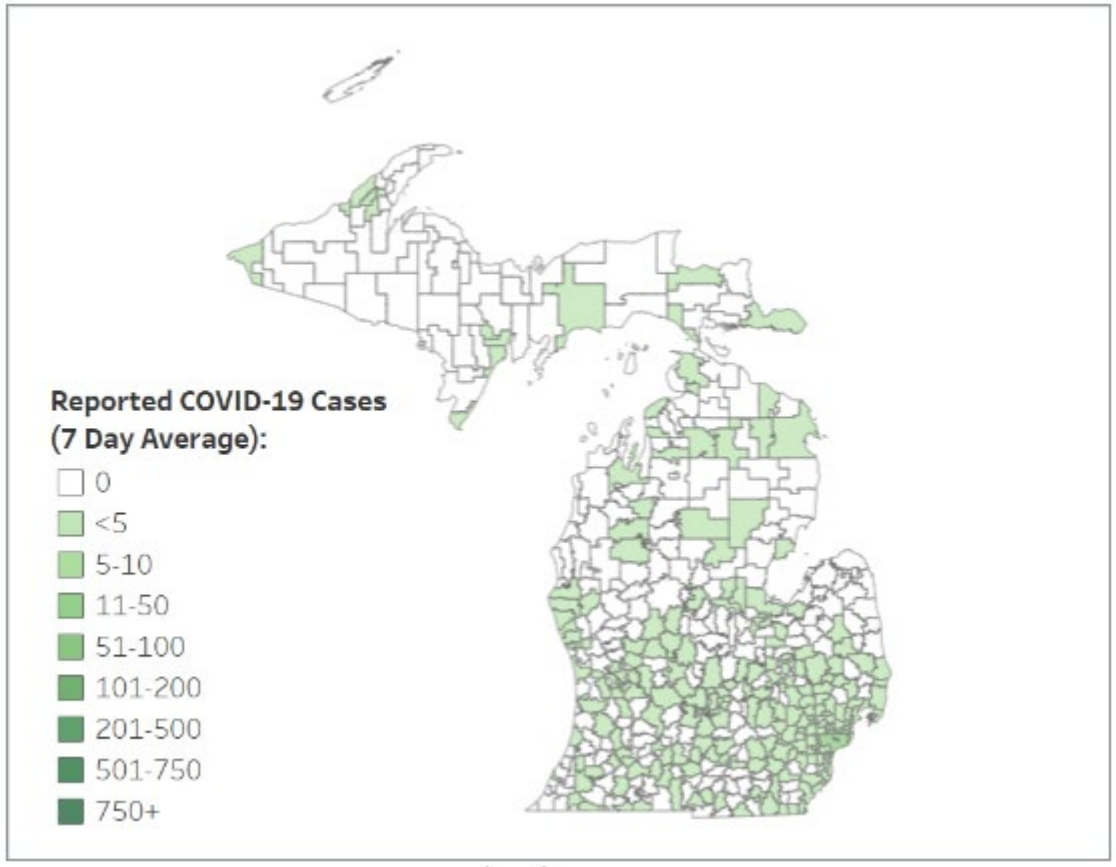
- Case rates are highest for Black populations (133.4 cases/million)
- Between 23-28% of cases in last 30 days have missing race/ethnicity data

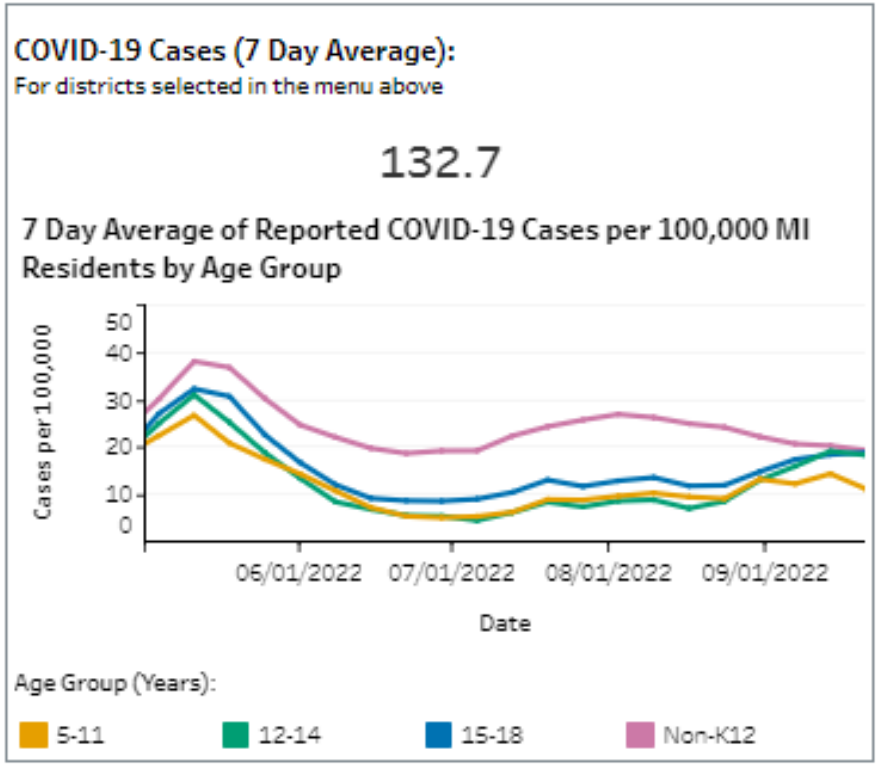
Note: Case information sourced from MDHHS and reflects date of onset of symptoms
Source: MDHHS – Michigan Disease Surveillance System

COVID case rates among K-12 population

K-12 age population summary:

- Overall case counts among school-aged populations are plateauing (7-day average 132.7)
- 48% (↓12%) of school district areas have between 1-10 cases.
- 3 ISD areas have greater than 5 cases.



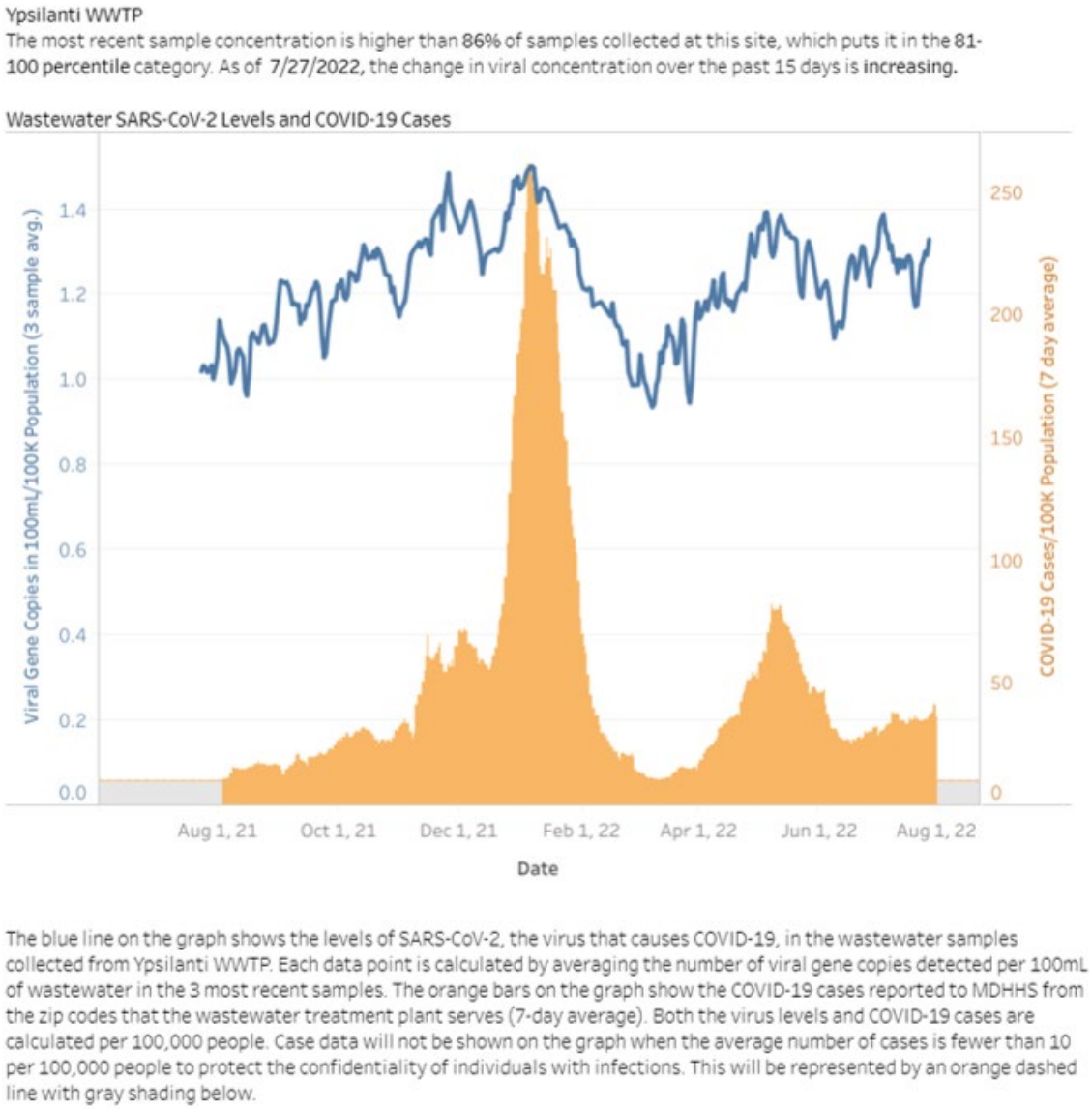


Interactive dashboard and data download can be found at: https://www.michigan.gov/coronavirus/stats/k-to-12-aged-isd-reporting

Interpreting Wastewater Should Be In Context with Other Indicators

- When levels of virus in wastewater are low, a modest increase overall in virus level can appear much larger as numbers are translated into percentages
  - This does not necessarily mean we will see major increases in transmission in the community

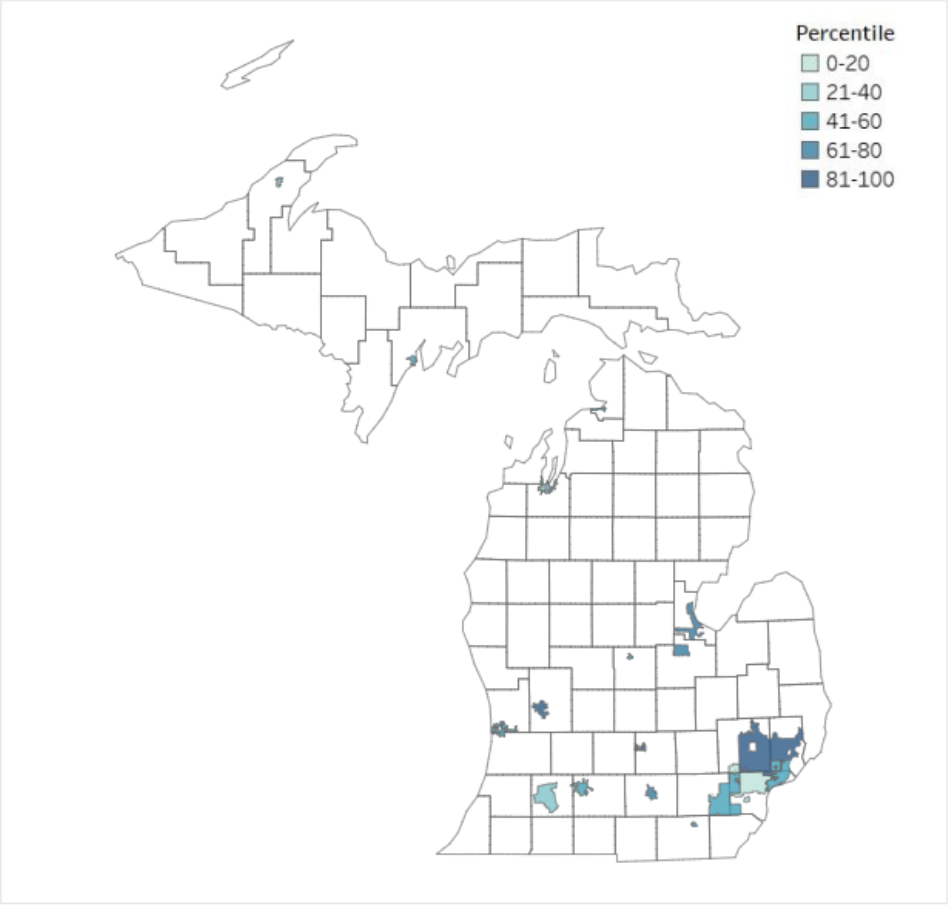
- When increases are seen within one wastewater site, public health officials compare with neighboring communities and other data sources to understand potential of surges
  - For example, the Ypsilanti WWTP saw increases in SARS-CoV-2 levels which correlated with increasing presence of Omicron BA.2 lineage and then followed by an increase in cases



Source: MDHHS – Sentinel Wastewater Epidemiology Evaluation Project - https://www.michigan.gov/coronavirus/0,9753,7-406-98163_98173-573480--,00.html

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. To view wastewater data from previous weeks, please use the "Map - All Data" and "Trends - All Data" tabs.



Site	Sewershed Population	Consecutive Weeks of Virus Detection	Trend As Of	15-Day Trend
Alma WWTP	8976	23	9/19/2022	
Battle Creek WWTP	51093	23	9/21/2022	
Bay City WWTP	34000	14	9/22/2022	
Delhi Township WWTP	22500	25	9/15/2022	
Escanaba WWTP	12600	21	9/19/2022	
GLWA Detroit River Interce..	492000	11	9/21/2022	
GLWA North Interceptor-Ea..	1482000	78	9/21/2022	
GLWA Oakwood-Northwest..	840600	101	9/21/2022	
Grand Rapids WWTP	265000	59	9/19/2022	
Holland WWTP North	45606	23	9/21/2022	
Holland WWTP South	36912	25	9/21/2022	
Jackson WWTP	90000	62	9/22/2022	
Kalamazoo WWTP	150000	26	9/22/2022	
Petoskey WWTP	7900	23	9/21/2022	
Portage Lake WWTP	14000	54	9/19/2022	
Saginaw Township WWTP	40000	24	9/22/2022	
Tecumseh WWTP	8680	37	9/23/2022	
Traverse City WWTP	45000	28	9/22/2022	
Warren WWTP	135000	22	9/15/2022	
Ypsilanti WWTP	330000	62	9/22/2022	

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 9/28/2022. 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.

15-Day Trends
- 1000% or more
- 100% to 999%
- 10% to 99%
- 0% to 9%
- -1% to -9%
- -10% to -99%
- -100% to -999%
- -1000% or more

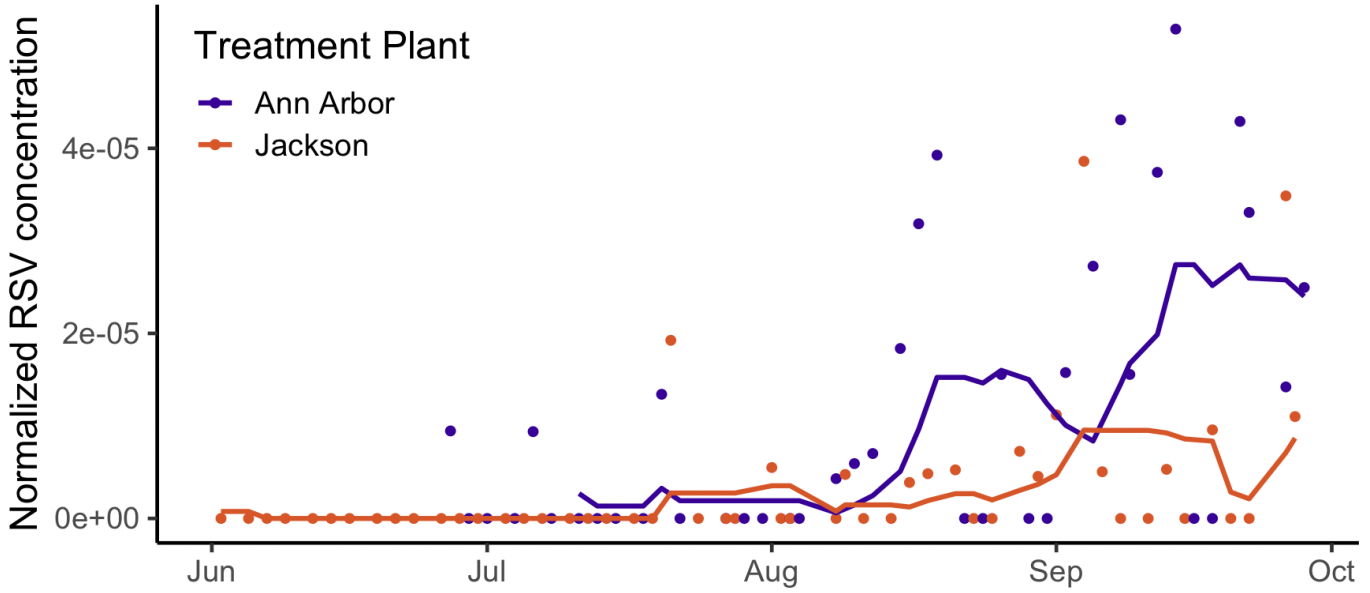
SWEEP Summary

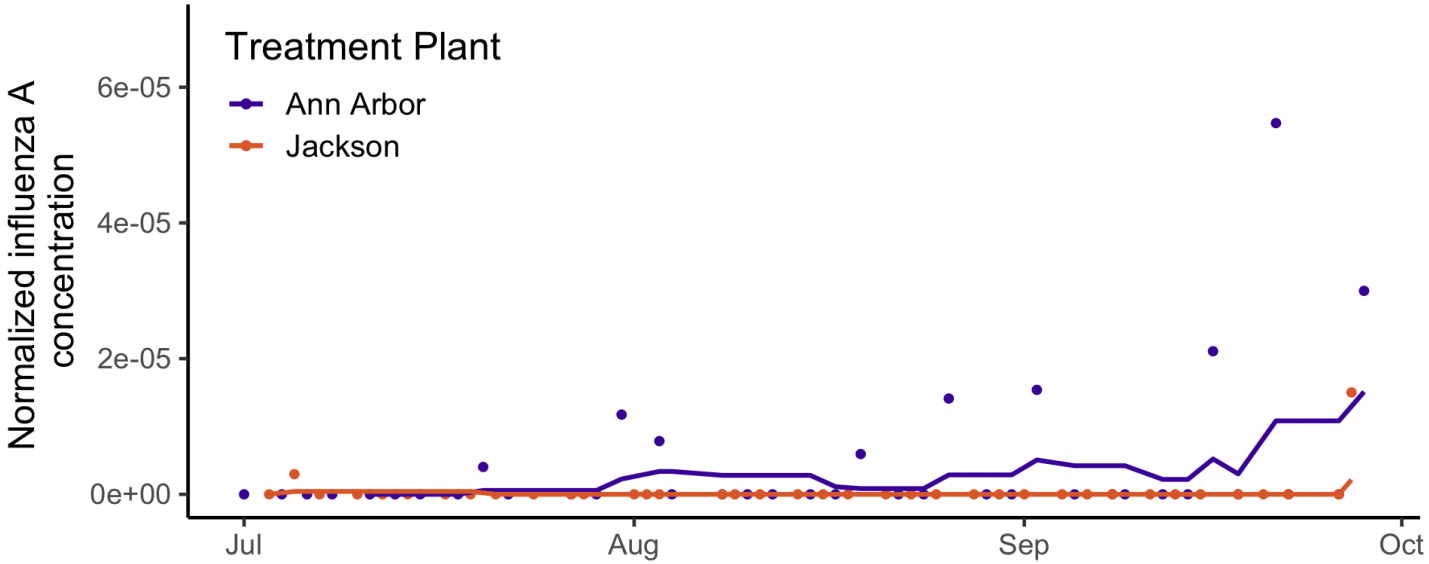
- 40% (8/20) of sentinel sites are showing increasing trends over last 15-days
- 15% (3/20) of sites have plateaued over the last 15 days
- 45% (9/20) of sentinel sites are showing declines in the previous 15-days

Source: MDHHS – Sentinel Wastewater Epidemiology Evaluation Project - https://www.michigan.gov/coronavirus/0,9753,7-406-98163_98173-573480--,00.html

Measuring other respiratory illnesses in wastewater: increases in RSV and influenza A

- Monitoring for RSV (Respiratory syncytial virus) and influenza A at two wastewater treatment plants in MI (Ann Arbor, Jackson, and currently adding Warren, MI)
- Ann Arbor and Jackson plants are showing increases in RSV
- Ann Arbor is showing increases in influenza A
  - (Most recent sample from Jackson showing higher concentration but more data is needed)

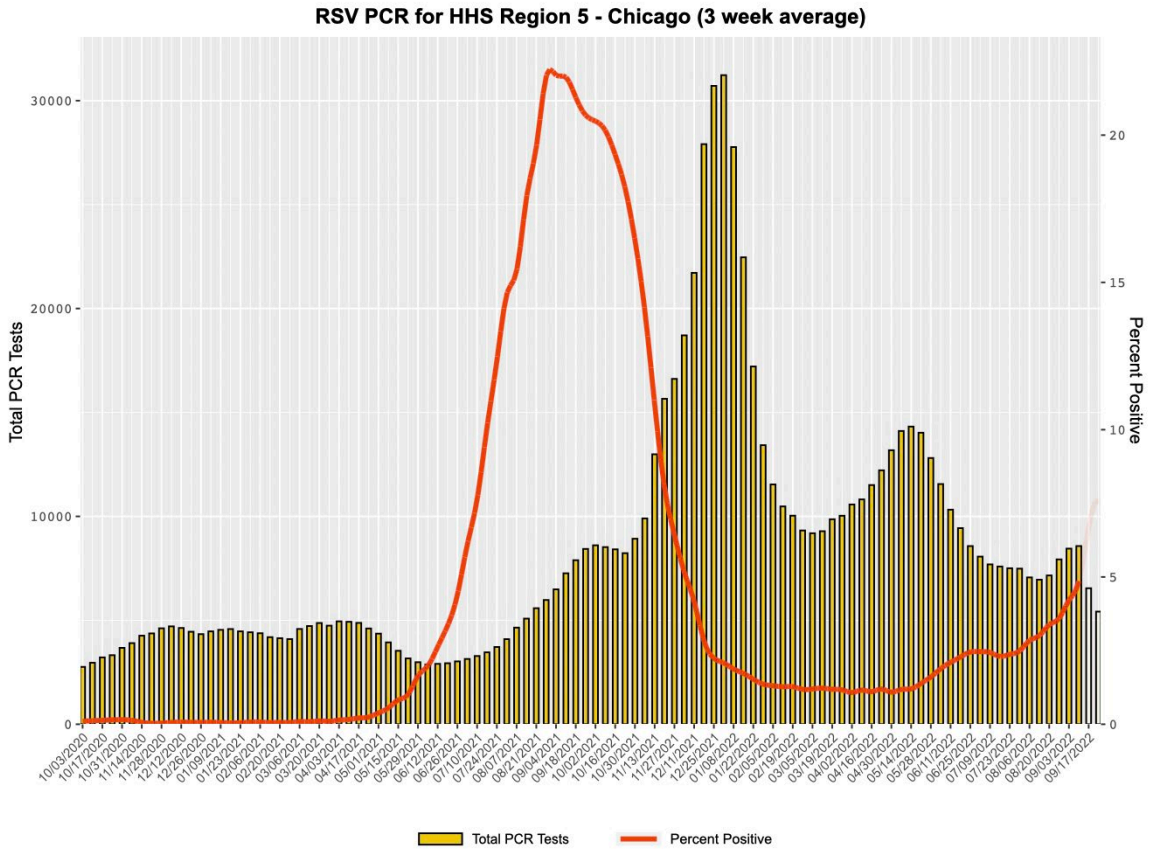




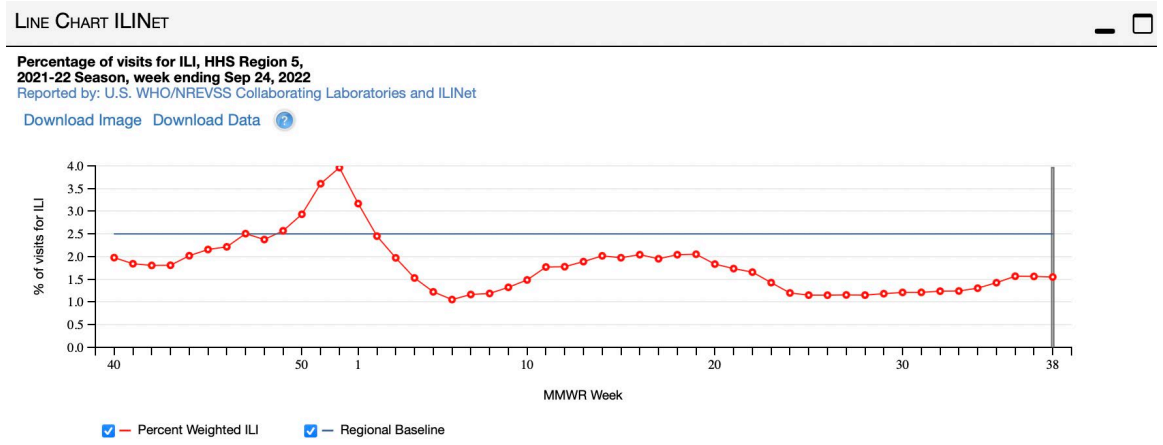
Source: Verily/SCAN wastewater network data through 9/28/22.

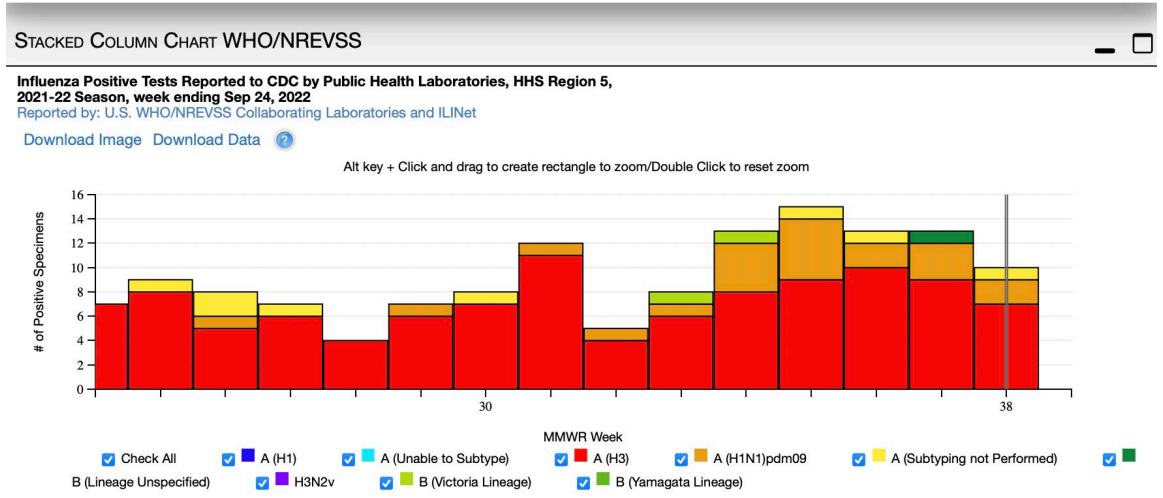
Region 5 trends in testing and syndromic data show an increase for RSV and potential increase in influenza A

Region 5 RSV % positivity trends show an increase (red)



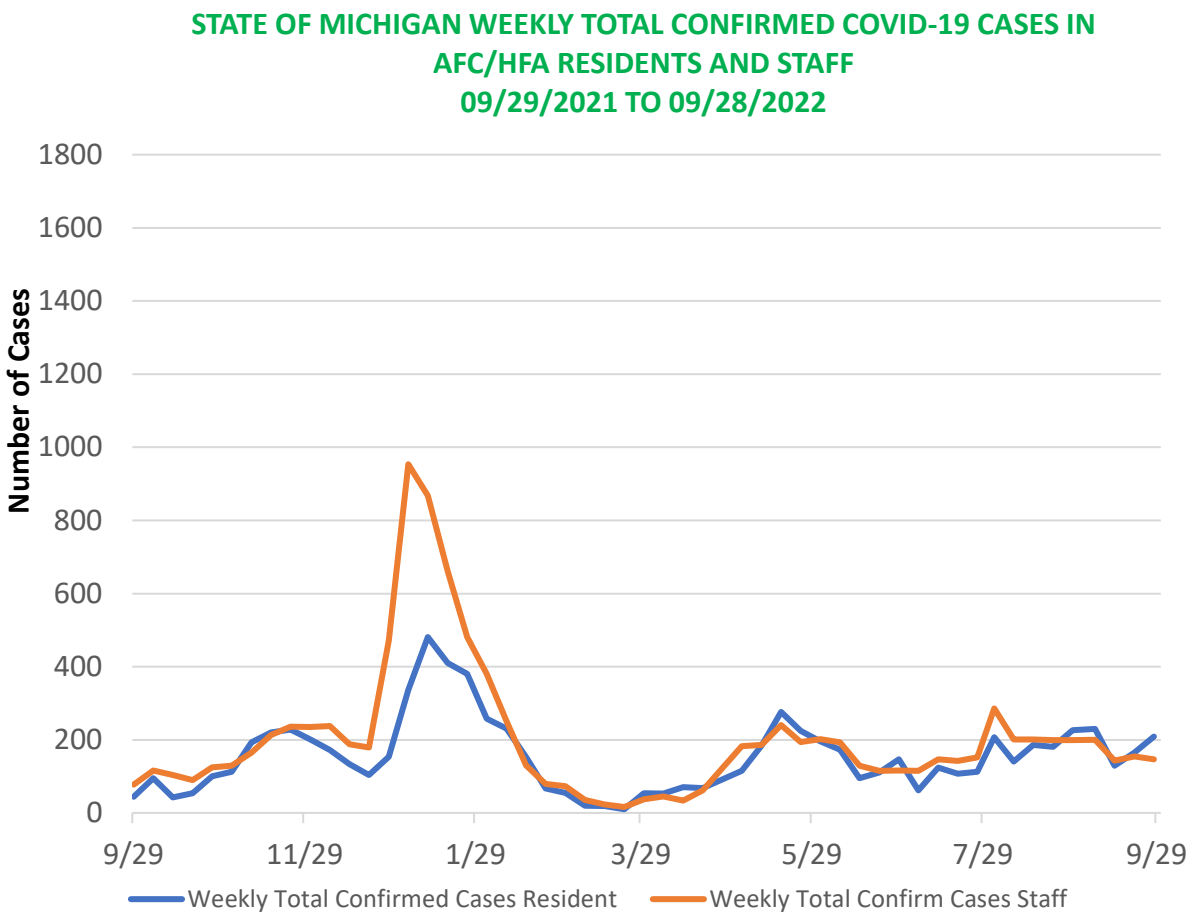
Region 5 influenza-like illness (ILI) visits (top) and influenza positive tests (bottom) plateaued or slight increase

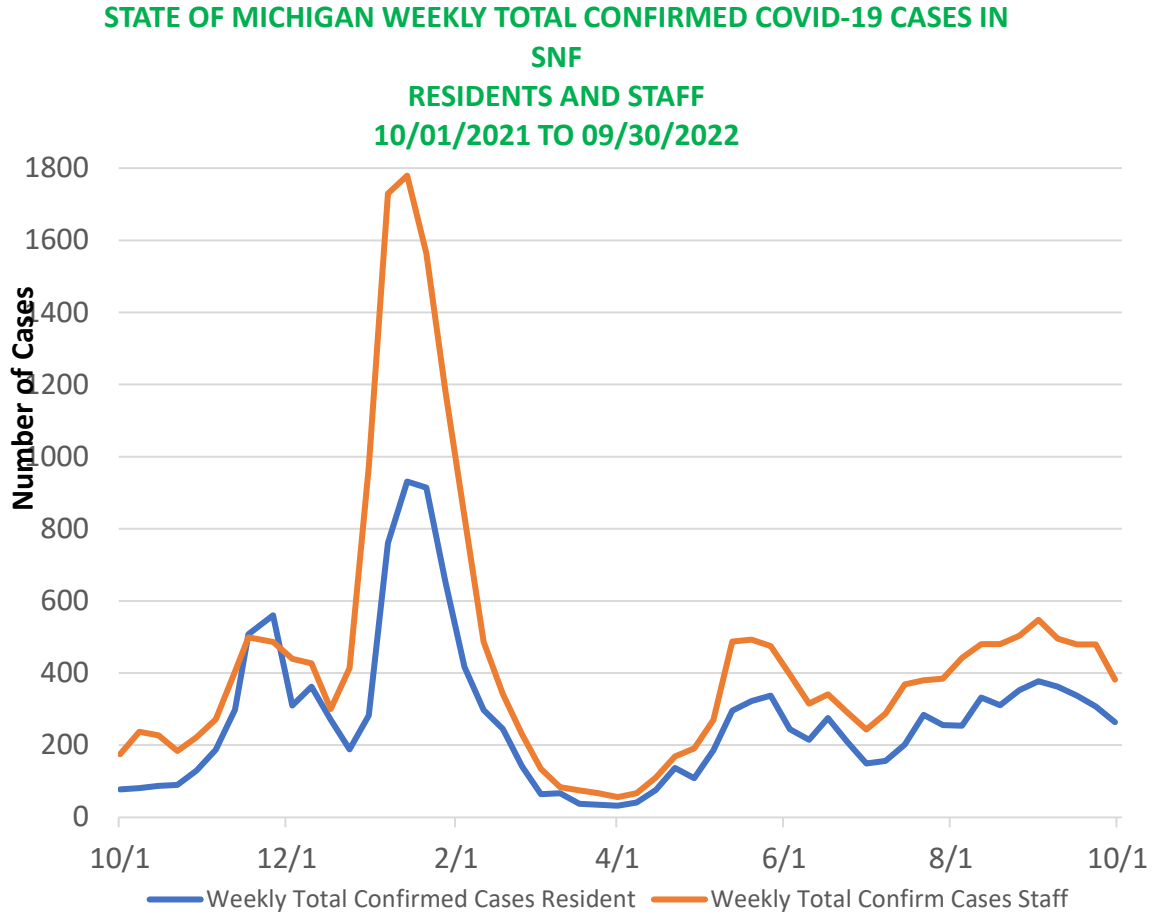




Source: CDC NREVSS regional trends for RSV, CDC FluView

Cases Among Staff and Residents in Long Term Care Facilities



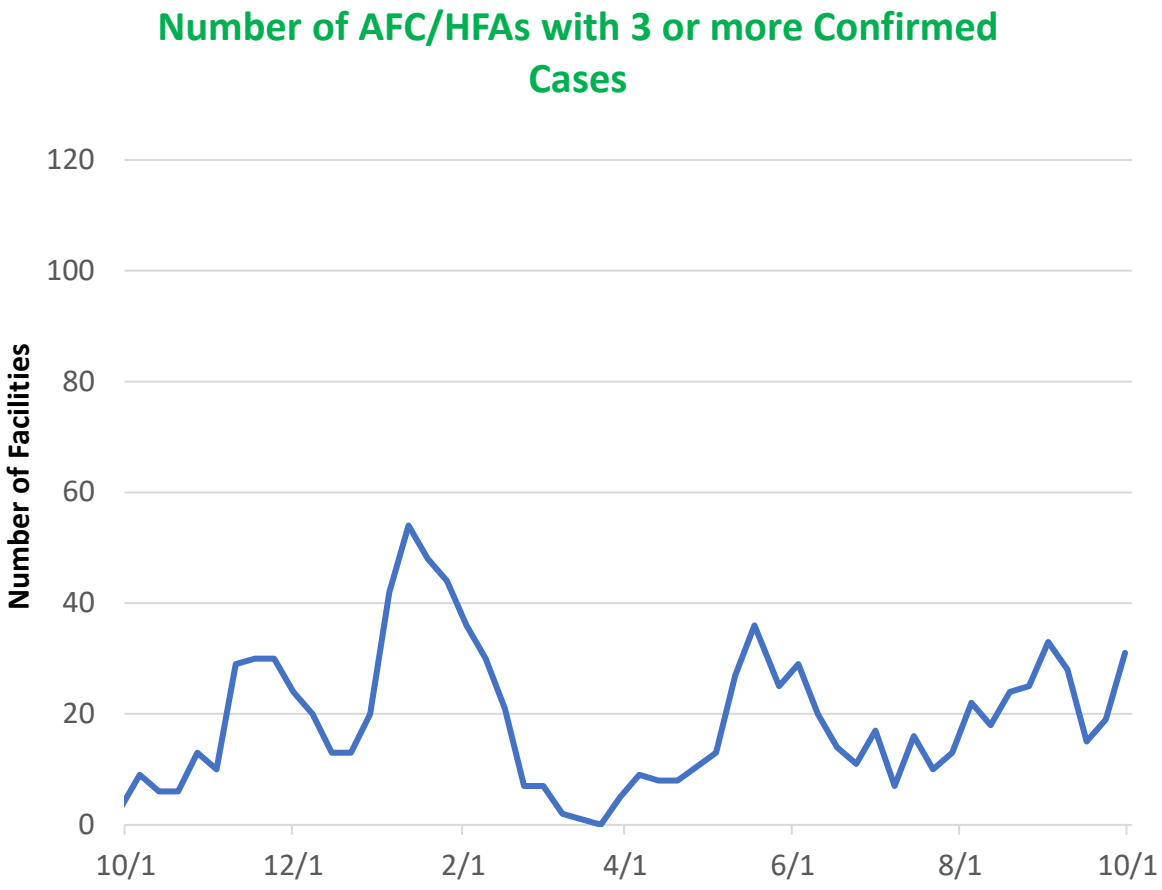


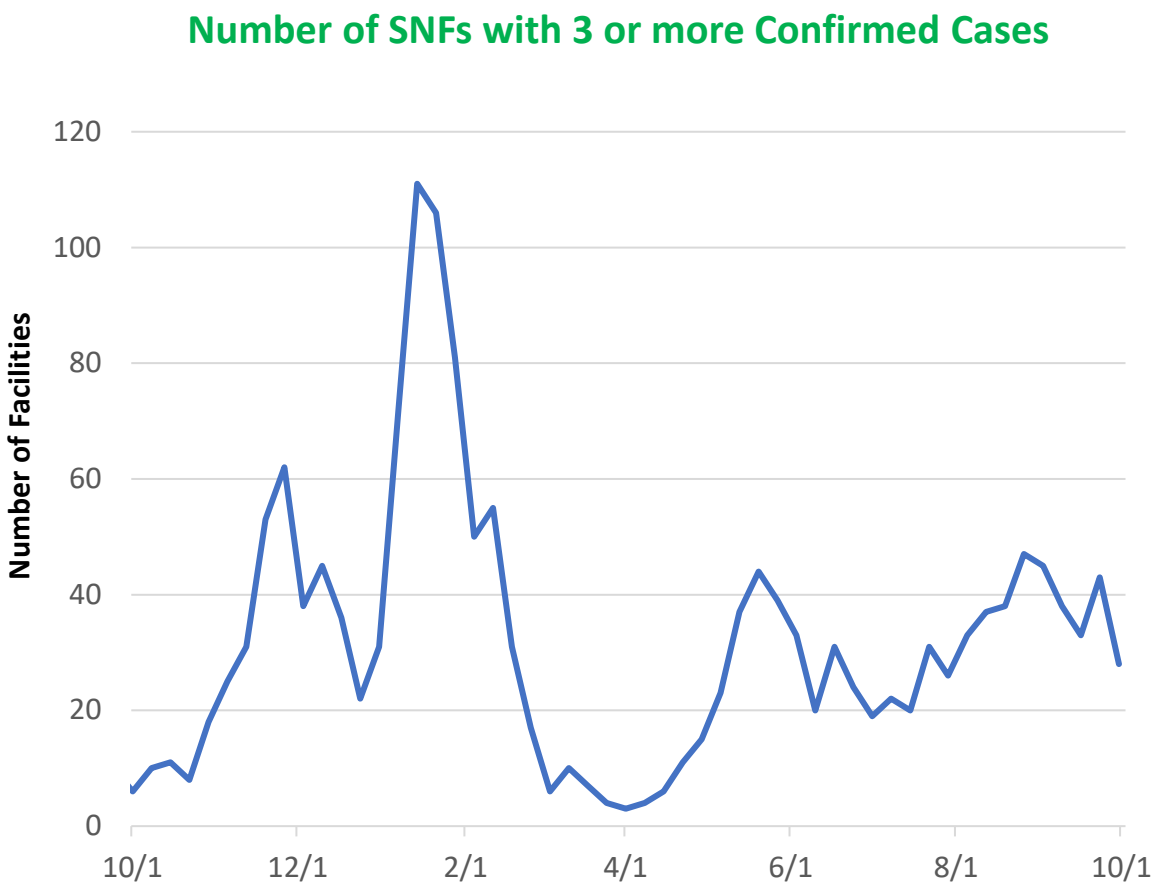
- Case counts in residents increased in AFC/HFA (165 to 209), but decreased in SNFs (307 to 264) since last week
- Case counts in staff decreased in AFC/HFA (155 to 147) and in SNFs (479 to 382) since last week
- **29%** of SNFs are reporting **nursing shortages** and **31%** of SNFs are reporting **aide shortages**, which is stable from last week

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

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

Reported Number of Clusters in Long Term Care Facilities

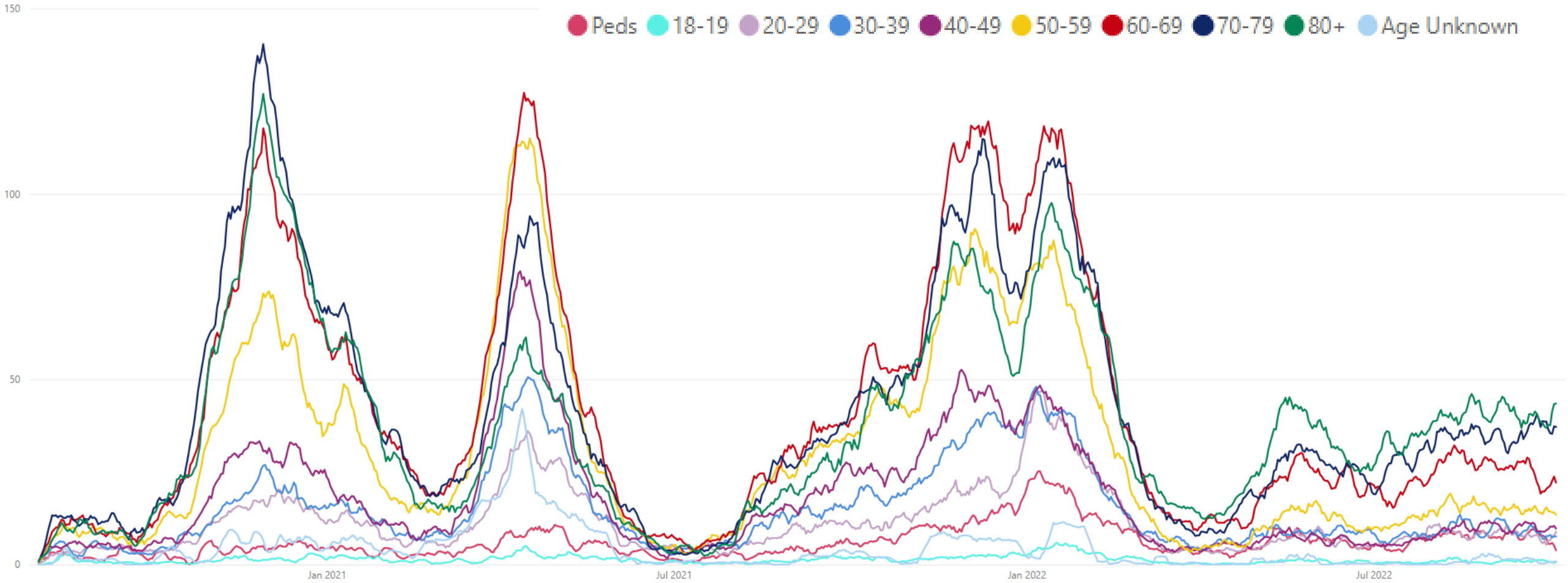




- The number of Long-Term Care Facilities reporting 3 or more cases within a single reporting period has plateaued over the past week
- This week, the number has increased in **AFC/HFAs (**19 to 31) but decreased in **SNFs** (43 to 28) since the previous week

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

Hospital admissions due to COVID-19 remain lower than past surges

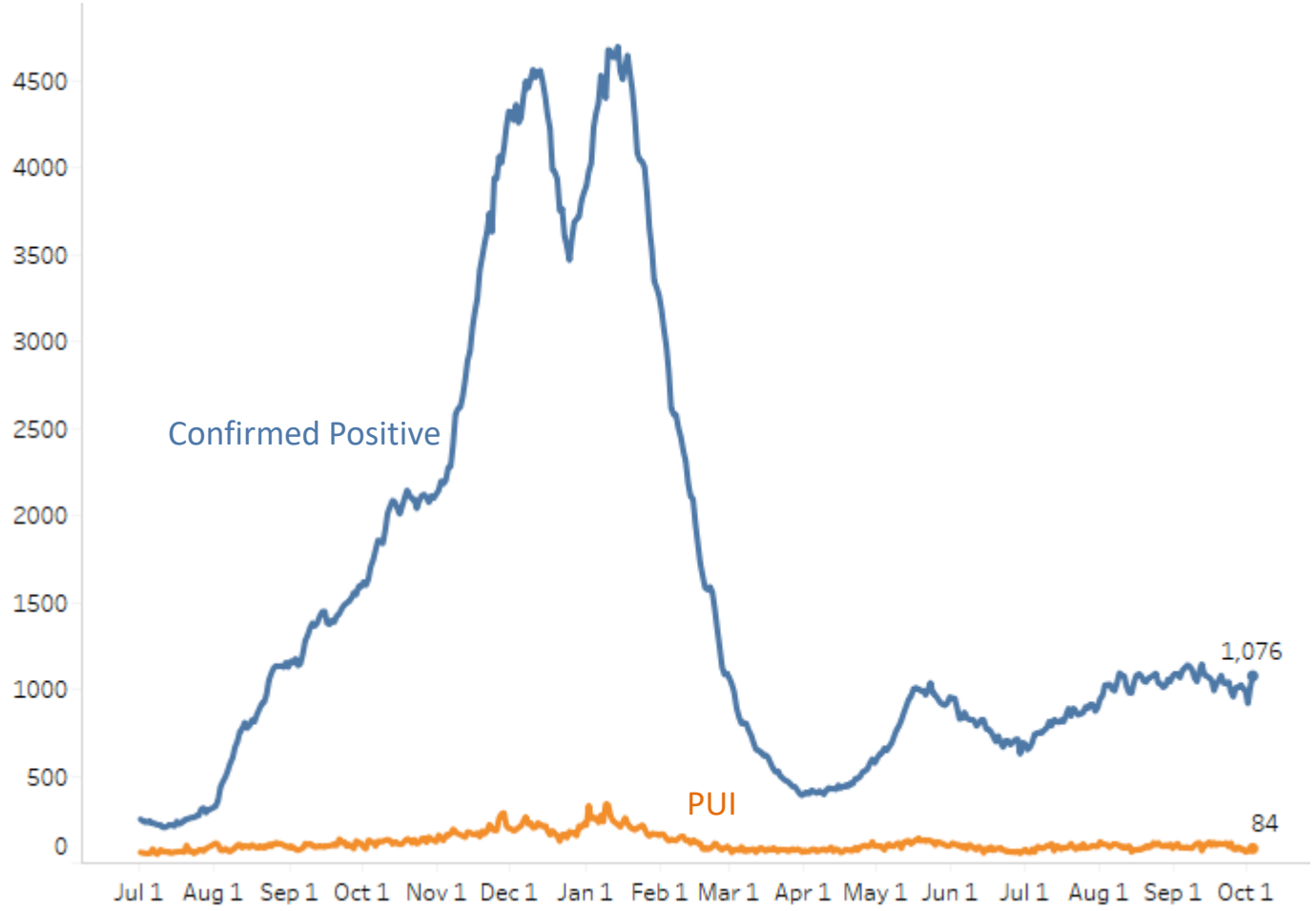


- Trends for daily average hospital admissions increased (+8%) compared to last week (vs. -10% prior week)
- About half of all age groups of saw increases this week, but all increases were less than an additional 5 cases per day
- Those 60-69, 70-79, and 80+ are seeing between 24 and 45 daily hospital admissions

Source: CHECC & EM Resource

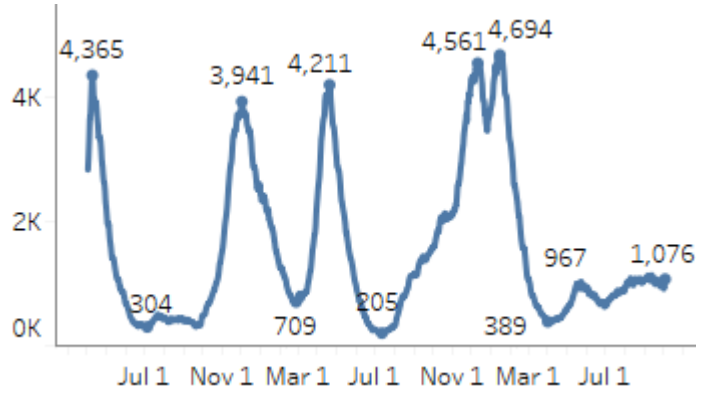
Statewide Hospitalization Trends: Total COVID+ Census

Hospitalization Trends 7/1/2021 – 10/3/2022
Confirmed Positive & Persons Under Investigation (PUI)



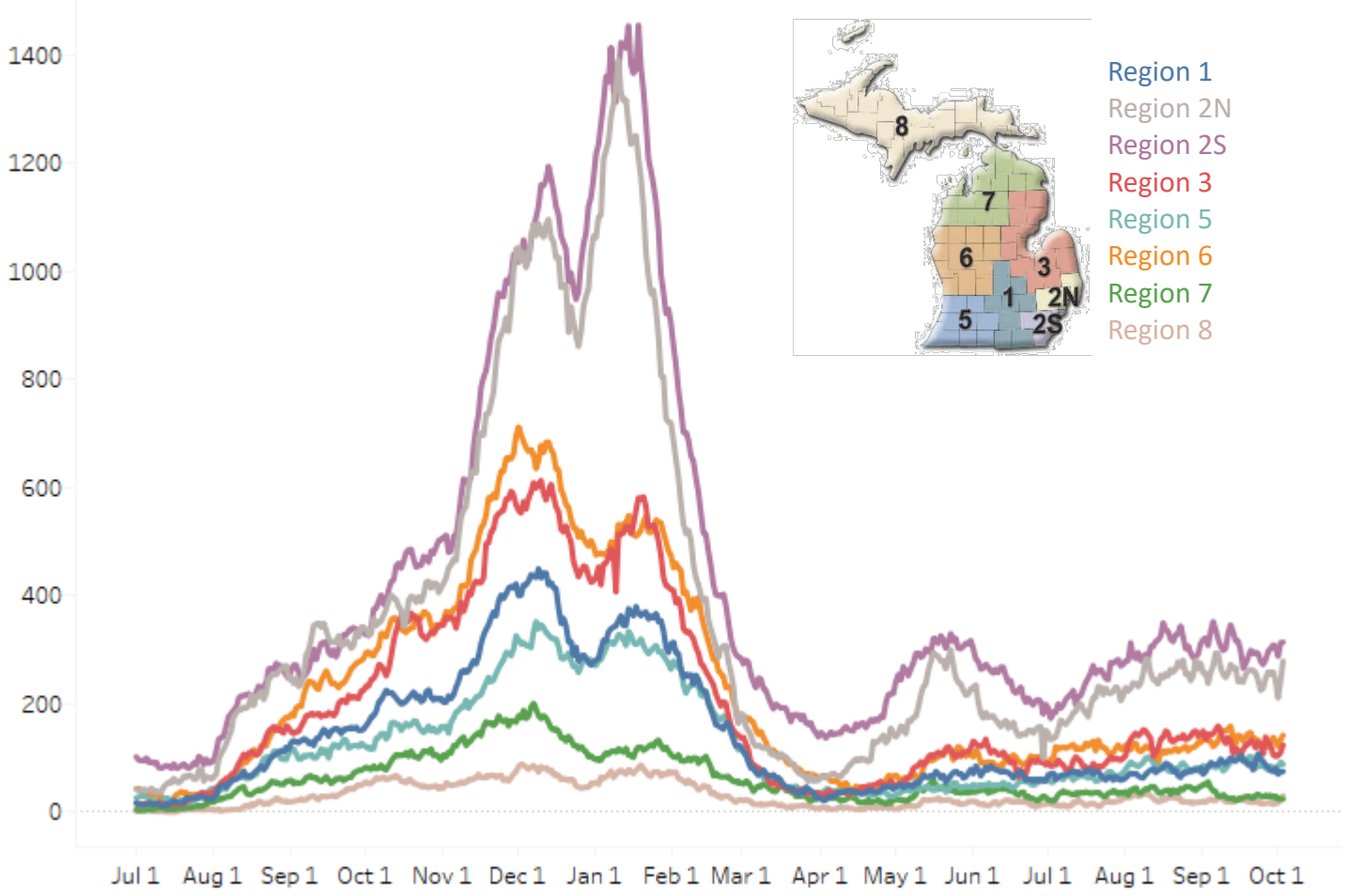
COVID+ census in hospitals has increased by 7% from last week. Overall census is currently 1,076 patients.

Hospitalized COVID Positive Long Term Trend (beginning March 2020)



Statewide Hospitalization Trends: Regional COVID+ Census

Hospitalization Trends 7/1/2021 – 10/3/2022
Confirmed Positive by Region



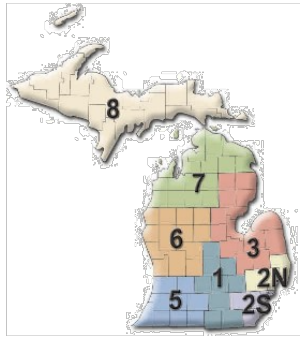
This week hospitalizations have decreased or remained flat in Regions 1, 3, and 7. Hospitalizations have increased in Regions 2N, 2S, 5, 6, and 8.

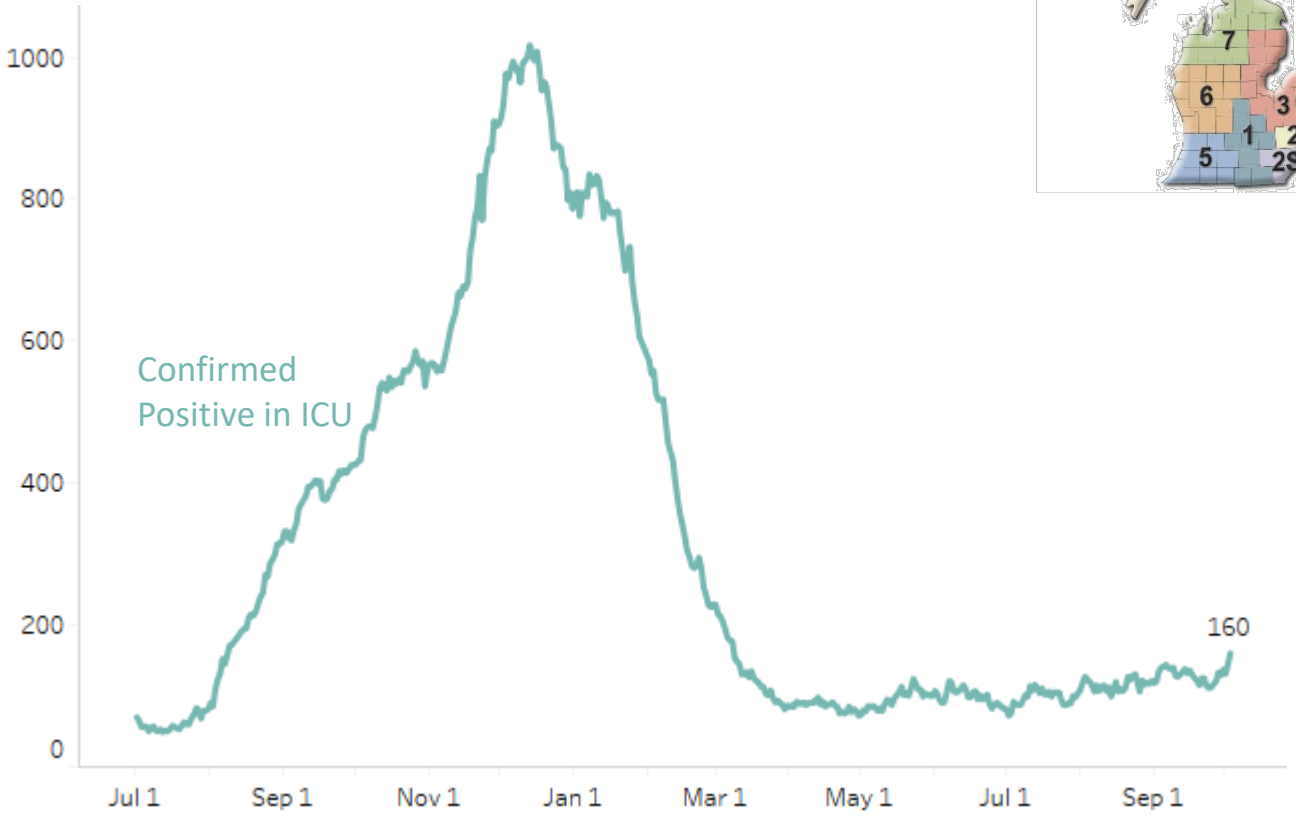
Regions 2N, 2S, and 3 have greater than 100 hospitalizations/M.

Region	COVID+ Hospitalizations (% Δ from last week)	COVID+ Hospitalizations / MM
Region 1	75 (-14%)	69/M
Region 2N	279 (13%)	126/M
Region 2S	314 (12%)	141/M
Region 3	124 (-11%)	109/M
Region 5	88 (7%)	92/M
Region 6	142 (13%)	97/M
Region 7	24 (-23%)	48/M
Region 8	30 (88%)	96/M

Statewide Hospitalization Trends: ICU COVID+ Census

Hospitalization Trends 7/1/2021 – 10/3/2022
Confirmed Positive in ICUs





Overall, the volume of COVID+ patients in ICUs has increased by 37% from last week. There are 160 COVID+ patients in ICU beds across the state.

ICU occupancy is less than 85% in all regions except Region 1. Region 8 has greater than 10% of ICU beds occupied by COVID+ patients. All other regions have fewer than 10% of ICU beds occupied by COVID+ patients.

Region	Adult COVID+ in ICU (% Δ from last week)	ICU Occupancy	% of ICU beds COVID+
Region 1	9 (-25%)	89%	5%
Region 2N	42 (100%)	69%	7%
Region 2S	43 (19%)	75%	6%
Region 3	19 (-5%)	81%	6%
Region 5	14 (180%)	70%	8%
Region 6	19 (19%)	77%	8%
Region 7	7 (75%)	80%	5%
Region 8	7 (133%)	59%	11%

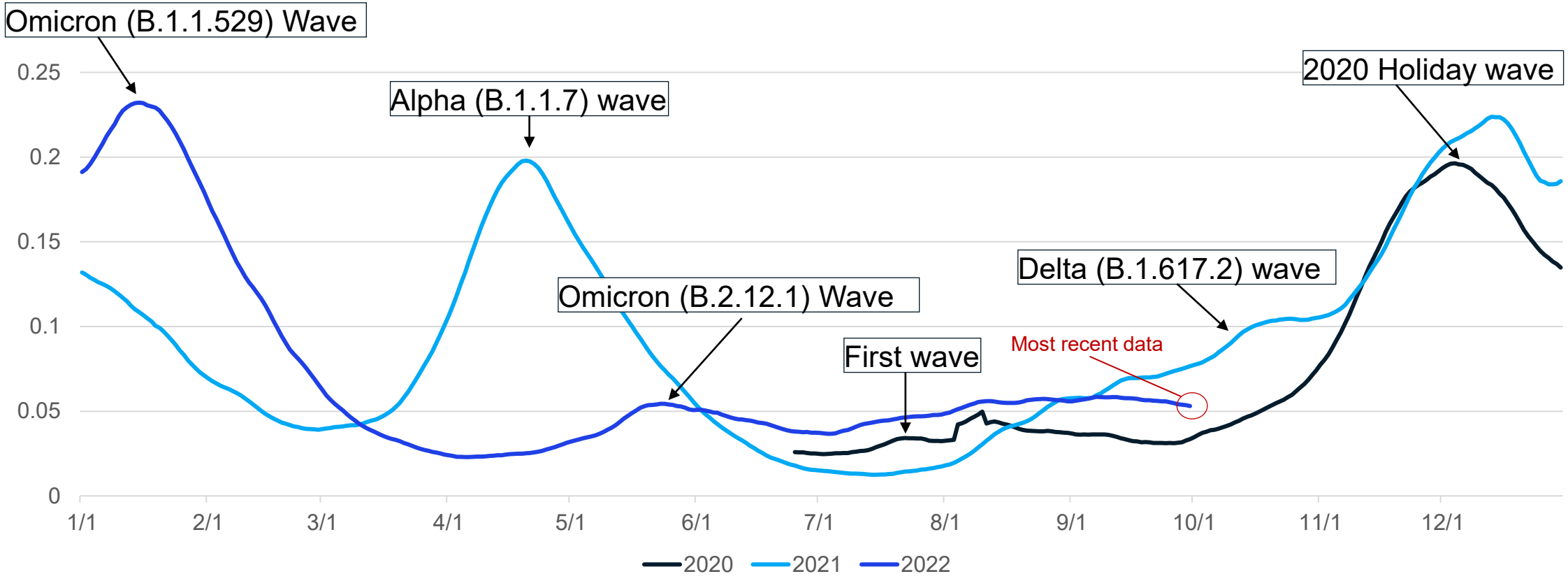
Statewide Hospitalization Trends: Pediatric COVID+ Census

Hospitalization Trends 1/1/2021 – 10/3/2022
Pediatric Hospitalizations, Confirmed + PUI

Percent of Inpatients with COVID

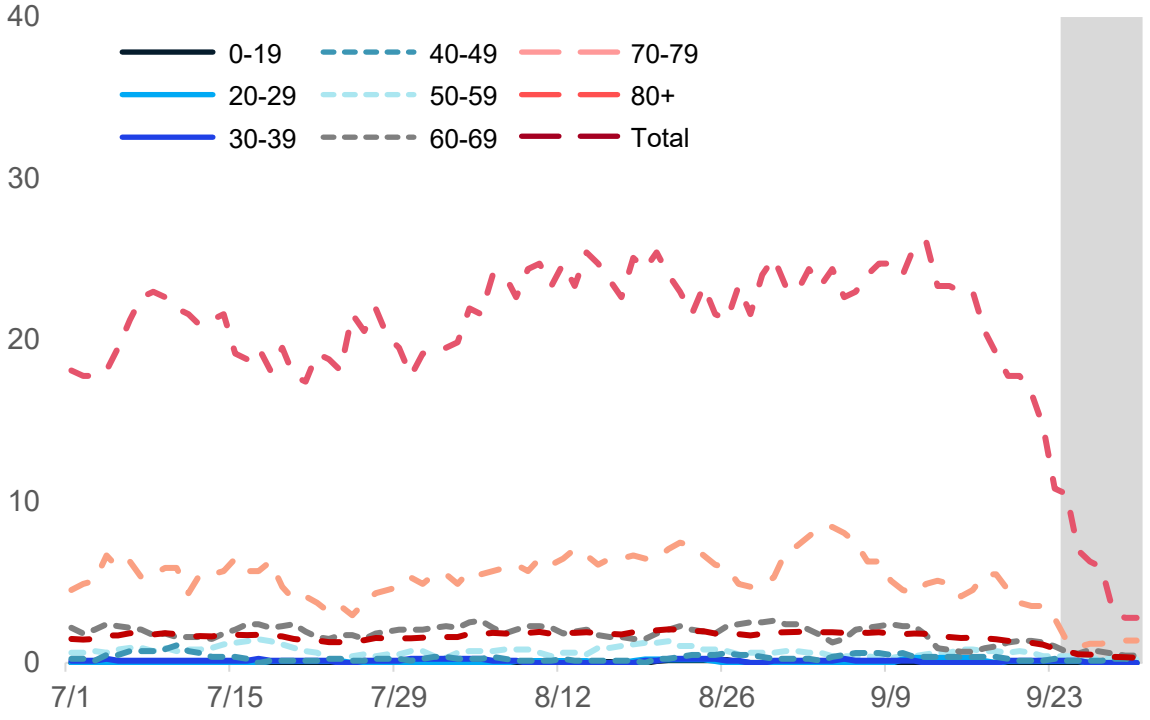
- The percent of inpatients who are COVID+ remains lower than Alpha, Omicron, and holiday wave peaks
- Current hospital levels are fairly plateaued, and between levels in fall 2020 and fall 2021

7-day rolling average of percent of inpatients who are COVID positive



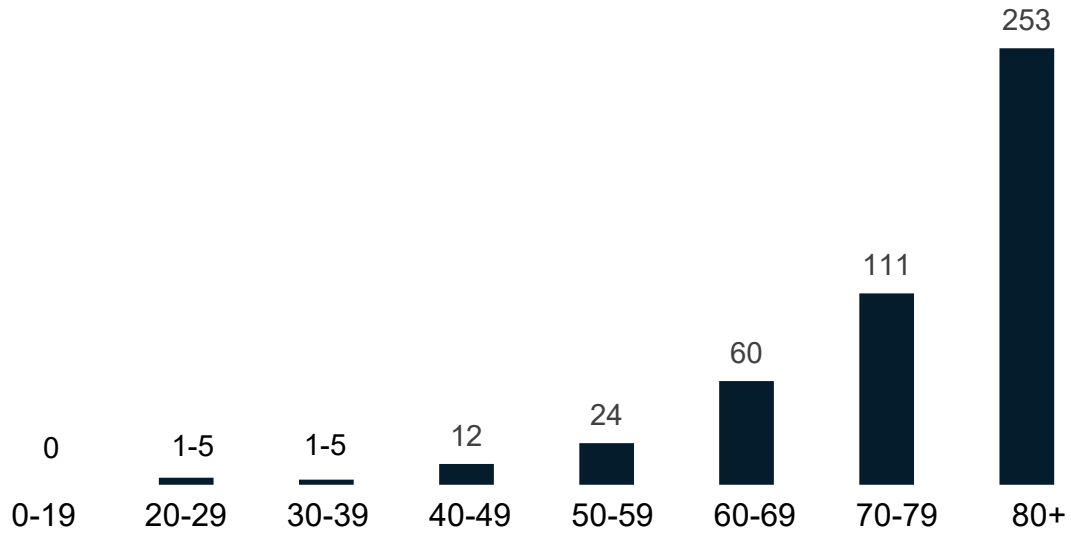
Average new deaths have plateaued for those over the age of 80

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 9/23/2022)

- 9.3% of deaths below age sixty



- Through 9/23, the 7-day avg. death rate has plateaued (10.8 deaths per million people) for those over the age of 80
- In the past 30 days, there are fewer than 20 confirmed and probable COVID-19 deaths under the age of 50
- 30-day proportion of deaths among those under 60 years of age is 9.3%.

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

Harm Reduction: Key Messages

Empowering community members to make best choices for their individual circumstances and to be prepared by making a COVID plan

- Michiganders can take advantage of local, state, and national COVID-19 resources

- Get tested, and if positive, seek care with therapeutics (e.g., antibodies or antiviral medications)
  - Cumulative therapeutic availability and administration is lower than all-time highs but increasing since mid-September
  - Talk to your doctor or pharmacist about whether you should get antibody or antiviral treatment, and where you can find treatment
  - Therapeutics are authorized for people who meet select criteria
  - Additional public health, regulatory, and policy efforts might help decrease barriers to oral antiviral access, particularly in communities with high social vulnerability

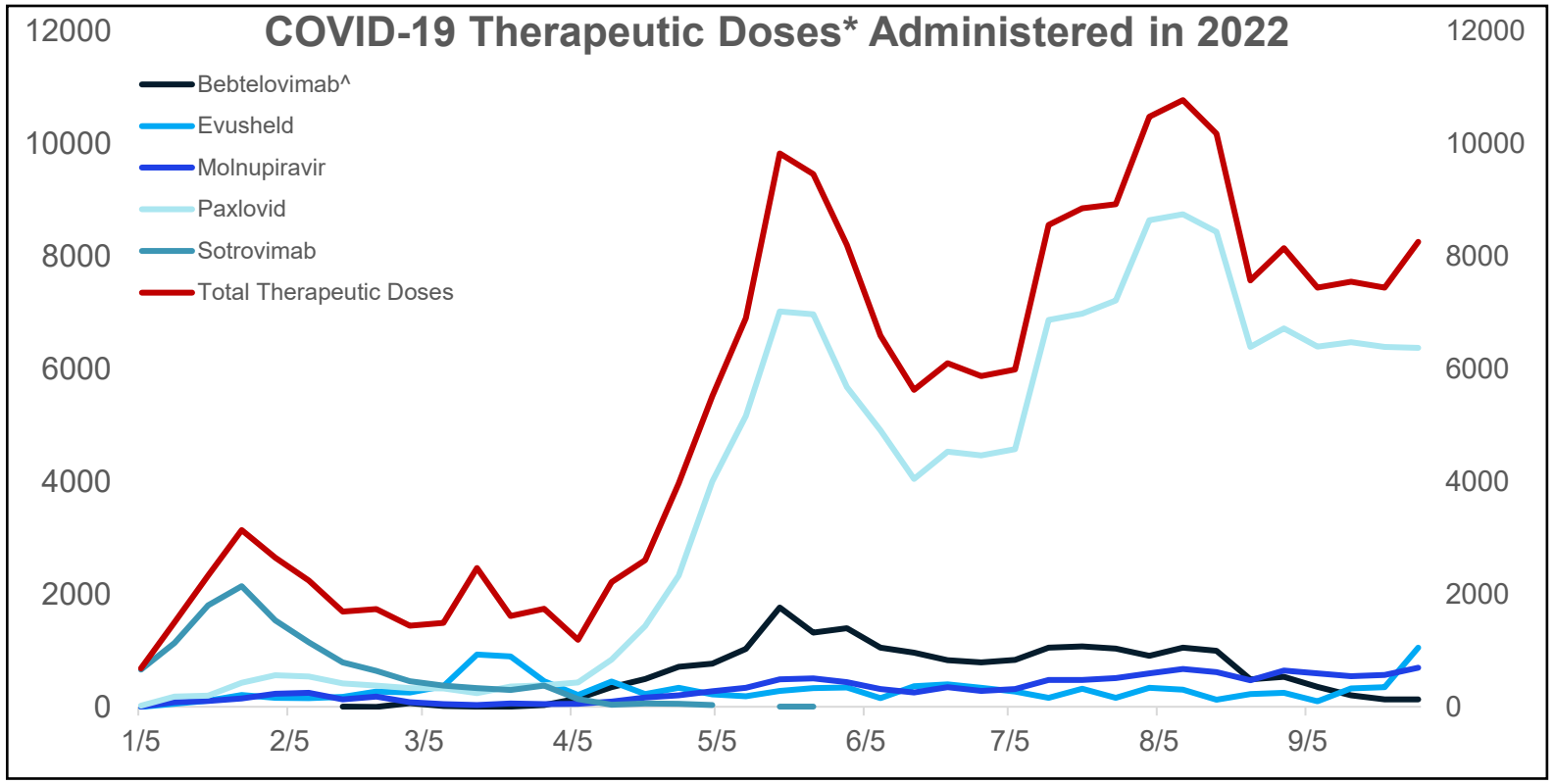
- Vaccinations remain the best way to protect from COVID-19, especially from severe disease
  - COVID-19 vaccines are now available for ages 6 months and up
    - Everyone 6 months and older should also get an age-appropriate COVID-19 booster, when eligible
  - CDC has published new recommendations for the being up to date with COVID-19 vaccination
  - Over 6.8 million Michiganders have received at least one dose (68.3%)
  - 56.6% of fully vaccinated Michiganders have received at least one booster
  - 36.7% of people in Michigan (793K+) with a first booster dose have received a second booster dose
  - Over 308,000 bivalent booster doses had been administered as of 9/27

Federal & Michigan websites assist COVID positive residents find treatment

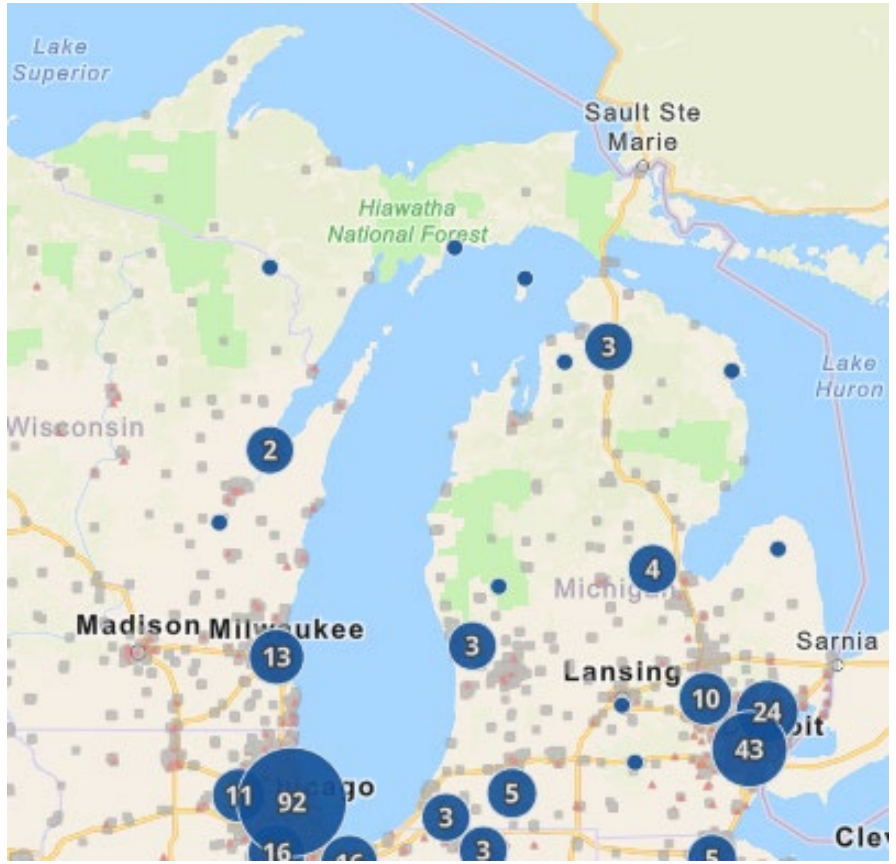
COVID-19 resources available on federal website: COVID.gov

Test-to-Treat program simplifies access to COVID treatment: Find a Test-to-Treat location near you

- If you have COVID-19 symptoms, do not wait to get treated
- You must take oral COVID-19 medication within 5 days of your first COVID-19 symptoms
- Use the tool to find a location that is right for you



Source: HHS – Tiberius. Data Updated September 30
*Data is reported as a single patient course, except for Evusheld, which is reported as the number of 300mg doses administered.
^Federally supplied Bebtelovimab has concluded, and product has transitioned to the commercial marketplace

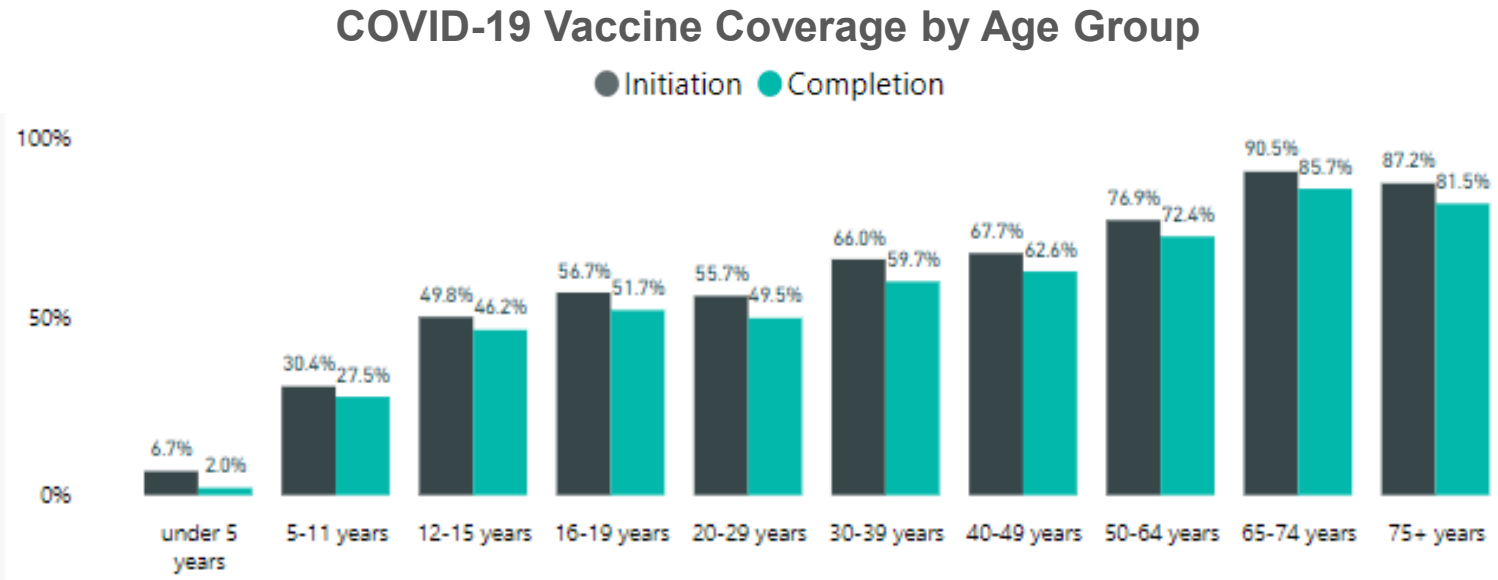


Source: Screen capture of Michigan Test-to-Treat sites from linked website

Therapeutic administration increased during Michigan's Spring Omicron surge. Supply limitations in January 2022 required strategic distribution and should not be compared directly.

Vaccinations and Boosters

- Over 17 million COVID-19 vaccine doses have been administered in Michigan
  - Over 6.8 million Michiganders have received at least one dose (68.4%)
  - Over 6.1 million Michiganders have completed a primary series (61.4%)
  - Over 3.4 million additional/booster doses have been administered in Michigan
    - 56.7% of the fully vaccinated population has received a booster
    - 78.2% of the fully vaccinated population 65 years of age or older has received a booster
  - Nearly 826,871 Michiganders 50 years of age or older who have received a first booster dose have received second booster (36.7%)



Note: Cumulative data and population percentages now include those ages 6 months and older

Sources: Michigan Coronavirus Vaccine Dashboard; CDC COVID-19 Data Tracker: Vaccine Coverage Dashboard

Bivalent (Omicron) Pfizer and Moderna COVID-19 vaccines available for booster shots in Michigan

- The Moderna and Pfizer bivalent boosters target two strains of COVID-19: the original strain of the virus and the widely spread Omicron variants (BA.4 and BA.5, including BF.7)

- **Who is eligible to receive a single bivalent booster dose and when**:
  - Individuals 18 years of age and older are eligible for a single booster dose of the bivalent **Moderna** COVID-19 vaccine if it has been at least two months since they completed primary vaccination or received the most recent booster dose with any authorized or approved monovalent COVID-19 vaccine
  - Individuals 12 years of age and older are eligible for a single booster dose of the bivalent **Pfizer-BioNTech** COVID-19 vaccine if it has been at least two months since they completed primary vaccination or received the most recent booster dose with any authorized or approved monovalent COVID-19 vaccine

- Individuals may choose to receive either the Pfizer or Moderna bivalent booster, regardless of which primary series vaccine or original booster dose they had previously.
- Influenza vaccines, which are now available in Michigan, can also be co-administered with the COVID-19 bivalent booster doses

Sources: Michigan Department of Health and Human Services; FDA; CDC ACIP

The Update on Being “Up to Date” on COVID-19 Vaccination

- The introduction of the new boosters has caused some changes in vaccine recommendations
- These new recommendations are based on
  - Age
  - First vaccine received
  - Time from last vaccine dose received

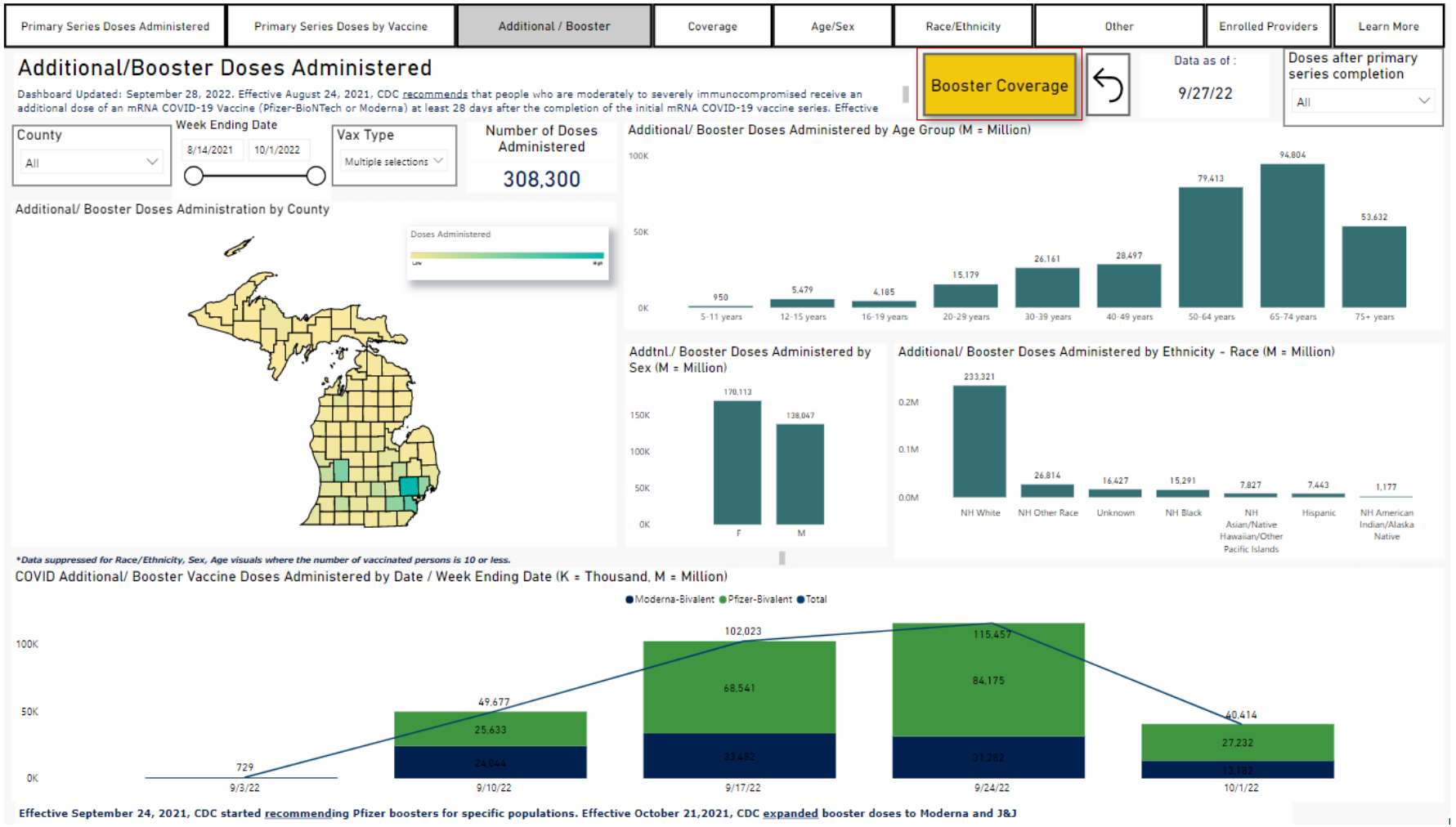
- Being up to date on COVID-19 vaccination now indicates **having completed a COVID-19 vaccine primary series** *and* **having received the most recent booster dose as recommended by the CDC**
  - **Age 6 month to 4 years** : receive all the primary series COVID-19 doses
  - **Ages 5 years to 11 years** : receive COVID-19 primary series *and* the currently recommended monovalent booster
  - **Ages 12* years and older** : receive COVID-19 primary series *and* the updated Pfizer or Moderna bivalent booster
  - **Moderate or severely immunocompromised** : consult physician or CDC for additional vaccination recommendations

* At this time, only the Pfizer bivalent booster is authorized and available for people ages 12 to 17 years

Sources: CDC Vaccination Recommendations. https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html

Bivalent Administration

- As of 9/27, 308,300 Michiganders had received their bivalent booster
- These data are updated every Wednesday on our COVID-19 vaccination Dashboard under Additional/Booster Administration Trends and then restricting the view to just Moderna and Pfizer bivalent doses
- Note: the data for the week ending 10/1 would have been incomplete on the date the dashboard was last refreshed (9/27) and underreport the true administration for the week

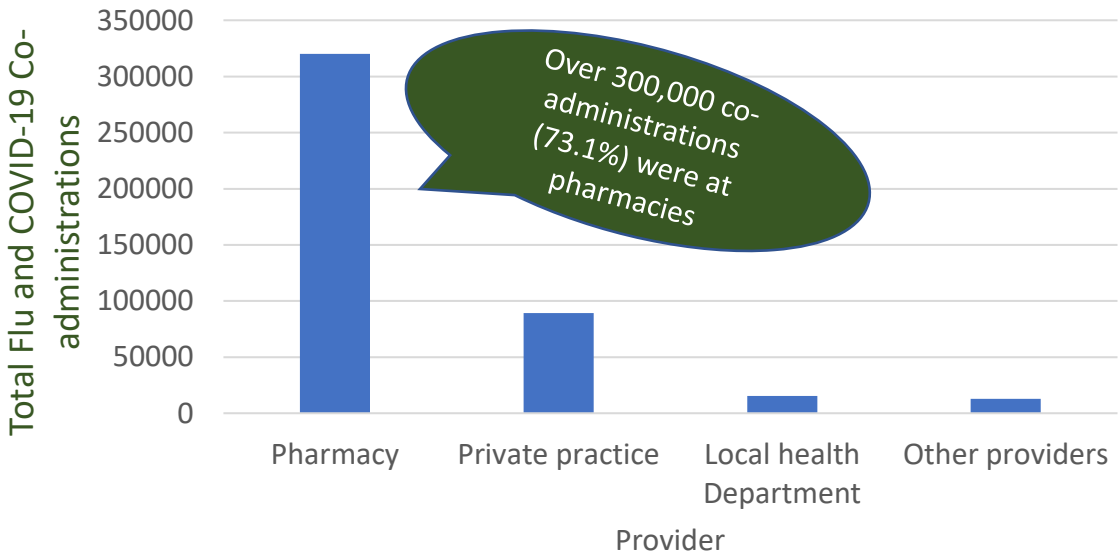


Sources: Michigan Coronavirus Vaccine Dashboard

Co-administration of Flu and COVID-19 Vaccines

- Coadministration of influenza and COVID-19 vaccines has proven to be safe and effective*[1], is recommended by the CDC[2], and provides an efficient way to immunize the population against two potentially serious illnesses
- During the 2021-2022 season (Sep 1, 2021 – Feb 12, 2022), 13.4% (413,101/3,075,658) of all flu vaccines administered in Michigan were co-administered with COVID-19 vaccines and highest among 18–49-year-olds
  - Pharmacies reported the most coadministrations of flu and COVID vaccines during this season
- Educational outreach to pharmacies, other health care providers, and the general public to co-administer flu and COVID vaccines can be an effective strategy to enhance immunizations

Age group	Flu-COVID Coadministrations (%)
5 – 11 years	283 (0.1%)
12 – 17 years	11,144 (2.5%)
18 – 49 years	161,949 (37.0%)
50 – 64 years	114,210 (26.1%)
65 years and above	150,025 (34.3%)

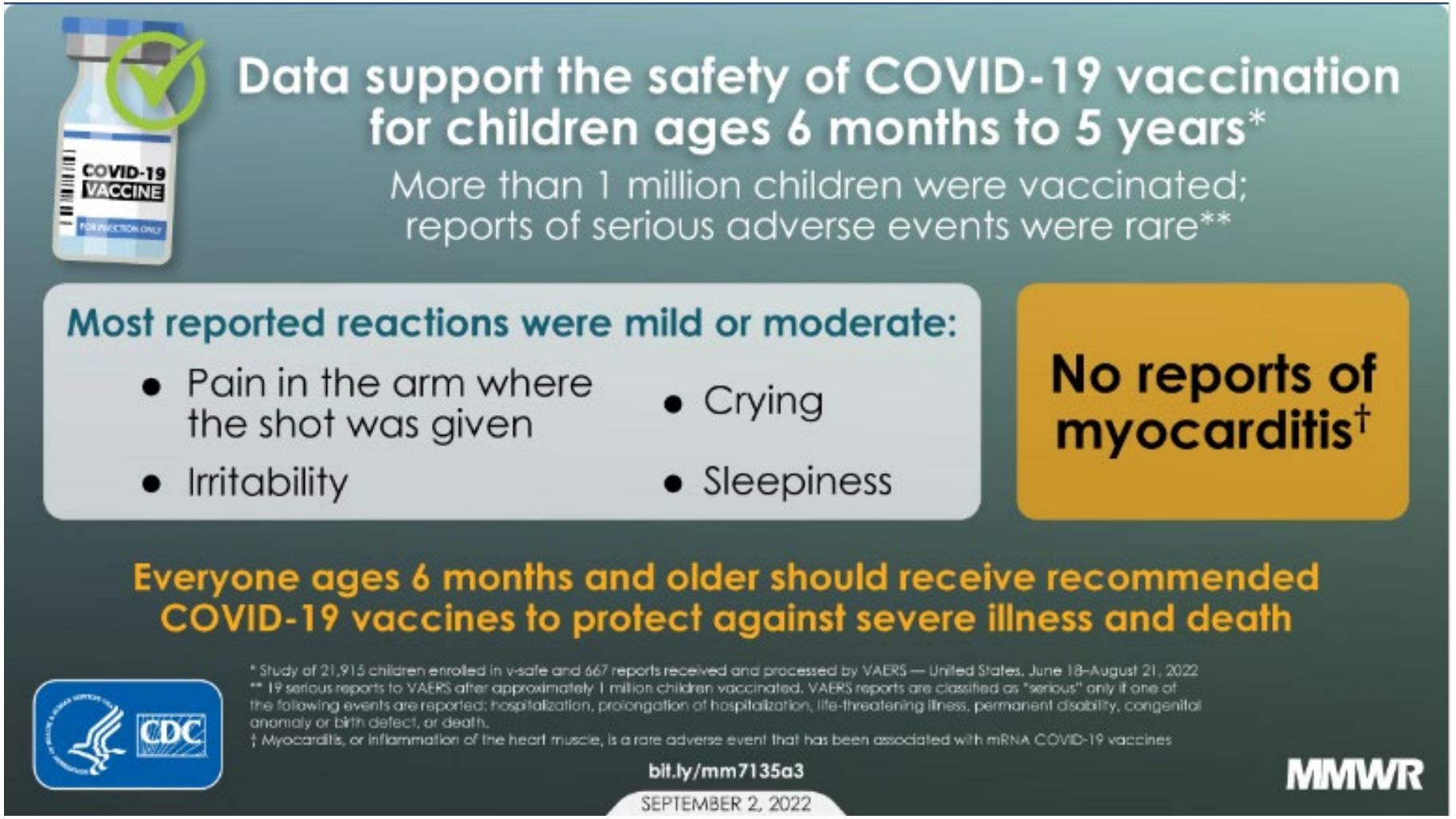


* Routine vaccinations for all persons aged ≥ 6 months who do not have contraindications

Sources: Michigan Department of Health and Human Services: Division of Immunization; **1.** Toback S, et al. Safety, immunogenicity, and efficacy of a COVID-19 vaccine (NVX-CoV2373) co-administered with seasonal influenza vaccines: an exploratory substudy of a randomised, observer-blinded, placebo-controlled, phase 3 trial. Lancet Respir Med. 2022 Feb;10(2):167-179. doi: 10.1016/S2213-2600(21)00409-4. Epub 2021 Nov 17. **2** Grohskopf LA et al. Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices, United States, 2021–22 Influenza Season. MMWR Recomm Rep 2021;70(No. RR-5):1–28. DOI: http://dx.doi.org/10.15585/mmwr.rr7005a1

COVID-19 mRNA Vaccine is Safe Among Children Aged 6 Months–5 Years

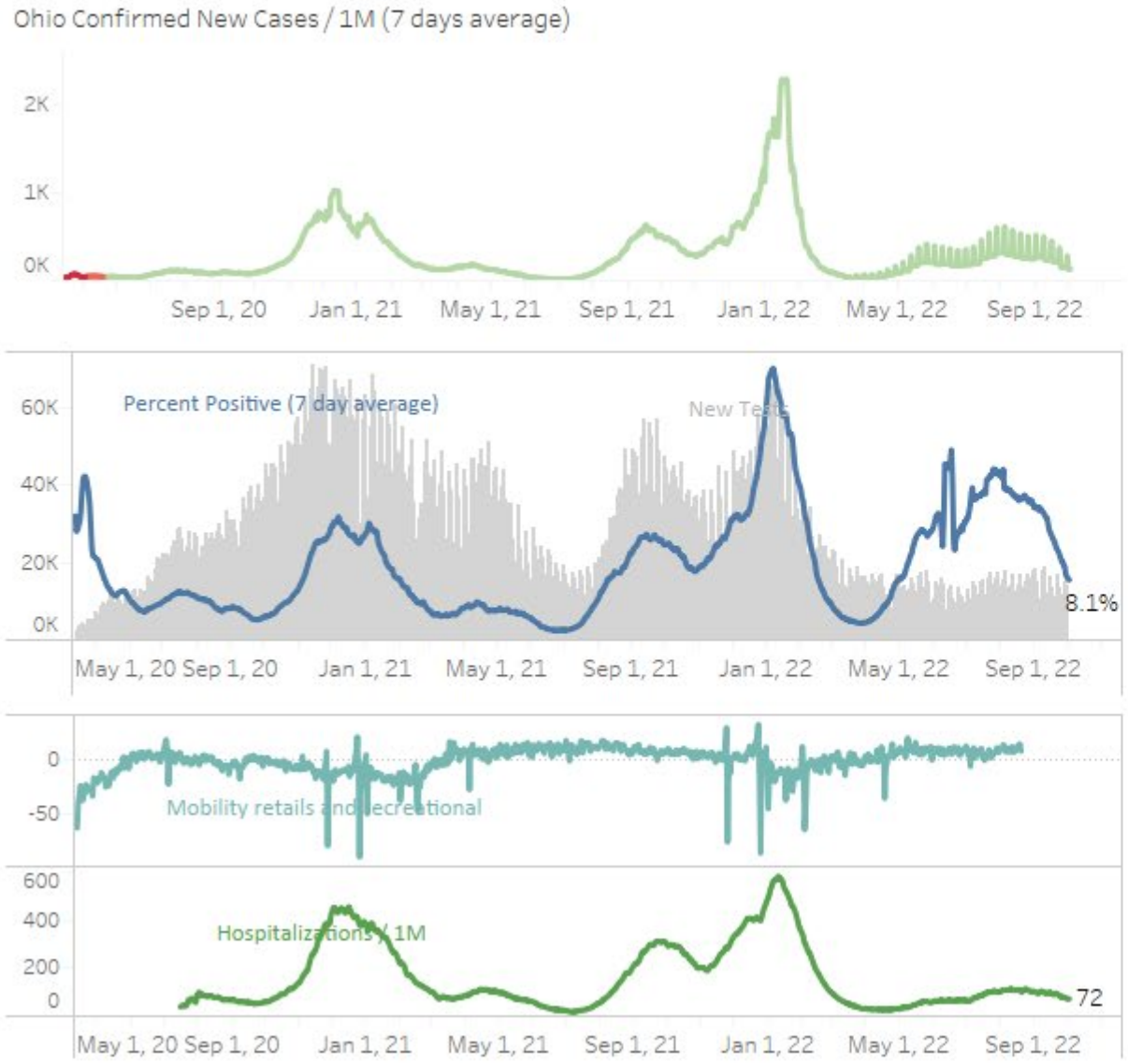
- Approximately 1 million COVID-19 vaccine doses were administered to children 6 month to 5 years between June and August 2022, following ACIP and CDC recommendations
- Reports of serious adverse events were rare and there were 0 reports of myocarditis
- Everyone 6 months and older should receive COVID-19 vaccine

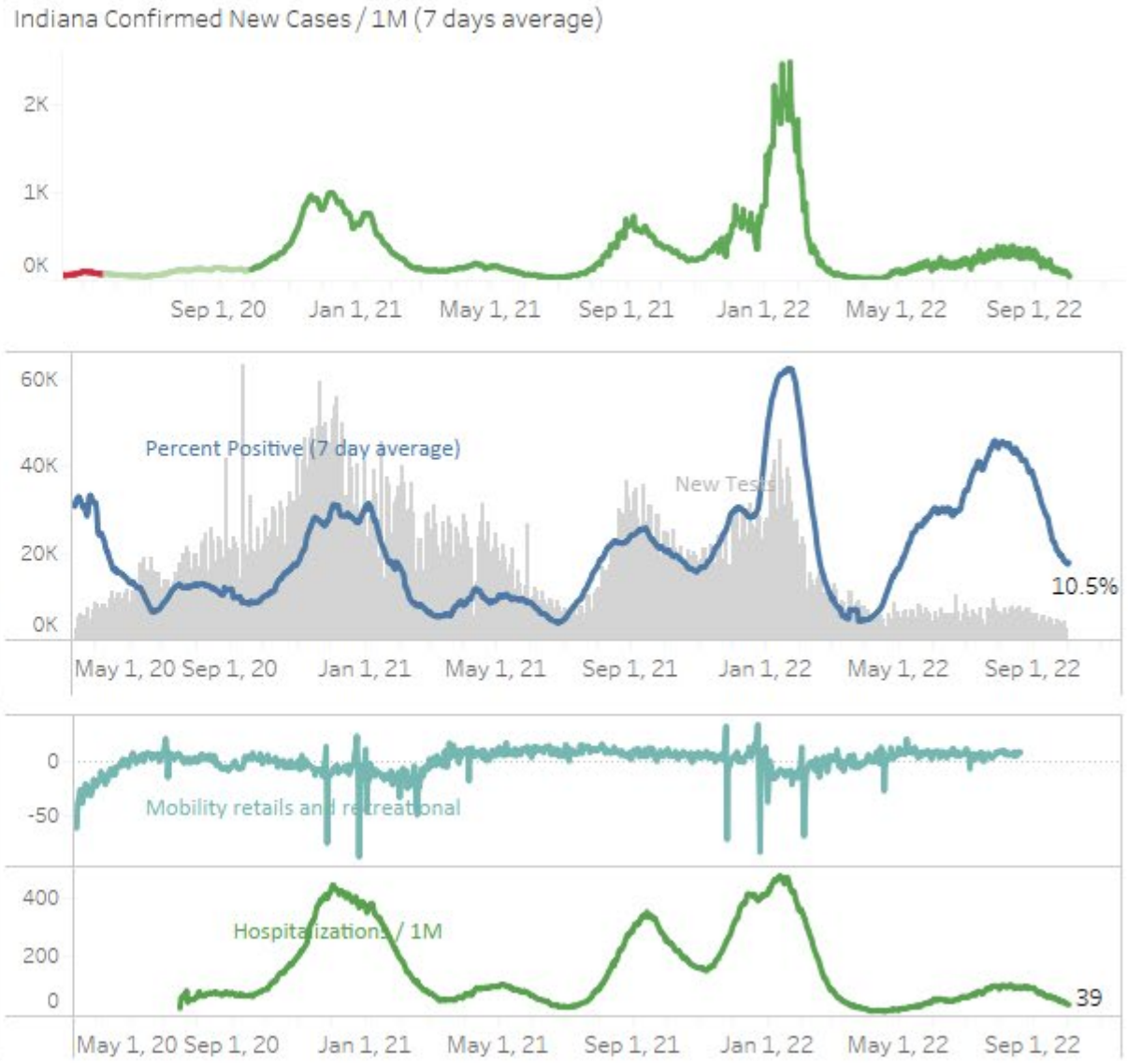


Sources: Hause AM, Marquez P, Zhang B, et al. COVID-19 mRNA Vaccine Safety Among Children Aged 6 Months–5 Years — United States, June 18, 2022–August 21, 2022. MMWR Morb Mortal Wkly Rep 2022;71:1115–1120. DOI: http://dx.doi.org/10.15585/mmwr.mm7135a3

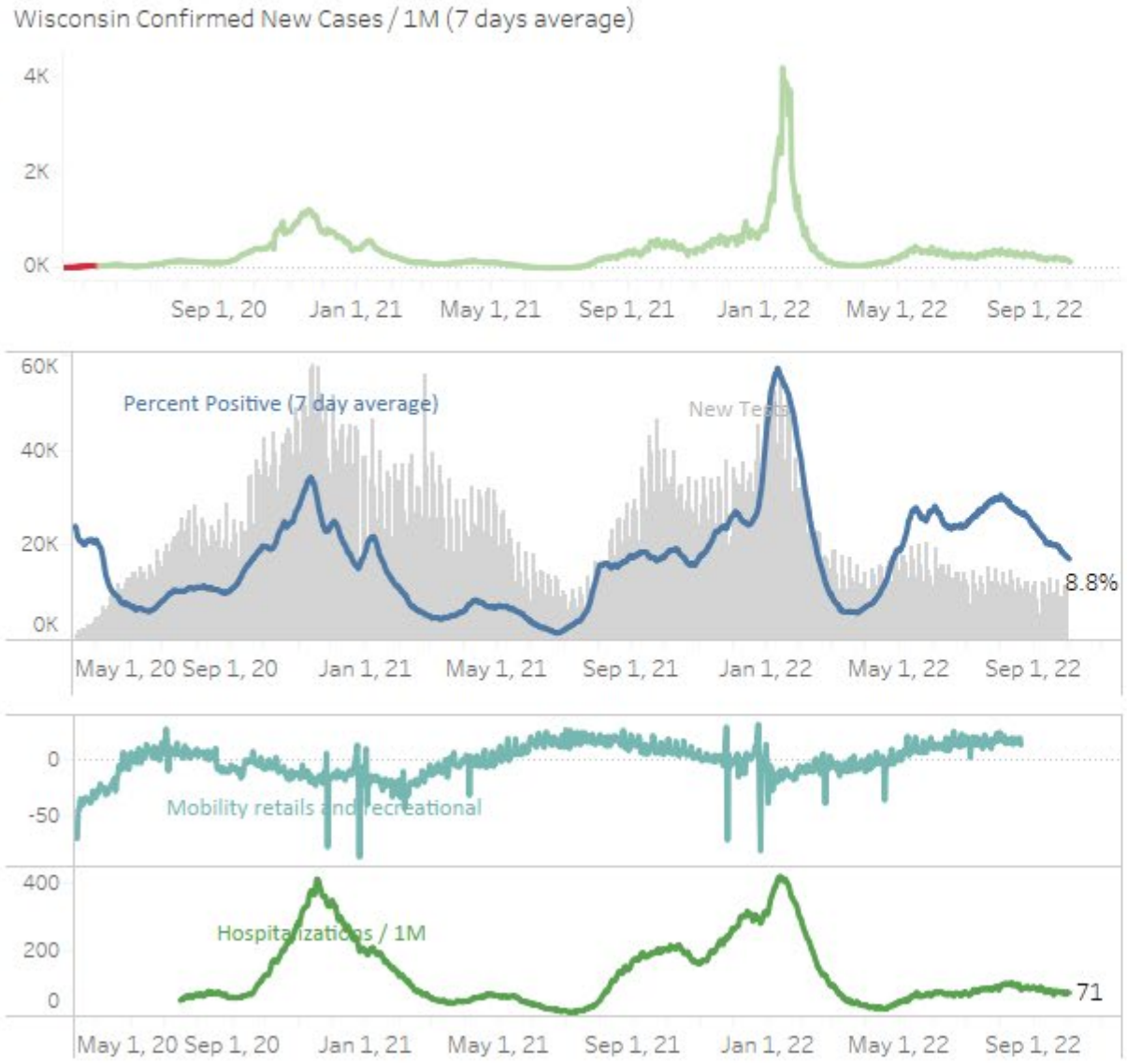
APPENDIX

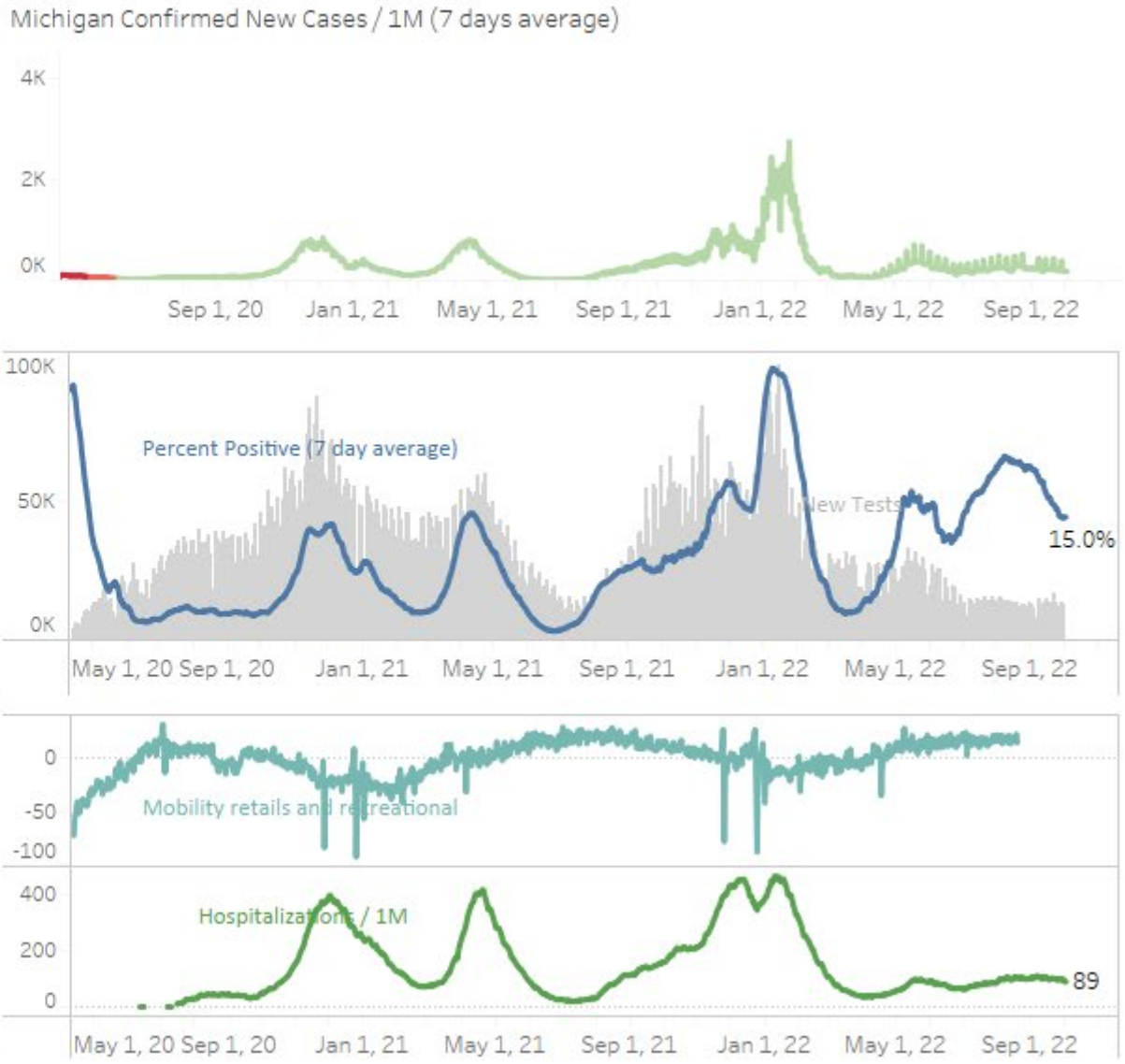
Ohio, Indiana



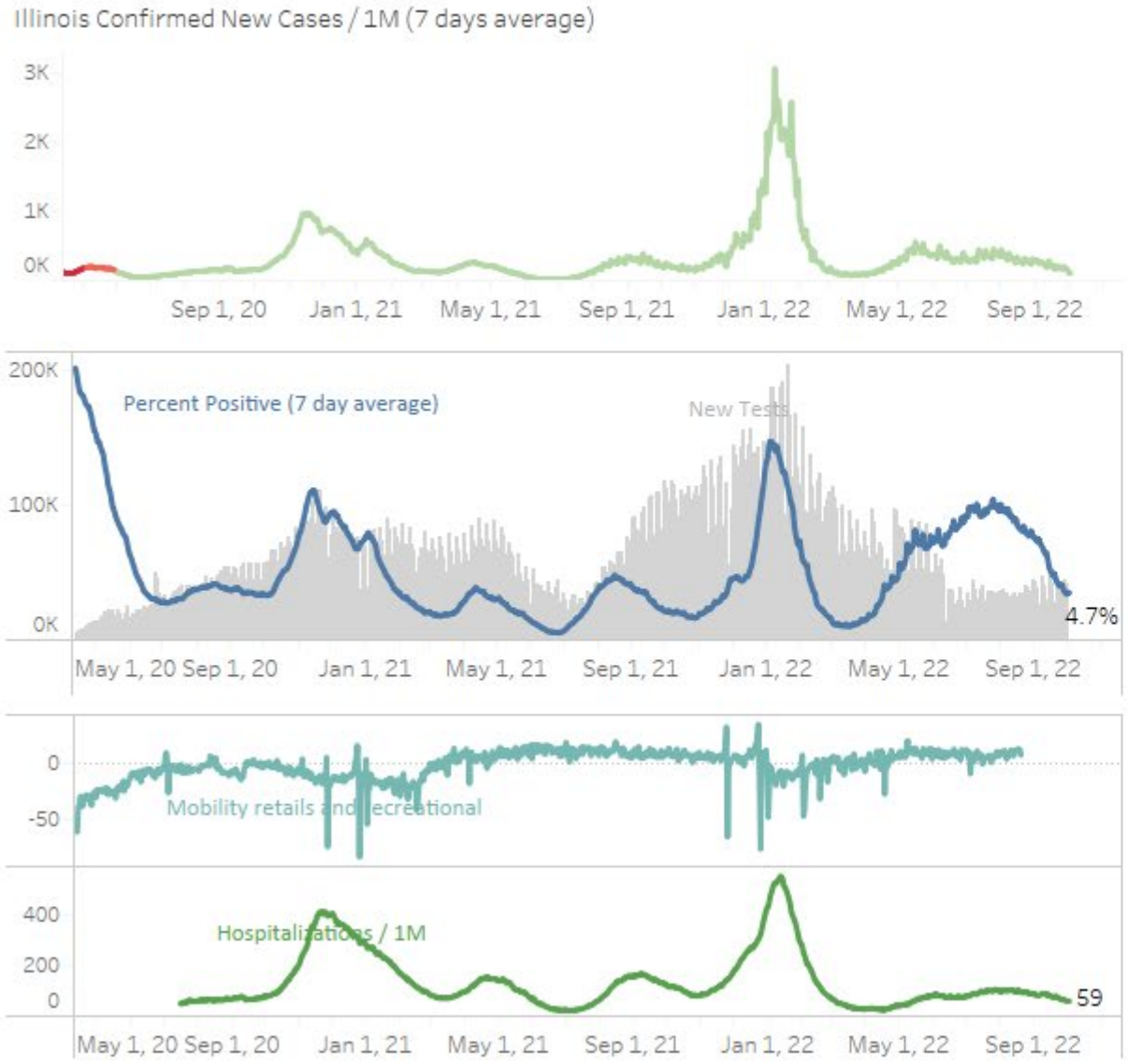


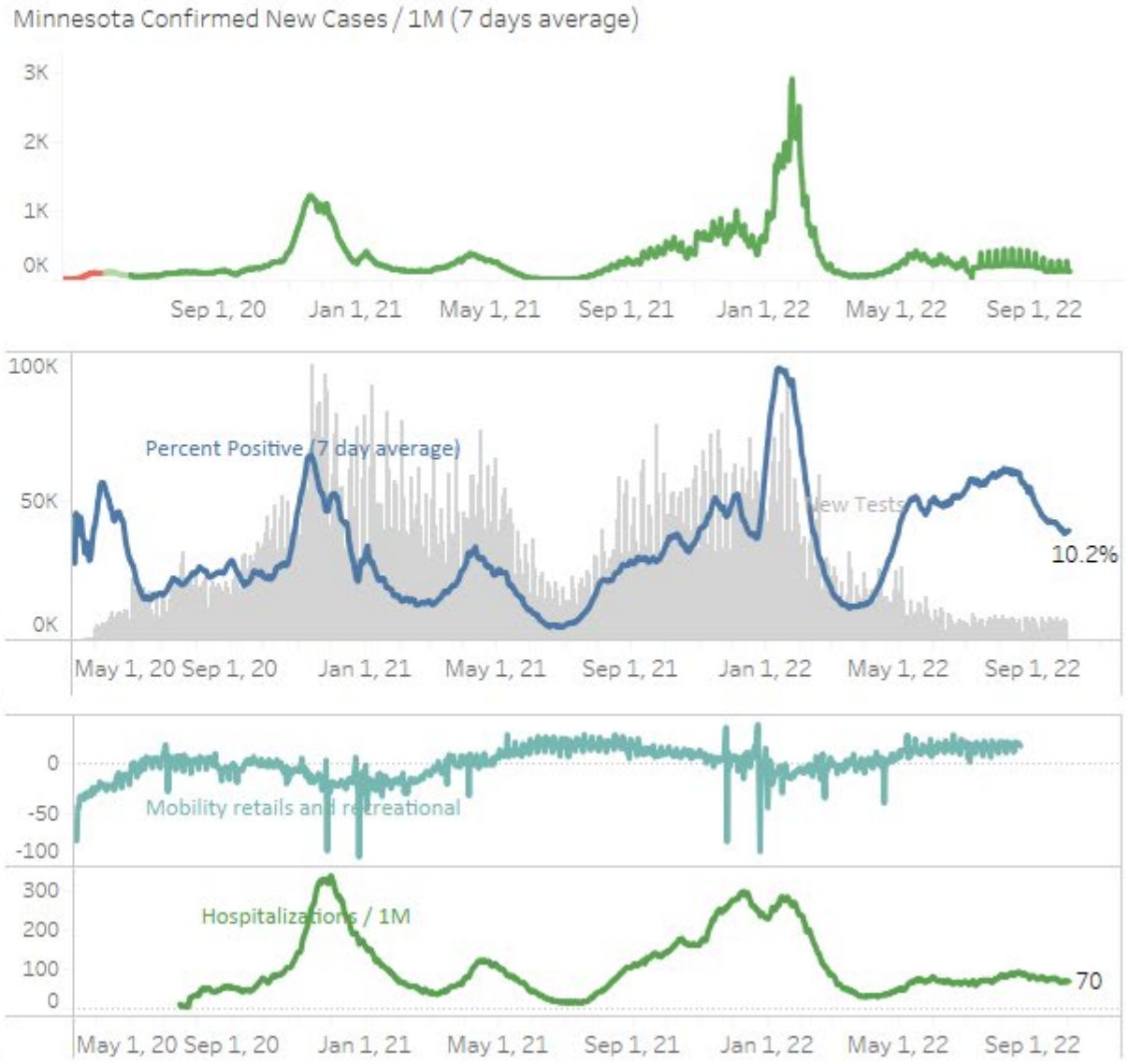
Wisconsin, Michigan





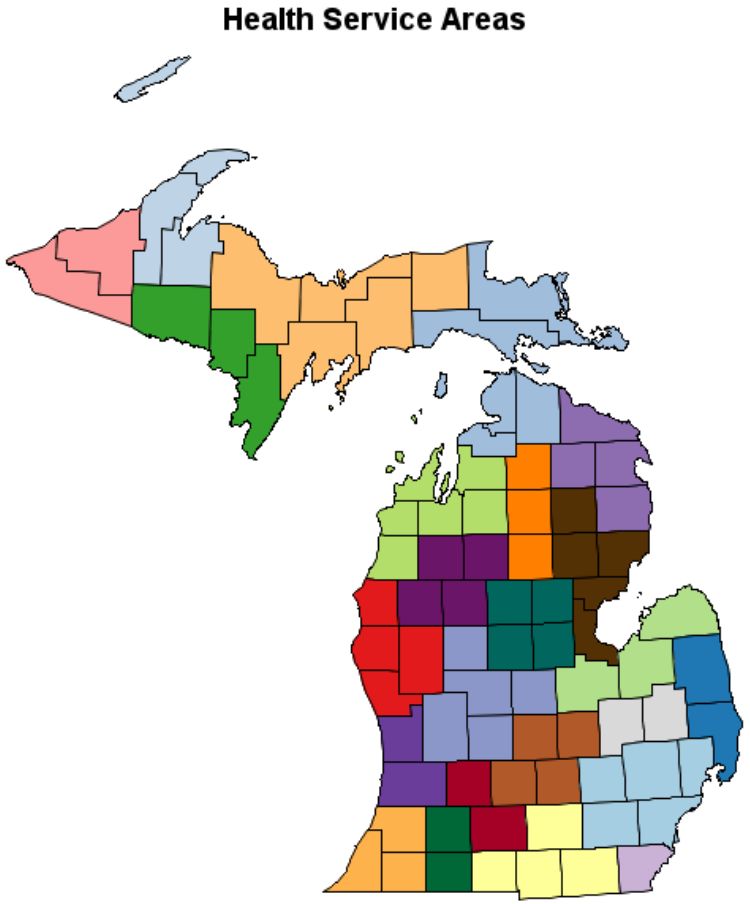
Illinois, Minnesota





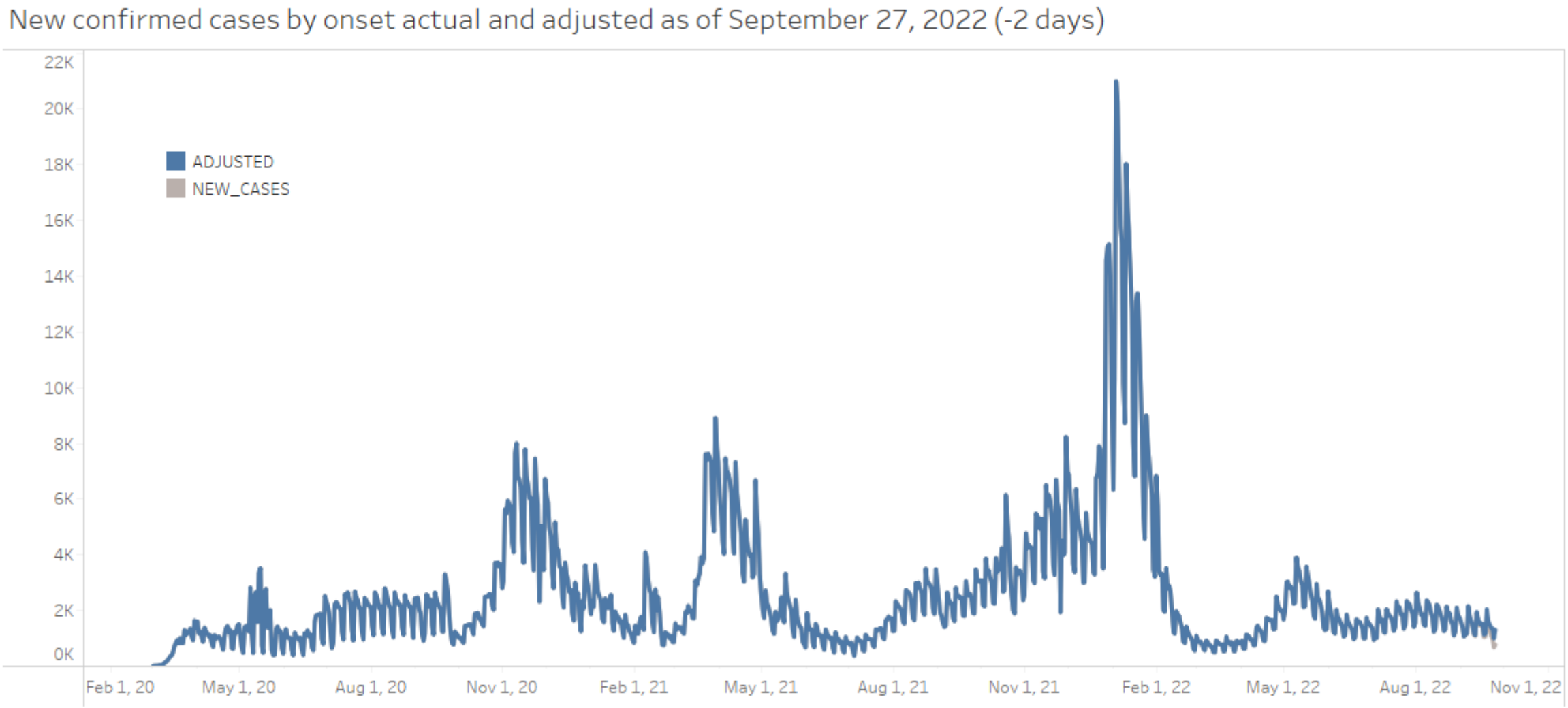
CDC COVID-19 Community Levels are defined by County Case Rates and Health Service Area (HSA) Hospitalizations

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%

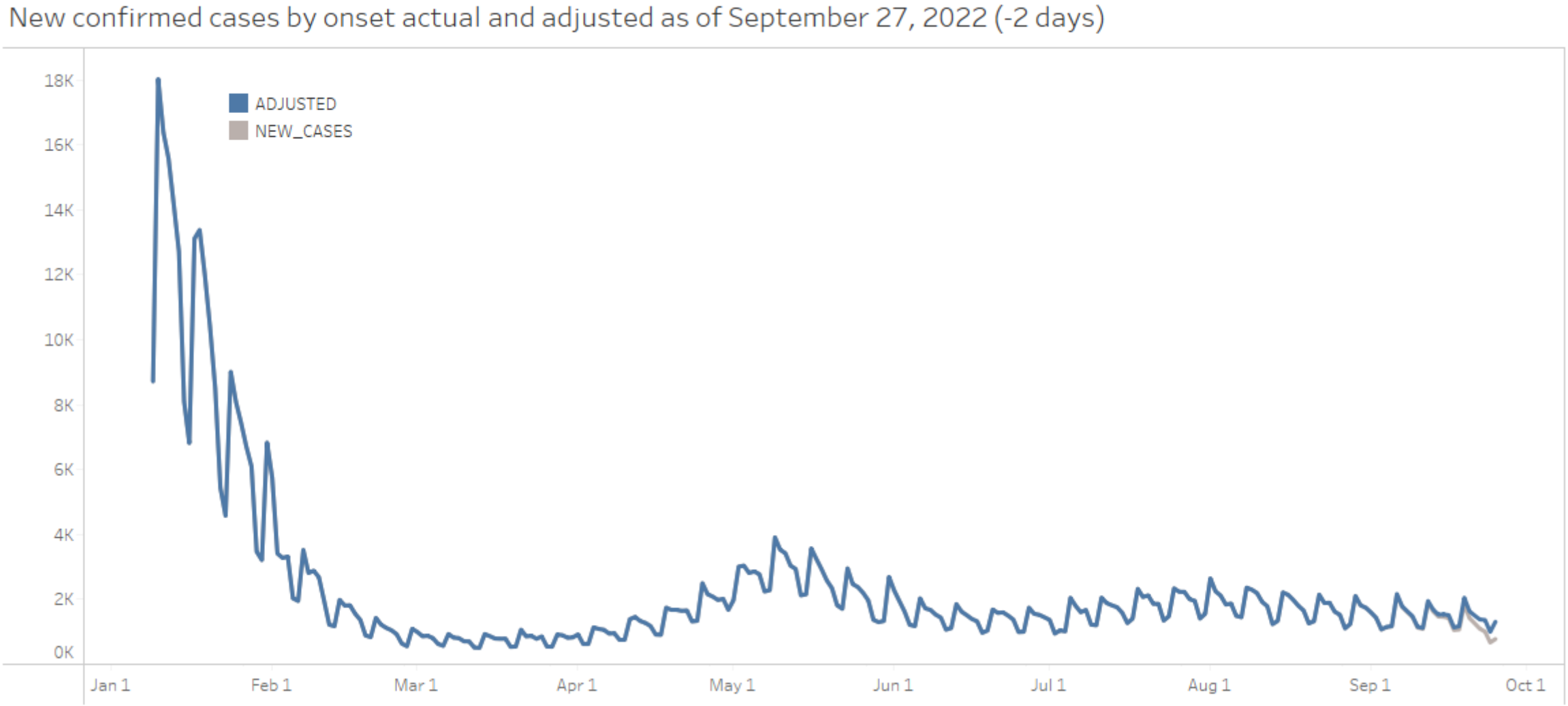


Source: CDC COVID-19 Community Levels https://www.cdc.gov/coronavirus/2019-ncov/science/community-levels.html

Adjusted new cases by on-set

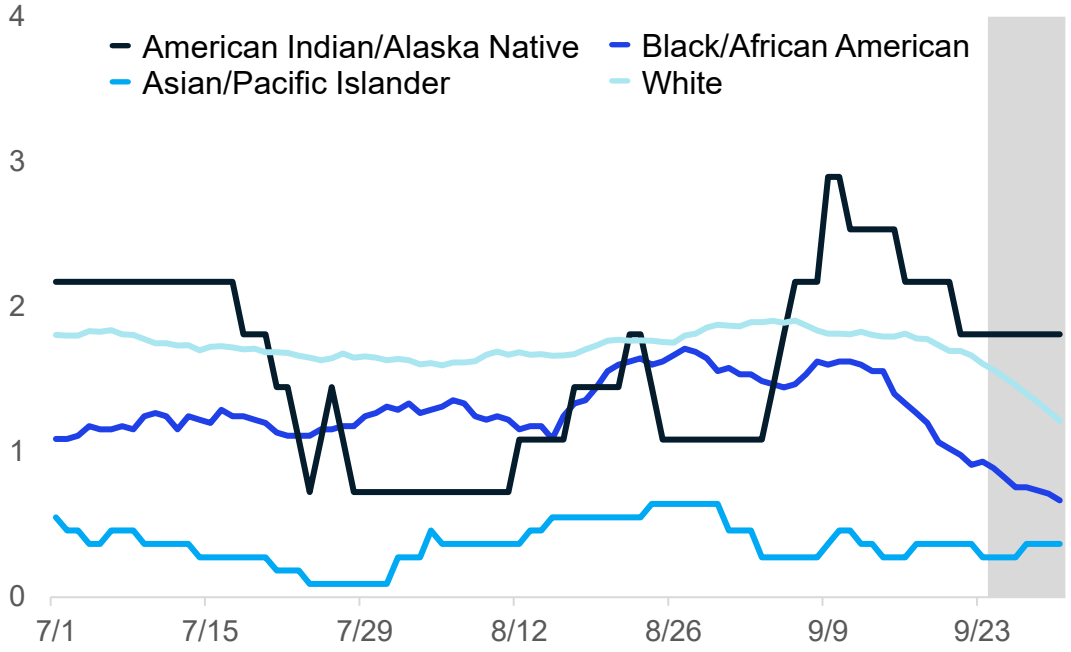


Adjusted new cases by on-set, recent trends

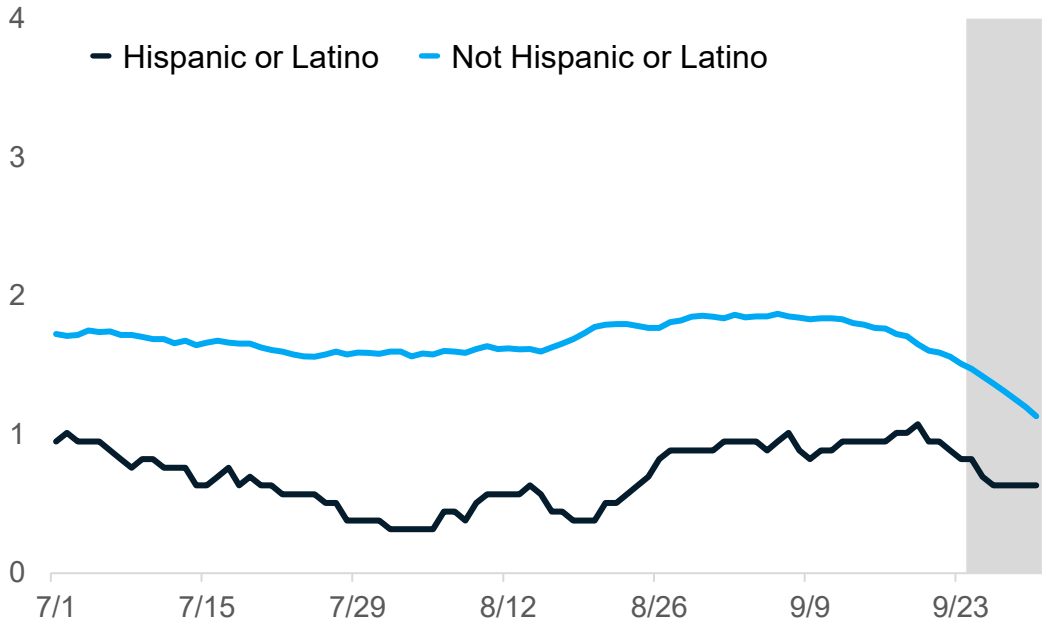


Daily average deaths per million people by race and ethnicity have plateaued

Average daily deaths per million people by race



Average daily deaths per million people by ethnicity



- Deaths are lagging indicator of other metrics
- Currently, the American Indian/Alaska Native population has the highest death rate (1.81 deaths/million)

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

COVID-19 vaccines are now available for ages **6 months and up!**

Both the Pfizer and Moderna COVID-19 vaccines are now authorized and recommended for children 6 months and older. Everyone 5 years and older should also get an age-appropriate COVID-19 booster, when eligible.

More than **4,000** providers across Michigan can administer the COVID-19 kids vaccine, including:

- Family physicians and pediatricians
- Some pharmacies (ages 3+)
- Local health departments and federally qualified health centers
- Urgent cares (ages 5+)

MDHHS
Michigan Department of Health & Human Services

For more information, visit Michigan.gov/KidsCOVIDvaccine or talk to a health care provider.