March 8, 2021

COVID-19

BY THE NUMBERS: COVID-19 IN MONTANA & SURROUNDING AREAS

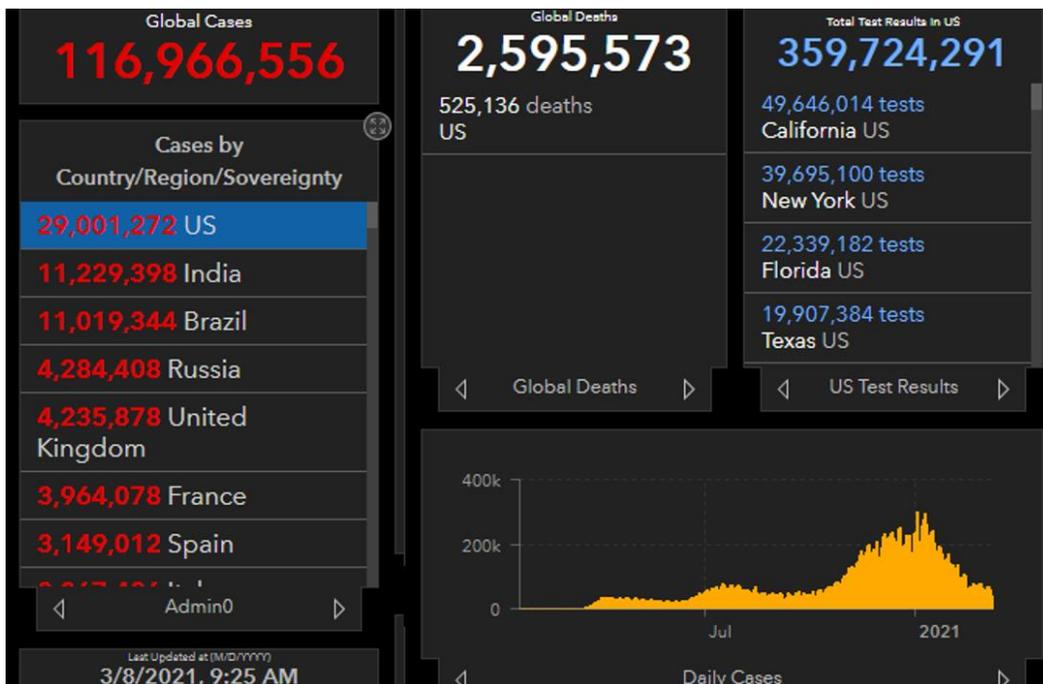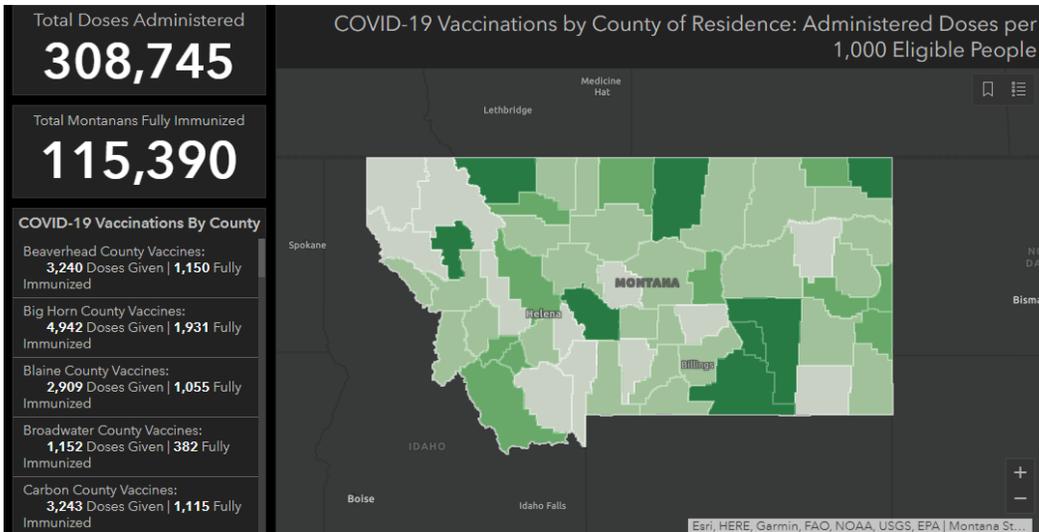### 03 /02/2021 through 03/08/2021

68 ▼   Down from 77

COVID-19 Hospitalizations
7 Day Average

Total Deaths / Recovered Cases
3/7/2021

SD - 1,900 / 113,589
ID - 1,879 / 172,931
ND - 1,479 / 100,391
MT - 1,381 / 100,959
WY - 682/ 54,764

Ranked by highest # of total deaths

New Daily Cases
7 Day Average
Ranking in Region

1. WA - 678	4. **MT - 144**
2. ID - 257	5. ND - 83
3. SD - 166	6. WY - 74*

*5 Day Averge (no data Mar. 6-7)

1,640 ▼   Down from 1,843

Active Daily Cases
7 Day Average

3 ▲   Up from 2

Daily Death Rate
7 Day Average

MT Active Cases

07/06/2020 - 03/082021

Source: Montana COVID-19 Dashboard (Updated 10:00 a.m.)

REPORTED CASES	
Montana *New last 7 days: 956 (+less than 0.5% avg. growth per day)* *Active Cases: 1,601 (-8)* *Recovered: 97,977 (+940)* *Hospitalizations, Total: 4,630 (+46)* *Hospitalizations, Active: 63 (-5)*	**100,959**

Deaths: 1,381 (last 7 days: +25) Source: <u>Montana COVID-19 Dashboard</u> (Updated 10:00 a.m.)	
United States *New last 7 days: 391,627 (+less than 0.5% avg. growth per day)* Source: <u>Johns Hopkins CSSE Global Outbreak Dashboard</u>	**29,001,272**
WA	**344,532**
ID	**172,931**
WY	**54,764**
ND	**100,391**
SD	**113,589**

See the latest Montana reports on *COVID-19 in Schools*, *COVID-19 in LTC and Assisted Living*,
***Hospital Occupancy and Capacity* and the latest *State COVID-19 Epi Profile*.**
Source: **State of Montana DPHHS COVID-19 Demographics Webpage**

Total Doses Administered
308,745

Total Montanans Fully Immunized
115,390

COVID-19 Vaccinations By County

Beaverhead County Vaccines:
3,240 Doses Given | **1,150** Fully Immunized

Big Horn County Vaccines:
4,942 Doses Given | **1,931** Fully Immunized

Blaine County Vaccines:
2,909 Doses Given | **1,055** Fully Immunized

Broadwater County Vaccines:
1,152 Doses Given | **382** Fully Immunized

Carbon County Vaccines:
3,243 Doses Given | **1,115** Fully Immunized

COVID-19 Vaccinations by County of Residence: Administered Doses per 1,000 Eligible People

Esri, HERE, Garmin, FAO, NOAA, USGS, EPA | Montana St…

Global Cases
116,966,556

Cases by Country/Region/Sovereignty

29,001,272 US
11,229,398 India
11,019,344 Brazil
4,284,408 Russia
4,235,878 United Kingdom
3,964,078 France
3,149,012 Spain

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Last Updated at (M/D/YYYY)
3/8/2021, 9:25 AM

Global Deaths
2,595,573

525,136 deaths US

Global Deaths

Daily Cases

Total Test Results in US
359,724,291

49,646,014 tests California US
39,695,100 tests New York US
22,339,182 tests Florida US
19,907,384 tests Texas US

US Test Results

OPERATIONS

Updated analysis of COVID-19 cases in Montana. Montana DPHHS has released an updated epidemiological review of COVID-19 cases in the state. The report is based on COVID-19 case information available as of February 26.

Researchers examine a few delayed skin reactions after Moderna vaccine. A research letter published last week in the New England Journal of Medicine looks at delayed injection-site skin reactions to the Moderna COVID-19 vaccine four to

11 days after 12 people received the first dose. Delayed injection-site reactions occurred in 0.8% of the 30,420 participants in a phase 3 clinical trial of the vaccine, the study notes. The authors hope the letter encourages additional reporting of delayed reactions in order to promote better understanding of reactions that do occur and better acceptance of the vaccines by the public.

CDC call March 11 on using telehealth for COVID-19 vaccine planning and monitoring. The CDC will host a March 11 call for clinicians on using telehealth to augment COVID-19 vaccine planning and monitoring. CDC will post slides on the webpage before the call and a recording a few hours after it ends for those unable to attend.

U.S. to purchase at least 100K doses of Lilly antibody cocktail. The federal government has agreed to purchase at least 100,000 doses of the combination monoclonal antibody therapy bamlanivimab and etesevimab, Eli Lilly and Company has announced. The FDA last month issued an EUA to administer the antibodies together to patients with mild-to-moderate COVID-19 at high risk for progressing to severe disease but not hospitalized or on oxygen therapy.

Study: COVID-19 convalescent plasma unlikely to benefit certain ED patients. The National Institutes of Health has halted a clinical trial evaluating the effectiveness of COVID-19 convalescent plasma in emergency department patients with mild-to-moderate COVID-19 symptoms and at least one risk factor for severe COVID-19 after an independent board concluded from the data that the treatment was unlikely to help such patients. Forty-seven U.S. hospital EDs were participating in the study, which found no significant difference in outcomes for participants who received COVID-19 convalescent plasma or a placebo.

PLANNING

HHS requests hospital data on COVID-19 vaccinations. HHS' latest data reporting guidance released on Tuesday, Jan. 12 here.

HHS data reporting platform - Single data entry fulfills state and federal requirements. MHA has purchased a new HHS Data Reporting Platform with COVID-19 grant funding. This creates a single, secure data entry point to fulfill both state and federal requirements, including state PPE resource allocation and HHS Teletracking mandates. This single-entry system is especially critical with

CMS' rules that require such reporting as a Condition of Participation for Medicare and Medicaid. Hospitals will face possible termination of Medicare and Medicaid payments if unable to correct reporting deficiencies. See the complete details on the new platform [here](#).

As of September 8, 2020 hospitals should utilize EMResource for statewide bed availability, PPE and Remdisivir data, as well as, all TeleTracking data points, including HHS lab testing. Upon entering HHS data into EMResource, Juvare will automatically upload data to TeleTracking on behalf of your facility daily. Facilities may continue entering their own data into TeleTracking if they choose. All laboratories conducting COVID-19 testing and reporting patient-specific results – including hospital labs, nursing homes, and other facilities conducting testing for COVID-19 – will be required to comply. If a laboratory does not report the required information, CMS will impose a civil monetary penalty in the amount of $1,000 a day for the first day, and $500 for each subsequent day.

As of October 1, 2020 long-term care facilities must report all PPE and bed reporting to EMResources. The previous weekly is inactive on October 1, 2020. Facilities that need assistance should email hppcoordinators@mtha.org.

For questions, please contact your [Regional Coordinator](#).

LOGISTICS

FDA: Some respirators, other devices displaying misleading certificates. The FDA has [called on](#) 25 firms to stop producing and issuing so-called "FDA registration certificates" to mask, respirator, face shield and other medical device makers and distributors that create the impression that FDA has approved or authorized their products. FDA does not issue registration certificates to device makers that [register or list](#) their products with the agency. Healthcare providers can check FDA's [EUA lists](#) and [medical device databases](#) for authorized or approved devices, and [report](#) suspected misuse of registration certificates.

Federally funded telemedicine program offers hospitals critical care support. The National Emergency Tele-Critical Care Network offers hospitals and health systems needing clinical support to care for seriously ill COVID-19 patients free telehealth access to critical care physicians, nurses and other clinical experts. NETCCN received funding from the CARES Act to expand access to its virtual

critical care network through enabled mobile devices such as cell phones, tablets and computers. For more information and to request support, visit the NETCCN website.

Hackers target on-premises Microsoft Exchange server vulnerabilities. Cyber attackers are using Microsoft Exchange Server vulnerabilities to access Exchange server email accounts on an organization's premises and install malware to facilitate long-term access to victim environments, the Microsoft Threat Intelligence Center announced last week. It suspects a potentially state-sponsored group out of China called HAFNIUM is behind the campaign. According to Microsoft, Exchange Online is not affected.

John Riggi, AHA senior advisor for cybersecurity and risk, said, "This is another example, like the SolarWinds breach, of what is believed to be a sophisticated nation-state-supported actor seeking to compromise ubiquitous and fundamental third-party software services as a means for widespread penetration of entire sectors of the U.S. economy. It is also important to note for the healthcare sector that the HAFNIUM cyber adversary is specifically targeting infectious disease research, among other data. This is consistent with documented criminal cases of the Chinese government's aggressive pursuit of U.S. medical research and innovation."

For more information on nation-state cyber threats targeting healthcare or other cyber issues, contact Riggi at jriggi@aha.org.

Submit PPE needs to DES coordinator in order to ensure allocation. Until further notice, healthcare organizations MUST submit needs to their local DES coordinator in order to receive an allocation of emergency PPE.

COMMUNICATIONS

Call recordings and webinar playbacks. Missed a call or webinar promoted in MHA's daily COVID-19 Call & Webinar Alert? Many are recorded, and are posted here once available.

COVID-19 Resource Library. MHA has built a library of helpful resources and sample material from other hospitals, healthcare organizations and states in their response to COVID-19.

HHS hospital-specific COVID-19 questions: HospitalCOVID19@hhs.gov

SITREP Archive. Daily Situation Reports archived here.

State of Montana COVID-19 Hotline: 1-888-333-0461
Montanans can also email questions to covid19info@mt.gov. State public health officials will be responding to inquiries from 8 a.m. to 5 p.m. Monday to Friday.

MHA Incident Management Team: esf8@mtha.org

REFERENCE LINKS
GENERAL

Contact lists and general sources of information on a wide range of COVID-19-related issues

MHA COVID-19 General Resources page

CLINICAL OPERATIONS

Resources on infection prevention and control, EMS operations, telehealth operations and care for specific populations from federal and state resources

MHA COVID-19 Clinical Operations page

LONG-TERM CARE & RETIREMENT COMMUNITIES

CDC and CMS resources specific to maintaining safe conditions in long-term care and retirement communities
MHA COVID-19 Long-Term Care & Retirement Communities page

SUPPLY CHAIN RESOURCES

Resources from AHRMM, AHA, Intalere, CDC and other sources on sourcing, conserving and properly using PPE

MHA COVID-19 Supply Chain Resources page

WORKFORCE PROTECTION & SUPPORT

MT DLI, CDC, OSHA and NIH toolkits, FAQs and other resources to protect employees and allow staff to return to work

MHA COVID-19 Workforce Protection & Support page

COMMUNITY MITIGATION STRATEGIES

CDC resources on community mitigation strategies

MHA COVID-19 Community Mitigation Strategies page

FINANCE & ADMINISTRATION

Guidance, fact sheets and other resources on regulatory waivers and flexibilities in addition to catalogued financing information related to the CARES Act and other COVID-19 funding assistance

MHA COVID-19 Finance & Administration page

COMMUNICATIONS

Archive of MHA COVID-19 related communications as well as sample communications documents, toolkits and other resources from state and national levels

MHA COVID-19 Communications page

TESTING

FAQs, recommendations and other CDC, FDA and MT DPHHS resources related to COVID-19 testing

MHA COVID-19 Testing page

PLANNING

Best practices and planning documents from CDC, facilities on the front lines and MT DPHHS

MHA COVID-19 Planning page

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