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State Epidemiologist and Environmental Health Officer
COVID-19 Situation Update: February 3, 2022



COVID-19: Situation Around The World

COVID-19 Dashboard by the Center for Systems Science and Engineering (CSSE) at Johns Hopkins University (JHU)

Last Updated at (M/D/YYYY)
2/2/2022, 2:21 PM

Total Cases
383,803,710

Total Deaths
5,695,975

Total Vaccine Doses Administered
9,967,641,454

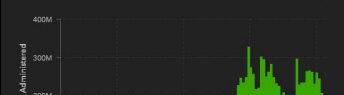
Cases | Deaths by Country/Region/Sovereignty

Country/Region/Sovereignty	28-Day Cases	28-Day Deaths	28-Day Vaccine Doses Administered
US	28-Day: 18,205,477 58,315	Totals: 75,542,436 893,257	
France	28-Day: 8,986,437 6,756	Totals: 43,997,824 132,583	
India	28-Day: 6,612,527 15,424	Totals: 61,830,888 497,975	
Italy	28-Day: 4,549,475 8,880	Totals: 11,235,745 147,320	
United Kingdom	28-Day: 3,821,108 7,987	Totals: 17,631,292 157,938	
Brazil	28-Day: 3,306,529 8,702	Totals: 25,634,781 628,356	
Spain	28-Day: 3,253,840 3,944	Totals: 10,125,348 93,857	
Germany	28-Day: 2,916,032 5,246	Totals: 10,255,724 118,219	
Argentina			

28-Day Cases
86,406,334

28-Day Deaths
227,985

28-Day Vaccine Doses Administered
652,578,054



As of 2-2-2022. Available at

<https://gisanddata.maps.arcgis.com/apps/opsdashboard/index.html#/bda7594740fd40299423467b48e9ecf6>

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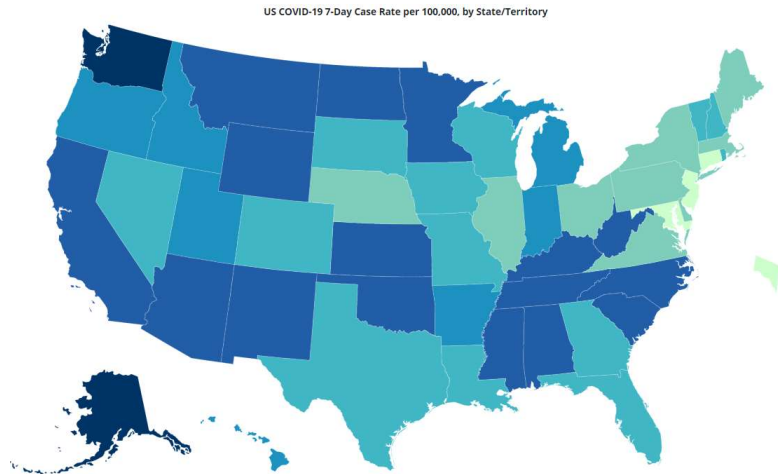
Global Map: <https://www.cdc.gov/coronavirus/2019-ncov/locations-confirmed-cases.html>.

This week, there are over 383 million cases and there are 5,695,975 deaths around the world.



COVID-19: Situation in the US

- Total cases: 75,302,383



As of 2-2-2022. Available at https://covid.cdc.gov/covid-data-tracker/#cases_casesper100klast7days

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Last week:

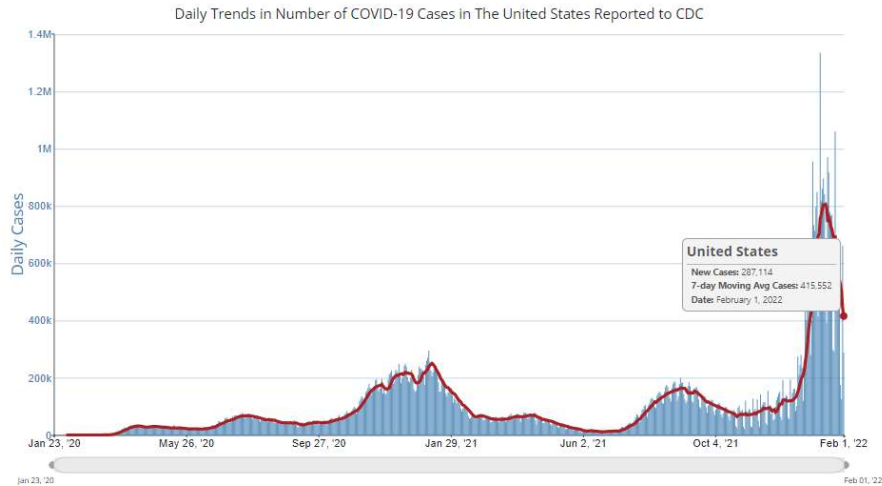
Total cases: 72,310,575 (over 72 million)

As of yesterday:

Total cases: 75,302,383



COVID-19: Situation in the US



As of 2-2-2022. Available at https://covid.cdc.gov/covid-data-tracker/#trends_dailytrendscases

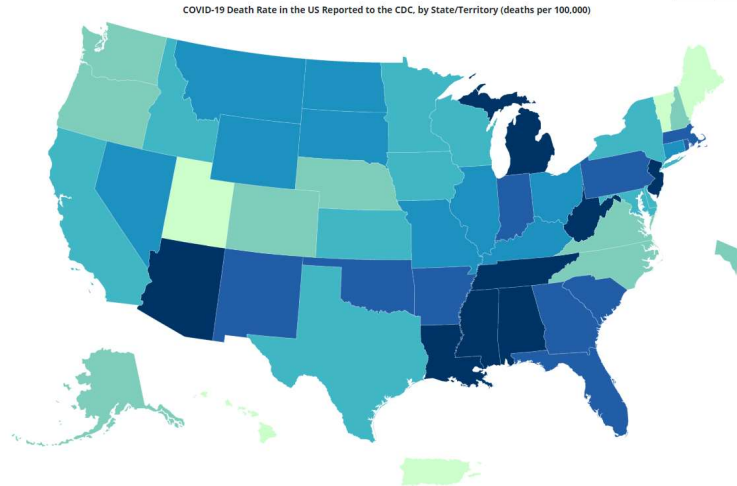
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The 7 day average number of cases in the US is 415,552 cases per day. That is down a from about 627,294 cases per day last week.



COVID-19: Situation in the US

- Total deaths: 888,784



As of 1-26-2022. Available at https://covid.cdc.gov/covid-data-tracker/#cases_deathsper100k

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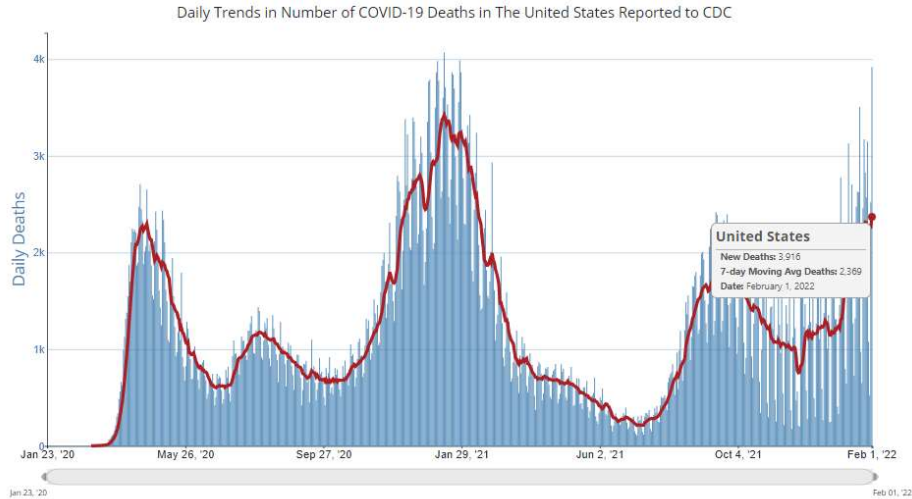
Last week:

Total deaths since the beginning of the pandemic: 870,195

As of yesterday: 888,784



COVID-19: Situation in the US



As of 2-2-2022. Available at https://covid.cdc.gov/covid-data-tracker/#trends_dailytrendscases

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The 7 day average number of deaths in the US is 2,369 deaths per day which is up slightly from last week at 2,246.



COVID-19: Situation in Kansas

Kansas COVID-19: Overview

COVID-19 Cases	Hospitalizations	Statewide Deaths	MIS-C*
739,622	18,361	7,577	22

Data are preliminary and subject to quality improvement and quality assurance validation.
 *MIS-C: Multisystem Inflammatory Syndrome in Children (MIS-C) associated with COVID-19.

Last updated: 2/2/2022 at 9:00am. There were 8,952 new cases, 41 new deaths, and 123 new hospitalizations reported since Monday, 1/31/2022.

Available at: [KDHE COVID-19 | Official Website \(kdheks.gov\)](https://www.kdheks.gov/covid-19)

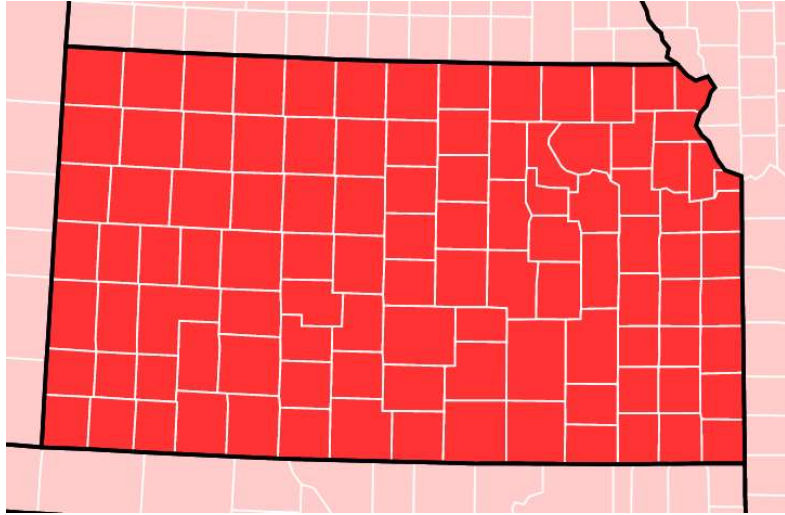
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As of yesterday, in Kansas, we had 739,622 cases and 7,577 deaths statewide. That’s an increase of 29,784 cases and 189 deaths reported since last week.

There were 8,952 new cases and 41 new deaths reported between Monday 1/31/2022 and Wednesday 2/2/2022.



COVID-19: Situation in Kansas



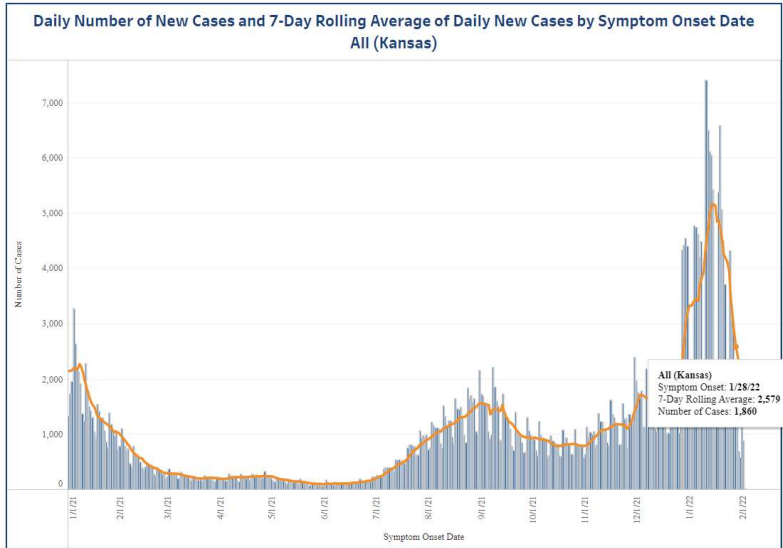
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Looking at the CDC Community Transmission Map between Wed Jan 26 2022 - Tue Feb 01 2022 every county in KS was in red indicating high transmission.



COVID-19: Situation in Kansas

Daily Number of Cases and Deaths by County

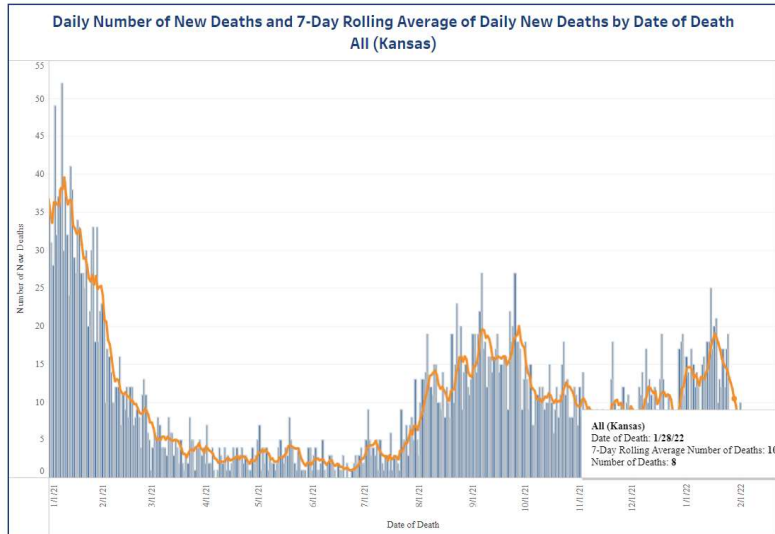


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If you look at the 7 day average number of cases based on symptom onset date, starting with January 22 to January 28, our 7 day rolling average is 2,579 cases per day. Last week we were at 3,953 cases per day.



COVID-19: Situation in Kansas



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If you look at the 7 day average number of deaths based on the date of death, starting with January 22 to January 28, our 7 day rolling average is 10 deaths per day. Last week we were at 11 deaths per day.



COVID-19: Situation in Kansas: Outbreaks

Last updated: 2/2/2021 at 9:00 AM. Cluster Summary data is updated every Wednesday.

Active COVID-19 Clusters			
Clusters	Cases	Hospitalizations	Deaths
387	8,454	93	74

All COVID-19 Clusters			
Clusters	Cases	Hospitalizations	Deaths
3,444	56,256	2,421	2,498

- 56,256 outbreak-related cases/739,622 cases (7.6%)
- 2,421 outbreak-related hospitalizations/18,361 total hospitalizations (13.2%)
- 2,498 outbreak-related deaths/7,577 total deaths (33.0%)

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Moving on to outbreaks:

As of late Tuesday night, we had 3,444 outbreaks identified across the state (since the beginning of the pandemic). This week we have 387 active clusters. That is up from 349 last week.

Our percentage of outbreak related cases is 7.6%, outbreak-related hospitalizations is about 13.2% and outbreak-related deaths is about 33.0%.



COVID-19: Situation in Kansas: Outbreaks

COVID-19 Cluster Cases by Type

Type	Clusters	Cases	Hospitalizations	Deaths
College or University	3	99	0	0
Corrections	20	1,659	1	1
Daycare	34	146	0	0
Government	4	26	0	0
Group Living	19	662	7	1
Healthcare	11	202	6	3
Long term care facility	219	4,264	77	69
Meat Packing	1	7	0	0
Private Business	14	221	0	0
School	56	1,120	2	0
Sports	6	48	0	0
Total	387	8,454	93	74

Sort by Cluster Type
Active ▾

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We currently have 34 active outbreaks in daycares (up from 23 last week), 20 in corrections, 19 in group living, 11 in healthcare settings, and 219 active outbreaks in LTCFs (up from 219 last week). We also have 14 in private businesses and 56 in schools (similar to last week).

Don't forget, if you are interested in seeing the list of named locations with 5 or more cases within the last 14 days, you can go to the dashboard.



COVID-19: Literature

Morbidity and Mortality Weekly Report (MMWR)

CDC



SARS-CoV-2 Infection and Hospitalization Among Adults Aged ≥ 18 Years, by Vaccination Status, Before and During SARS-CoV-2 B.1.1.529 (Omicron) Variant Predominance — Los Angeles County, California, November 7, 2021–January 8, 2022

Early Release / February 1, 2022 / 71

Phoebe Danza, MPH¹; Tae Hee Koo, MPH¹; Meredith Haddix, MPH¹; Rebecca Fisher, MPH¹; Elizabeth Traub, MPH¹; Kelsey OYong, MPH¹; Sharon Balter, MD¹ ([View author affiliations](#))

[View suggested citation](#)

Summary

What is already known about this topic?

COVID-19 vaccines are highly effective against severe SARS-CoV-2-associated outcomes, including those caused by the Delta variant.

What is added by this report?

As of January 8, 2022, during Omicron predominance, COVID-19 incidence and hospitalization rates in Los Angeles County among unvaccinated persons were 3.6 and 23.0 times, respectively, those of fully vaccinated persons with a booster, and 2.0 and 5.3 times, respectively, those among fully vaccinated persons without a booster. During both Delta and Omicron

Article Metrics

Altmetric:



Citations:

Available at: https://www.cdc.gov/mmwr/volumes/71/wr/mm7105e1.htm?s_cid=mm7105e1_w

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November 7, 2021–January 8, 2022, incidence and hospitalization by COVID-19 vaccination status and variant predominance.

For the 14-day period ending December 11, 2021, the last week of Delta predominance, the incidence and hospitalization rates among unvaccinated persons were 12.3 and 83.0 times, respectively, those of fully vaccinated persons with a booster and 3.8 and 12.9 times, respectively, those of fully vaccinated persons without a booster.

These rate ratios were lower during Omicron predominance (week ending January 8, 2022), with unvaccinated persons having infection and hospitalization rates 3.6 and 23.0 times, respectively, those of fully vaccinated persons with a booster and 2.0 and 5.3 times, respectively, those of fully vaccinated persons without a booster.



COVID-19: New Training

CDC COCA Call: COVID-19 Updates: What Clinicians Need to Know About Multisystem Inflammatory Syndrome in Children

1. CDC Clinician Outreach and Community Activity (COCA) will host a webinar **Thursday, February 10 at 2:00 pm EST** to discuss CDC's surveillance of MIS-C, updated MIS-C resources for healthcare providers, research that informed those resources, and data related to COVID-19 vaccination and MIS-C. Call information is below:

- Weblink: <https://www.zoomgov.com/j/1606170121?pwd=TDFUL3dYZm01TVY3bWRSK3FtUS9OQT09>

Telephone: (660) 254-5252 or (646) 828-7666 or (669) 216-1590 or (551) 285-1373

Webinar ID: 161 617 0121

Passcode: 731625

Post-Event Recording: https://emergency.cdc.gov/coca/calls/2021/callinfo_021022.asp

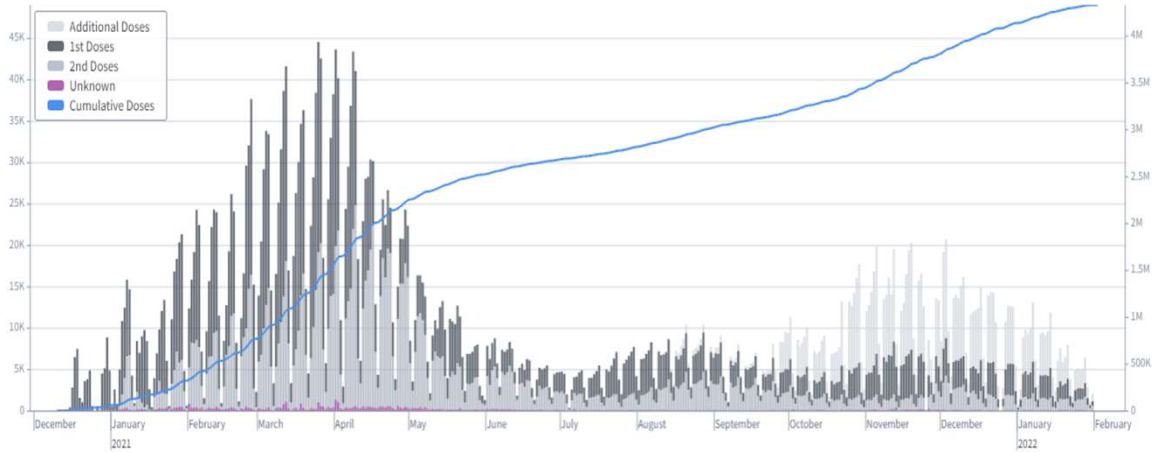
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Phil Griffin, Director, Disease Control & Prevention
Immunization Update
February 3, 2022



Vaccination Trends



Generated by Tiberius on 02/2/2022

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Order Vaccine As Needed

Avoid missed opportunities!

Minimum order is 1 vial of any vaccine through direct shipment form KDHE

How to receive vaccine: To place an order for vaccine for delivery next week, please complete the following [order form](#) as soon as possible and no later than **Wednesday 5pm CT**.

Please keep Vaccine Finder current.

This impacts vaccine.gov and visibility of the vaccine you have available to administer in addition to ordering caps for the state.

If VaccineFinder and WebIZ inventory are not kept current, you may appear to have expired vaccine which may create difficulties in filling orders due to poor vaccine management.

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FDA Approves Moderna COVID-19 Vaccine

- The Food and Drug Administration (FDA) approved the Moderna COVID-19 vaccine <https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-takes-key-action-approving-second-covid-19-vaccine>
 - The approved vaccine is branded as “Spikevax”
 - It is unknown when Spikevax will be available for distribution
 - Same formulation as the FDA authorized Moderna COVID-19 vaccine
 - Is interchangeable with Moderna COVID-19 vaccine
- Spikevax is indicated for those 18 years and older, as a:
 - Primary series doses 1 and 2 dosage = 0.5mL
 - Additional primary doses (3rd) dosage for immunocompromised persons = 0.5mL
 - Booster dosage = 0.25 mL
 - Can be used as a heterologous (mix and match) booster for those who have completed a primary series with a different COVID-19 vaccine

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Moderna Approved/Licensed

- **ACIP will meet Friday, February 4, presumably to discuss Moderna; no agenda available yet.**

- ACIP Meeting Time:
 - 9:00 am – 4:00 CT
- ACIP Agenda will appear here when posted:
 - <https://www.cdc.gov/vaccines/acip/index.html>
- ACIP Meeting Link
 - <https://video.ibm.com/channel/VWBXKBR8af4>

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Pfizer Data Submitted for < 5 years

- Pfizer has initiated a rolling submission for EUA for COVID vaccine for children 6 months – 4 years of age: [Pfizer and BioNTech Initiate Rolling Submission for Emergency Use Authorization of Their COVID-19 Vaccine in Children 6 Months Through 4 Years of Age Following Request From U.S. FDA | Business Wire](#)
 - a. FDA has scheduled a VRBPAC meeting for February 15 to discuss the Pfizer EUA application for children: [Coronavirus \(COVID-19\) Update: FDA Advisory Committee Meeting to Discuss Request for Authorization of Pfizer-BioNTech COVID-19 Vaccine for Children 6 Months Through 4 Years of Age | FDA](#)
 - b. Some media are reporting that the vaccine could be available as early at late February, assuming that FDA and CDC authorize and recommend use of the vaccine. Pfizer has previously reported that data on the 2-4 year-olds did not demonstrate vaccine effectiveness with two doses, and they are now collecting data on a third dose in this age group. The plan would (presumably) authorize and recommend use of the vaccine for two doses while waiting for data on the third dose. This strategy/plan has not been confirmed by federal officials.

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Pfizer Education

Medical Updates & Immunization Site Training for All Healthcare Providers led by Pfizer Vaccines US Medical Affairs

Goal: Educate providers and immunization staff personnel on the proper use of the Pfizer-BioNTech COVID-19 Vaccine

Current Schedule through February 2022

Tuesday's | 3pm ET

Wednesday's and Thursday's | 12p ET

To access dates and links for upcoming training sessions, please visit:

<https://www.pfizermedicalinformation.com/en-us/medical-updates>

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Pfizer Education

Session topics include:

- Introduction of the **DO NOT DILUTE/Gray Cap** formulation for individuals 12 years of age and older.
- Use of each vaccine presentation, including storage, handling, preparation, and administration for:
 - Ages 5 through 11 Years: **DILUTE BEFORE USE/Orange Cap**
 - Ages 12 Years and Older:
 - **DO NOT DILUTE/Gray Cap**
 - **DILUTE BEFORE USE/Purple Cap**
- Recent medical updates regarding the vaccine
- An overview of healthcare provider resources
- Question and answer session

These sessions will be **updated** to reflect the latest information and recent changes which will be identified at the start of each session.

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Pfizer Education

Date & Time (Note times listed are ET)	Password
Attendee link – Thursday, February 03 - 12pm ET	XxUF4Cg8Ma6
Attendee link – Tuesday, February 8 - 3pm ET	VggmmC9dZ33
Attendee link – Wednesday, February 9 - 12pm ET	xmPQNq7JJ32
Attendee link – Thursday, February 10 - 12pm ET	deMyFdVJ465
Attendee link – Tuesday, February 15 - 3pm ET	ZteZvrQ3M25
Attendee link – Wednesday, February 16 - 12pm ET	qhJNeDVr372
Attendee link -Thursday, February 17 - 12pm ET	niX7fg3xTR3
Attendee link – Tuesday, February 22 - 3pm ET	MMeBHKrM326
Attendee link – Wednesday, February 23 - 12pm ET	NgBarUWa228
Attendee link – Thursday, February 24 - 12pm ET	nMfj6BJEy32

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Novavax

The US data submission occurred on December 31st. To gain an Emergency Use Authorization (EUA), Novavax will submit a request for review and the FDA will convene a Vaccines and Related Biological Products Advisory Committee meeting (VRBPAC). The CDC likely will host an Advisory Committee on Immunization (ACIP) meeting within days of the VRBPAC. <https://ir.novavax.com/2022-01-31-Novavax-Submits-Request-to-the-U-S-FDA-for-Emergency-Use-Authorization-of-COVID-19-Vaccine>.

Novavax recently held educational webinar on their COVID vaccine.

- The COVID vaccine is a recombinant protein-based vaccine that combines a new class of highly immunogenic nanoparticles with a saponin-based adjuvant (Matrix-M). Protein-based vaccines are well-understood and have been used for over a century.

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Novavax

- Results of the phase 3 trial with 29,960 participants in the US and Mexico (Prevent 19) published in the New England Journal (<https://www.nejm.org/doi/full/10.1056/NEJMoa2116185>) with an end point of mild, moderate, or severe disease in a diversly robust patient population showed:
 - Serious and severe adverse events were rare and well-balanced with the placebo arm.
 - Efficacy overall of 90.4% and 100% for moderate to severe disease.
- To date, the vaccine is authorized by the WHO, the EU, India, South Korea, and Australia, and through our partnership with the Serum Institute in India for distribution in Indonesia and the Philippines. In addition to the US submission, Novavax has completed submissions in the UK, New Zealand, Singapore, Japan, and the UAE.

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Novavax

- Data looking at those still hesitant either to get a primary vaccine series or a boost as follows:
 - 2.4 M said they are waiting for a different vaccine choice before being vaccinated while 35M said they would prefer a protein-based vaccine.
 - In short, people want options. People want choice.
- The vaccine is not frozen -- It can be stored in a refrigerator (2-8 °C) which means even those in remote areas of the world will have access. The company is strongly committed to global equity.
- It is given in a 1 ml syringe. The quantity of vaccine is only 5 micrograms, which is much lower than the other COVID vaccines on the market.

• <https://www.novavax.com/our-unique-technology>

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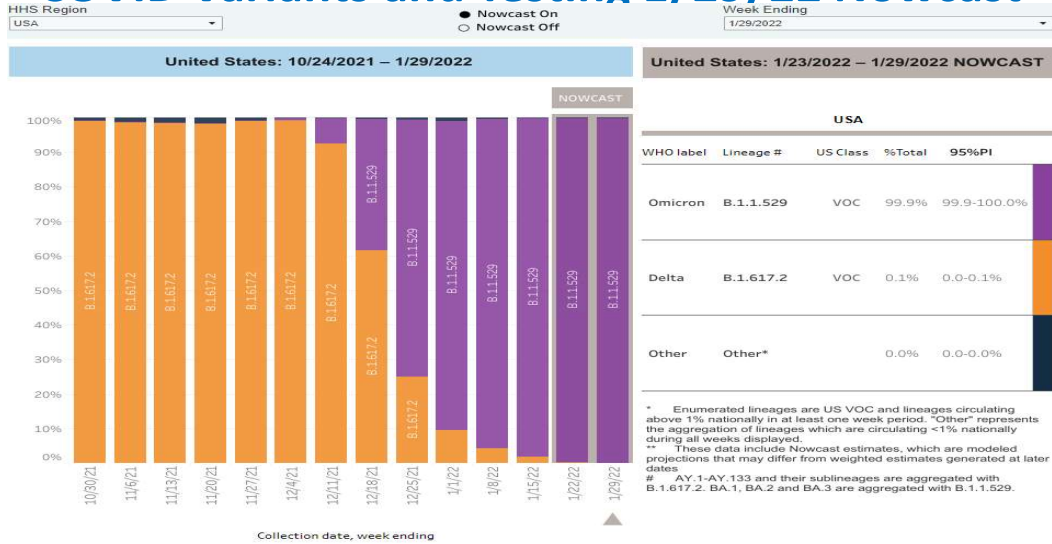


N Myron Gunsalus, Jr, KHEL Director
COVID-19 Laboratory Update
February 3, 2022



COVID-19: Laboratory Update

COVID Variants and Testing 1/29/22 Nowcast



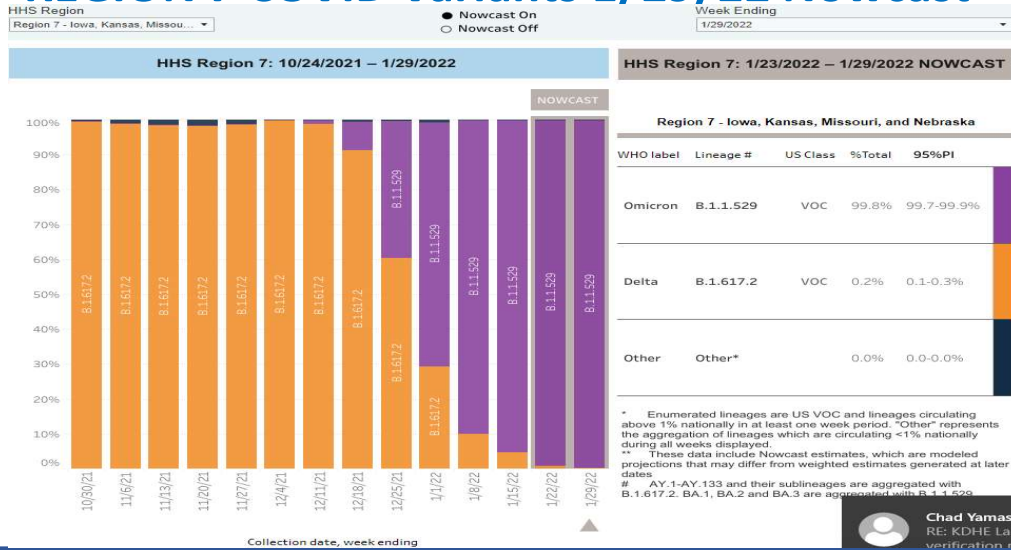
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https://covid.cdc.gov/covid-data-tracker/?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fcases-updates%2Fvariant-surveillance%2Fgenomic-surveillance-dashboard.html#variant-proportions



COVID-19: Laboratory Update

REGION 7 COVID Variants 1/29/22 Nowcast



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Chad Yamash
 RE: KDHE Lab
 verification m

https://covid.cdc.gov/covid-data-tracker/?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fcases-updates%2Fvariant-surveillance%2Fgenomic-surveillance-dashboard.html#variant-proportions

22.4% Delta

77.4% Omicron in purple, Our in state calculated results are tracking right at about 30% of those that we test.



COVID-19: Laboratory Update

Omicron Update

- Almost completely covering the US.
- BA.1 soon to split into BA.1.1, S346K mutation
- We have not seen BA.2
- State lab still doing random sequencing.

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https://www.kdheks.gov/it_systems/ks-han.htm



COVID-19: Laboratory Update

Testing Capabilities and Supplies

- Most commercial type testing laboratories seem to have capacity and supplies to keep testing although I have heard of some slowdowns.
- All rapid based supply chains are tight. Antigen tests for both at home or CLIA Waived are difficult to source
- 2-3 week minimum lead times are best case scenario.
- State lab also is very short on supplies and is diversifying and limiting where they send the few supplies they have to meet needs.

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https://www.kdheks.gov/it_systems/ks-han.htm



COVID-19: Laboratory Update

Helpful Contacts

- **General Laboratory Information and LABXCHANGE**
 - KDHE.KHELINFO@ks.gov
- **CLIA Certification Questions:**
 - KDHE.CLIA2@ks.gov
- **School Testing Program Contact**
 - Sarah Allin, K-12 Funding Project Manager
 - Sarah.allin@ks.gov
- **Courier Service**
 - Chad Yamashita (Chad.Yamashita@ks.gov)

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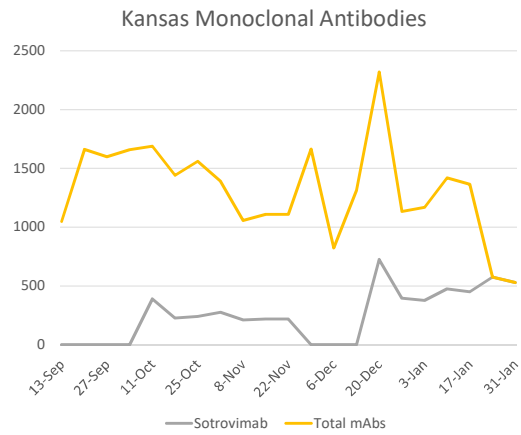
Michael McNulty, Emergency Management Director
Therapies for COVID-19 Update
February 3, 2022

Therapies for COVID-19 Update

Michael McNulty
Emergency Management Director
Kansas Department of Health and Environment

Kansas Allocations

WEEK	REGEN-COV	BAM/ETE	ETE SOLO	Sotrovimab
15-Nov	558	330	0	220
22-Nov	558	330	0	220
29-Nov	1104	560	0	0
6-Dec	264	560	0	0
13-Dec	684	630	0	0
20-Dec	864	730	210	726
27-Dec	408	330	0	396
3-Jan	432	360	0	378
10-Jan	516	430	0	474
17-Jan	504	410	200	450
24-Jan	0	0	0	576
31-Jan	0	0	0	528



Anticipate level allocations through at least February.

Movement to HPOP

- Single allocating process through HPOP coming
 - Adding hospitals, pharmacies, and others to facilitate allocating to facilities (hopefully this week)
 - Facility points of contact, once loaded, will receive an email from the portal
 - Those POCs will need to log-in within 72-hours of email receipt, verify their information, verify shipping address/hours. POCs will also be able to add users for their own facility
 - This will need to be completed before February 14, 2022
- Therapeutics reporting process will remain in place for the time being
 - HHS exploring options to streamline and reduce reporting burden on providers
 - Timeline for reporting changes – TBD

Oral Antiviral Strategy

- Federal Pharmacy Partnership
 - Wal-Mart – getting Paxlovid
 - Expanding to 26 sites statewide
 - Dillons – getting Molnupiravir
- Long Term Care Serving Pharmacies
 - Onboarding to HPOP and have started allocating/distributing to some facilities – getting Molnupiravir
- Independent community, hospital and other chain pharmacies
 - Collecting information (Kansas Hospital Association, Kansas Pharmacists Association) for bulk upload to HPOP

Evusheld Strategy

- Centers focused on identified at-risk populations covered under EUA
 - Transplant centers, cancer centers, etc.
 - In process: allocation, distribution, and administration is on-going
- All hospitals
 - Collecting information (Kansas Hospital Association) for bulk upload to HPOP
- The EUA allows healthcare providers to administer EVUSHELD for pre-exposure prophylaxis (PrEP) of symptomatic COVID-19, prior to exposure to the virus. The drug can provide protection for those not expected to mount an adequate immune response following vaccination, including those who are immunocompromised due to a medical condition or immunosuppressive medications, as well as those individuals for whom COVID-19 vaccination is not recommended. EVUSHELD is a combination of two long-acting antibodies (tixagevimab and cilgavimab) and is administered by intramuscular (IM) injection.

Therapeutic Distribution Locator for Provider Use

<https://covid-19-therapeutics-locator-dhhs.hub.arcgis.com/>

<https://covid-19-therapeutics-locator-dhhs.hub.arcgis.com/>

Pause in Allocation: BAM/ETE and REGEN-COV

- FDA revised EUAs for BAM/ETE and REGEN-COV
 - Limits use to only when patient likely to have been infected with or exposed to a variant susceptible to these treatments
 - Data show treatments highly unlikely to work against omicron variant
 - **Treatments not currently authorized for use in any US states, territories or jurisdictions**
 - Products must be used in accordance with EUA guidance
- NIH COVID-19 Treatment Guidelines Panel recommends against use
 - Markedly reduced activity against omicron
 - Real-time testing to identify rare, non-omicron variants not routinely available
- Omicron is dominant variant nationally – greater than 99%
- Alternative therapeutics remain available
 - Sotrovimab, Evusheld, Paxlovid, Molnupiravir – available through HHS allocations
 - Veklury (Remdesivir) – available commercially

What to do with BAM/ETE and REGEN-COV

- Product return NOT recommended; any returned product must be destroyed
- COVID-19 environment remains dynamic
- Products may be effective against future variants
- If product must be returned:
 - For BAM/ETE, see the Lilly Return Goods Procedure; detailed guidance can be found at <https://www.lillytrade.com/>
 - For REGEN-COV, call 844-734-6643
 - Reconstituted (diluted) product SHOULD NOT be returned and should be treated as waste per your facility's SOPs
- Extended Expiry Dating for Bamlanivimab
 - <https://www.phe.gov/emergency/events/COVID19/investigation-MCM/Bamlanivimab-etesevimab/Pages/shelf-life-extension-bamlanivimab-21Dec2021.aspx>

Veklury (Remdesivir) Use

- Outpatient non-hospital clinics can now order Veklury (remdesivir) from Amerisource Bergen
- FDA approved expanded use of Veklury to certain non-hospitalized adults and pediatric patients for treatment of mild-to-moderate COVID-19 disease
 - Expanded the approved indication for Veklury to include its use in:
 - Adults and pediatric patients (12 years of age and older who weigh at least 40 kilograms)
 - With positive results of direct SARS-CoV-2 viral testing, and
 - Who are not hospitalized and have mild-to-moderate COVID-19 and are at high risk for progression to severe COVID-19, including hospitalization or death
 - Also revised EUA to additionally authorize Veklury for treatment of pediatric patients
 - Weighing 3.5 kilograms to less than 40 kilograms or
 - Pediatric patients less than 12 years of age weighting at least 3.5 kilograms, with positive results of direct SARS-CoV-2 viral testing
 - Who are not hospitalized and have mild-to-moderate COVID-19 and are at high risk for progression to severe COVID-19, including hospitalization or death
 - <https://www.fda.gov/news-events/press-announcements/fda-takes-actions-expand-use-treatment-outpatients-mild-moderate-covid-19>

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CMS Code for Outpatient Veklury (remdesivir) use

- Following recent statement from NIH COVID-19 Treatment Guidelines Panel regarding therapies for COVID-19 omicron variant, CMS created **HCPCS code J0248** for the Veklury (remdesivir) antiviral medication when administered in outpatient setting – currently off label use
- Code available for use by all payers
- Effective dates of service on or after December 23, 2021
 - Long descriptor: Injection, remdesivir, 1 mg
 - Short descriptor: Inj, remdesivir, 1 mg
- Medicare Administrative Contractors determine Medicare coverage when no national coverage determination, including when providers use FDA-approved drugs for indications other than what is on approved label
- MACs will determine Medicare coverage for HCPCS code J0248 for Veklury (remdesivir) administered in outpatient setting
- See CMS COVID-19 Provider Toolkit for additional information

HHS Protect/TeleTracking Reporting

- Therapeutic Course Inventory and Usage – Report Once Weekly for Wednesday’s Date
 - Therapeutic A Courses on Hand Casirivimab/Imdevimab
 - Therapeutic A Courses Administered in Last Week Casirivimab/Imdevimab
 - Therapeutic C Courses on Hand Bamlanivimab/ Etesevimab
 - Therapeutic C Courses Administered in Last Week Bamlanivimab/ Etesevimab
 - Therapeutic D Courses on Hand Sotrovimab
 - Therapeutic D Courses Administered in Last Week Sotrovimab
- Therapeutic Course Inventory and Usage – Report Daily
 - Evusheld, Molnupiravir, Paxlovid
- <https://www.phe.gov/emergency/events/COVID19/investigation-MCM/Pages/COVID19-therapeutics-teletracking.aspx>

Therapies Questions

- If you have any questions related to monoclonal antibody distribution in Kansas, please contact Michael McNulty (mike.mcnulty@ks.gov)



Matt Lara, Communications Director
Comms Update
February 3, 2022



Every Home Four Free COVID-19 Tests



**EVERY HOME IN KANSAS
CAN ORDER FOUR FREE
AT-HOME COVID-19 TESTS.**

GET YOUR FREE TESTS AT
COVIDTESTS.GOV OR CALL 1-800-232-0233

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O LLAME AL 1-800-232-0233
PARA MÁS INFORMACIÓN

Available at: <https://www.coronavirus.kdheks.gov/265/Publications/>
Select Social Media Toolkit → COVID-19 Toolkits → Social Media → Every Home 4 Free Tests

To protect and improve the health and environment of all Kansans



COVID-19 Newsletter

Do wear a mask that

- Covers your nose and mouth and can be secured under your chin.
- Does not cover the eyes or ears.

How NOT to Wear a Mask

- Do not wear a mask around your neck.
- Do not wear a mask on your face.
- Do not wear a mask on your chin.

The CDC recommends wearing a mask to best protect yourself and others. To select and wear masks, please visit [CDC's guidance](#). Please also visit [CDC's guidance](#) to promote the best ways to use masks.

When to wear a mask: Individual COVID-19 vaccines (defined below) are authorized for use in certain settings. In areas with substantial or increasing transmission, consider wearing a mask in crowded indoor settings, especially in those with poor ventilation.

What does it mean to be "up to date" on your COVID-19 vaccination? The current CDC's recommendation is that you are up to date if you have received two doses of a COVID-19 vaccine, or one dose of a COVID-19 vaccine and a booster dose.

Dear Colleagues,

Cases and hospitalizations in Kansas continue to be at record highs not seen in previous COVID-19 peaks. With this in mind, demand for testing has also increased. To improve testing availability across the state, the Department of Health and Environment is providing information on how to get tested. In addition, the Federal home tests to all U.S. households by mail. If you are a household with a suspected COVID-19 case, you should follow the instructions on the box and let your close contacts know. Please click [here](#) to track COVID-19 in Kansas. A summary of local vaccine and testing information is available [here](#).



Make sure you have a COVID test when you need one.

Order your **four** free at-home tests today.

CALL 1-800-232-0022 FOR MORE INFORMATION

KDHE is working to improve testing as a surge in COVID-19 cases, due to the continued increase in demand for turnaround of test results and decreased antigen tests. As announced last week, testing availability across Kansas.

What steps is KDHE taking: To reduce the wait for results, follow the steps KDHE



WEEKLY COVID-19 STAKEHOLDER UPDATE

Thursday, January 27, 2022

[Click here to sign up for our newsletter in English!](#)

[¡Paga clic aquí para registrarse y recibir nuestro boletín en español!](#)



"With the increased demand for COVID-19 tests, the support from the Kansas National Guard will help provide the manpower to ensure that free and timely testing is available to Kansans."

Janet Stank, KDHE Acting Secretary

Free COVID-19 vaccines & testing, search near you. [KansasVaccine.gov](#)

[Visit KansasVaccine.gov](#)

English: <https://public.govdelivery.com/accounts/KSDHE/signup/31322>

Spanish: <https://public.govdelivery.com/accounts/KSDHE/signup/31683>

To protect and improve the health and environment of all Kansans



Public Health Collaborative

The CDC recently recommended that people upgrade to N95 or KN95 masks.

Here's m...
where yo...

A COVID-19 booster means that even if you get sick, you will likely

- Experience less severe symptoms
- Be sick for a shorter period of time
- Spread the virus to fewer people

<https://publichealthcollaborative.org/downloads/>



To protect and improve the health and environment of all Kansans

The Public Health Collaborative have some great graphics to use to help people understand the importance of mask wearing, getting the booster and what to do if they have tested positive. <https://publichealthcollaborative.org/downloads/>



Questions?