

Georgia OEMST Update – Epidemiology and Operations

OEMST / Friday, 01/21/2022



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Agenda

- Epidemiology Report
- BinaxNOW Cards
- Lamar and Upson County 911 Zones
- Licensee Counts
- GCC Update
- OEMST New Employees
- Upcoming meetings
- Questions

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COVID-19 Epidemiology Report

Dr. Cherie Drenzek



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Epidemiology Report – Dr. Cherie Drenzek – graphs as of 1/20/2022
<https://dph.georgia.gov/covid-19-daily-status-report>

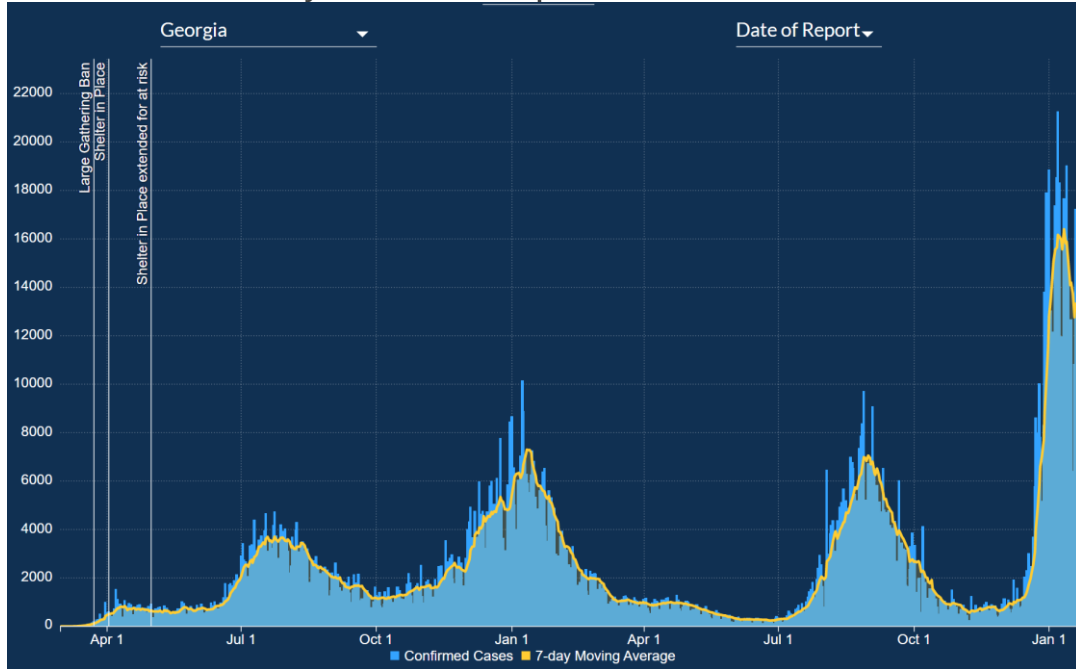
Confirmed Cases ⓘ	Confirmed Deaths ⓘ	Hospitalizations ⓘ
1,713,655	26,967	100,417
ICU Admissions ⓘ	Antigen Positive Cases ⓘ	Probable Deaths ⓘ
14,729	497,349	5,239

COVID-19 Testing ⓘ				
	Total PCR/ Molecular	PCR/Molecular Reported Today	Total Antigen	Total Antibody (Serology)
Number of Tests	15,310,677	68,114	4,966,197	709,736
Number of Positive Tests	1,850,676	21,932	493,684	211,448
% Positive	12.1%	32.2%	9.9%	29.8%

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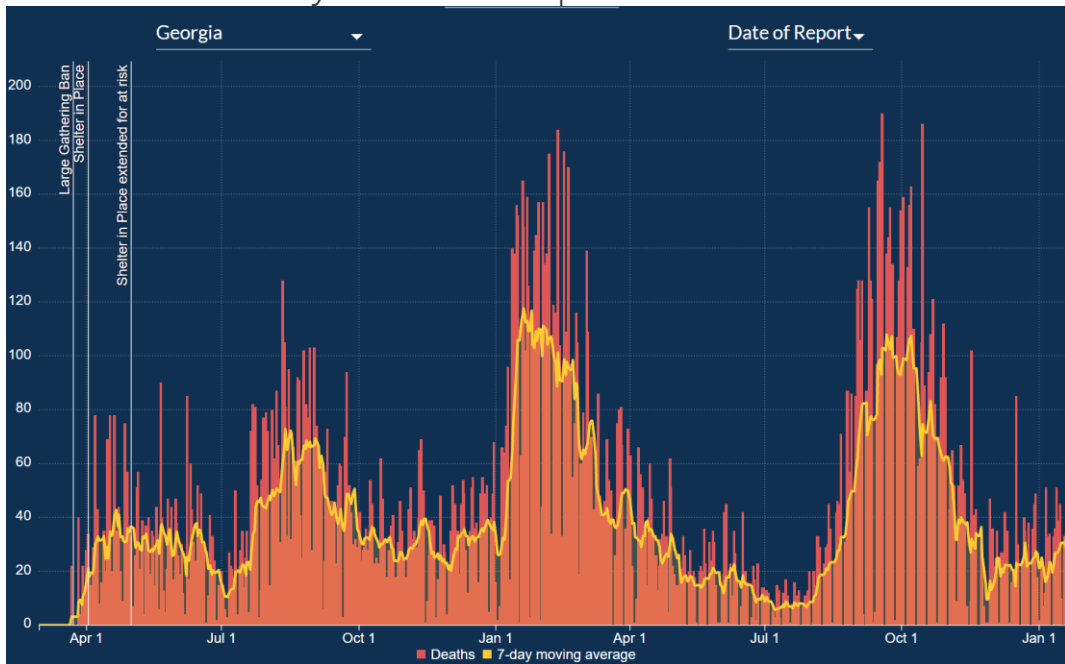
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Cases Over Time (By date of report)



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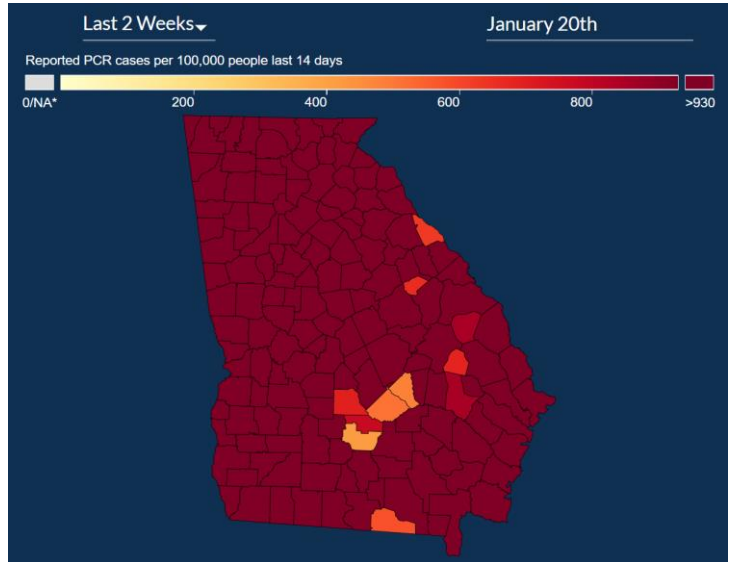
Confirmed Deaths by Date of Report



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Reported cases per 100,000 people last 14 days - as of 1/20/2022

Georgia - January 20
 Cases (last 2 weeks): 202,147
 Cases per 100k (last 2 weeks): 1,866
 Cases (total): 1,713,655
 Cases per 100k (total): 15,818
 Population: 10,833,472



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Vaccination Rates

	As of 4/8/21	As of 5/13/21	As of 7/15/21	As of 8/12/21	As of 9/08/21	As of 10/7/21	As of 11/10/21	As of 12/16/21	As of 1/20/22
At least one dose	28%	37%	44%	48%	52%	55%	57%	59%	62%
Fully vaccinated	15%	29%	39%	41%	45%	48%	50%	52%	54%

View the most up-to-date data here:

- <https://experience.arcgis.com/experience/3d8eea39f5c1443db1743a4cb8948a9c>

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Questions for Dr. Drenzek

- Epidemiology

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County Indicator Reports – Reminder

- <https://dph.georgia.gov/county-indicator-reports>

County Indicator Report

Introduction Cases Laboratory Tests Emergency Department Visits Emerging Counties High Transmission Counties Supplemental Maps **Community Transmission**

last updated: 11/08/2021
7-day date range: 10/30/2021 - 11/05/2021
metric descriptions

160 records

	County or Statewide	Number confirmed cases (7 day)	7-day confirmed case rate (per 100k)	Number PCR tests (7 day)	PCR % positive (7 day)	Level of Community Transmission Indicator
1	STATEWIDE	4877	46	113174	2.5%	Moderate
2	APPLING	13	71	119	2.5%	Substantial
3	ATKINSON	2	Not Calculated	30	3.3%	Low
4	BACON	36	326	90	3.3%	High
5	BAKER	0	Not Calculated	16	0.0%	Low
6	BALDWIN	14	31	162	8.0%	Substantial

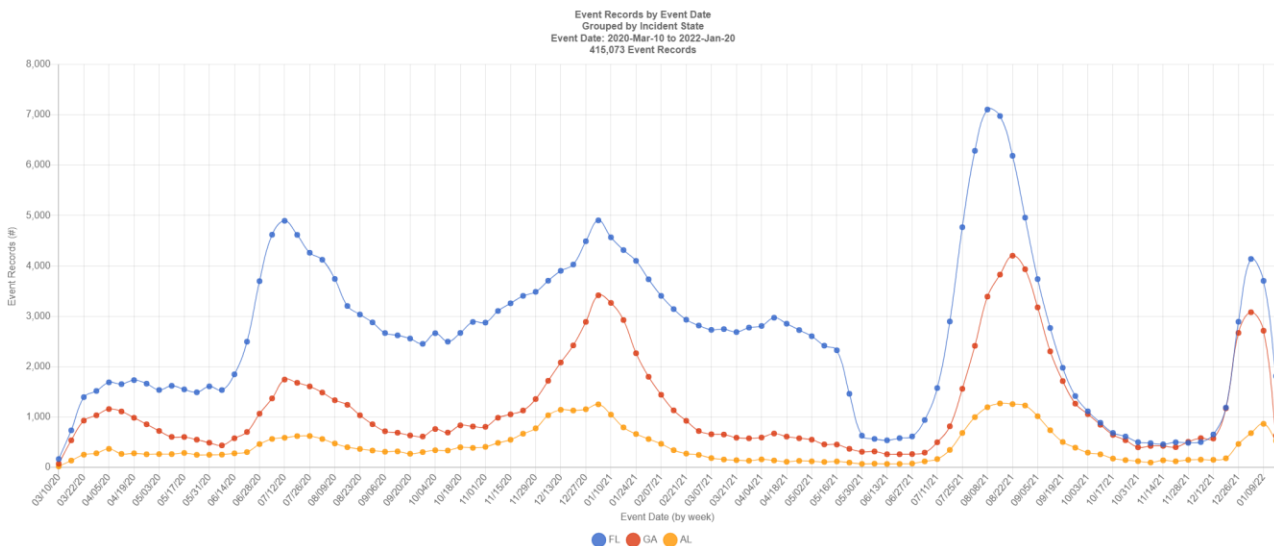
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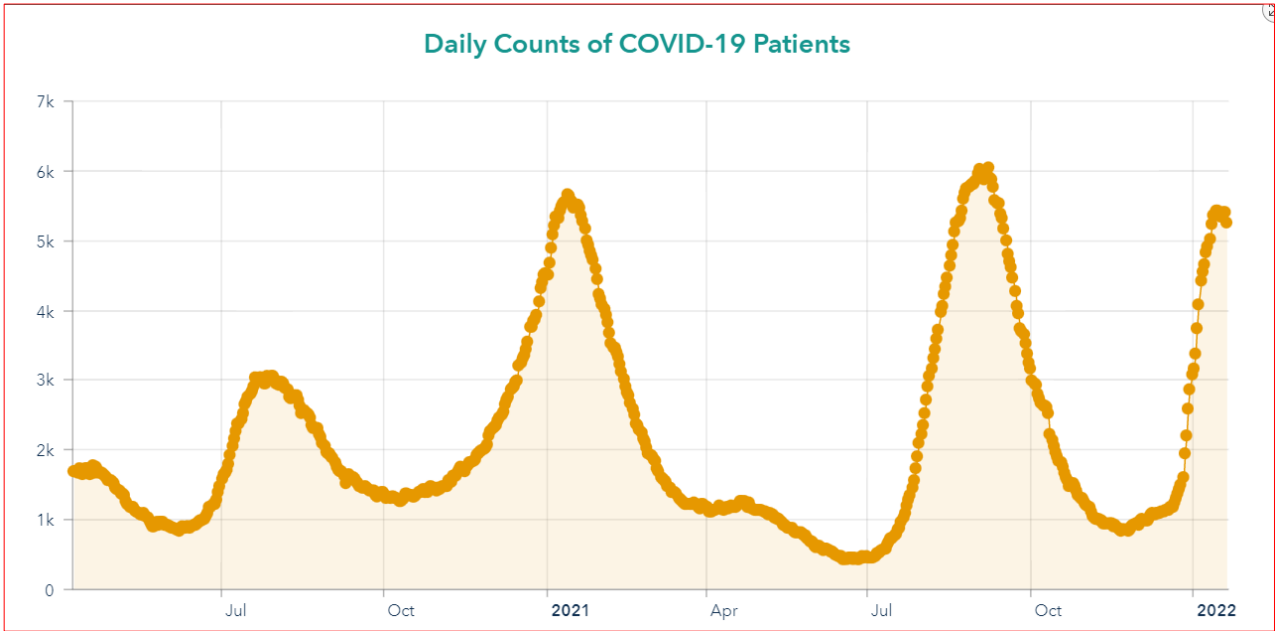
Counties (Count and % By Transmission Level)														
DATE-->	7/12/2021		8/9/2021		9/6/2021		10/7/2021		11/8/2021		12/16/2021		1/17/2022	
Transmission Level	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Not Calculated	8	5.0%		0.0%		0.0%	1	0.63%	2	1.26%	3	1.89%		0%
Low	38	23.9%	1	0.6%		0.0%	5	3.14%	45	28.30%	34	21.38%		0%
Moderate	68	42.8%	1	0.6%		0.0%	3	1.89%	66	41.51%	47	29.56%		0%
Substantial	11	6.9%	1	0.6%		0.0%	21	13.21%	33	20.75%	50	31.45%		0%
High	34	21.4%	156	98.1%	159	100.0%	129	81.13%	13	8.18%	25	15.72%	159	100%
Grand Total	159	100%	159	100.0%	159	100%	159	100%	159	100%	159	100%	159	100%

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Calculated COVID-19 Syndrome – 3/10/2020 – 1/20/2022, AL, FL, GA

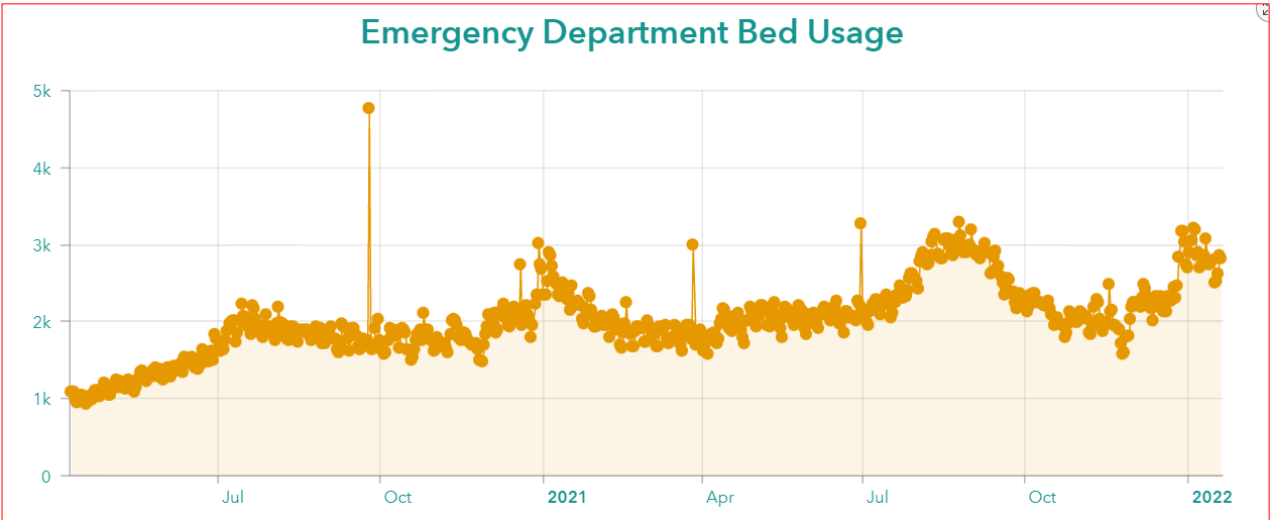


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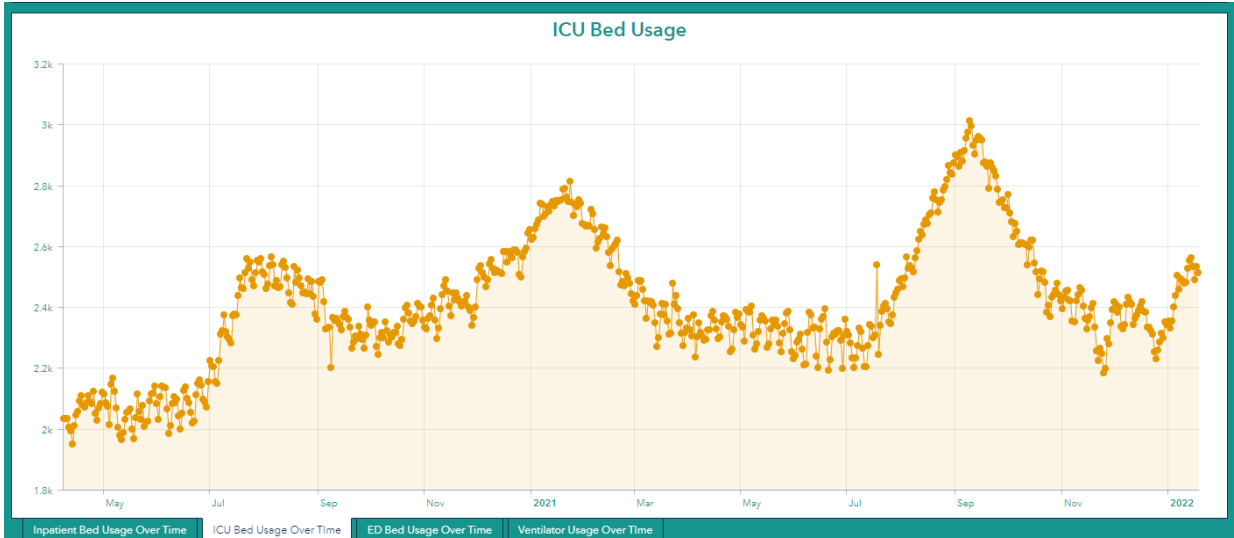
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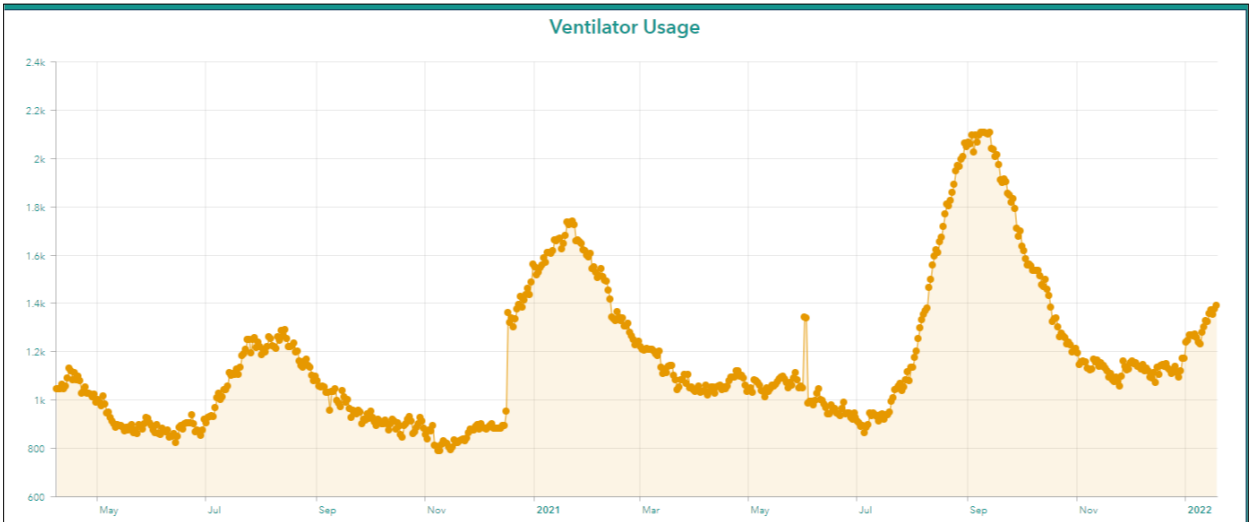


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What does this mean?

- Numbers of patients are up, but patients may not be as severe (ICU, ventilator usage)
 - ERs are still overwhelmed, which causes an increase in patient offload times

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BinaxNOW Cards for EMS Agencies

David Newton



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Binax NOW Cards for EMS Agencies

Previous BinaxNOW cards were distributed by the federal government.

Current kits are being procured by DPH at a cost – and there are significant manufacturing and supply-chain delays in the manufacture and distribution of these testing devices.

- *Therefore, the amount of BinaxNOW Rapid Antigen Testing cards available for distribution in Georgia is extremely limited.*

EMS Agencies will now request from their local Health District.

How to request

Reach out to the contact for your county listed on an upcoming slide (also emailed to all agencies).

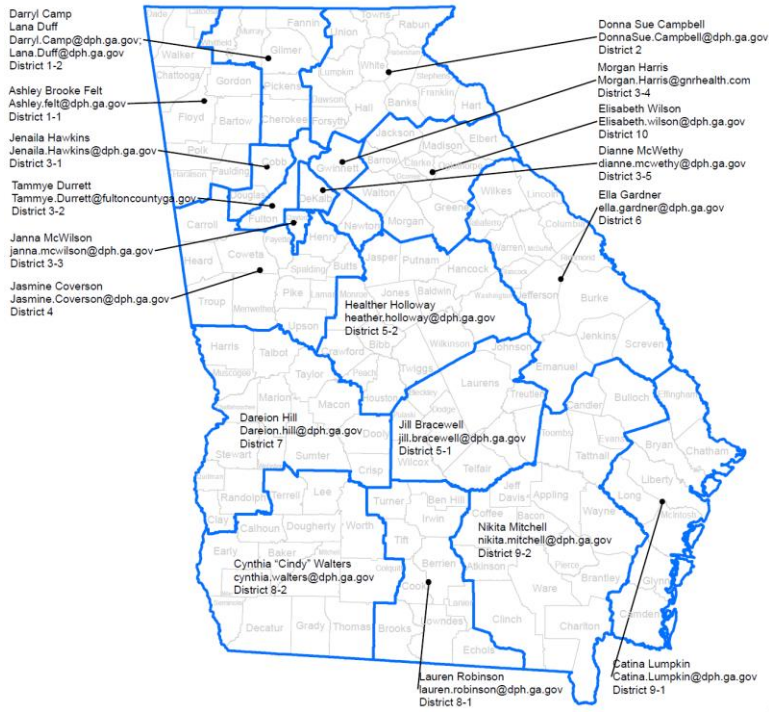
- You will need to complete a standardized MOU with the Health District, as well as provide them with a copy of your current CLIA Certificate.
- The Health District will provide the MOU to you if they are able to supply your agency with the testing devices.

Request must include:

- EMS Agency Name and full contact information, including shipping address – be sure to include who will be the authorized agent at your agency that has the authority to sign the MOU with the Health District
- Number of TESTS being requested (tests come in kits of 40 tests/kit)
- How many employees or other first responders in your area will you be testing with these devices?
- What is your testing strategy with these devices (e.g., testing symptomatic persons, etc)?
 - These tests are not to be used to avoid vaccination requirements
- Does your agency also test other first responders in your area (fire, law enforcement, etc)? If yes, please detail what agencies are served by your testing program.
- Attach your CURRENT CLIA Certificate

NOTE

- Since delivery of the testing devices to your agency is not always an option, the Health District may require that your agency pick up the testing devices from a Health District specified location.



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Lamar and Upson County 911 Zones

David Newton



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Lamar and Upson County Zones

Lamar County ERZ has been awarded to Lamar County Fire and Rescue.

Upson County ERZ has been awarded to Upson County EMS.

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PPE – KN95 Requests

Leah Hoffacker



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EMS Agencies or EMS Educational Programs

If you need KN95 masks, please submit a WebEOC request through your county EMA.



These masks are
NOT N-95s



Example N-95
(not available)

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Licensee Count and Medic Renewals

Kelly Joiner



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As of January 20, 2021 @ 3:00 pm

Level	Count on 12/16/21	As of 1/20/22	Change	% of Total
EMT-Responder	76	122	+46	0.49%
EMT	5,761	5,855	+94	23.75%
EMT-Intermediate	4,880	4,878	-2	19.79%
Advanced EMT	4,910	4,955	+45	20.10%
Cardiac Technician	28	28	N/A	0.11%
Paramedic	8,751	8,811	+60	35.74%
TOTAL	24,406	24,649	+243	100.00%

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Medic Licensing (Numbers as of 1/20/2022 @ 5pm)

- **Medic Renewal**
 - Medic Renewal application now open for those that expire 3/31/2022
 - **Agency Pay for Medic Renewal application open until 2/15/2022**
 - Payment by the agency for a medic renewal expires 3/31/2022
 - Already renewed = 841 (+504 since last meeting)
 - Still to renew = 6,317 (-642 since last meeting)

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Vaccine Mandates – CMS and OSHA

Melanie Simon, General Counsel



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Centers for Medicare and Medicaid Services (CMS) Vaccine Mandate for Healthcare Providers and Suppliers

- Emergency rule (86 FR 61555) became effective November 5, 2021.
- Applies to 15 types of Medicare and Medicaid-certified facilities.
- Several lawsuits were filed in November of 2021 to challenge the legality of the mandate.
- On November 30, 2021, a federal court in Louisiana issued a nationwide preliminary injunction preventing CMS from enforcing the rule.
- On January 13, 2022, the U.S. Supreme Court issued a final ruling in the matter, allowing the vaccine mandate to stand.

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Types of Medicare and Medicaid-certified facilities* subject to the mandate:

- Ambulatory Surgical Centers
- Community Mental Health Centers
- Comprehensive Outpatient Rehabilitation Facilities
- End Stage Renal Disease Facilities
- Federally Qualified Health Centers
- Home Health Agencies
- Home Infusion Therapy Suppliers
- Hospices
- Hospitals (including Critical Access Hospitals)
- Intermediate Care Facilities for Individuals with Intellectual Disabilities
- Long Term Care Facilities (Nursing Facilities and Skilled Nursing Facilities)
- Outpatient Physical Therapy and Speech Language Pathology Clinics
- Programs of All-Inclusive Care for the Elderly (PACE) (none in Georgia)
- Psychiatric Residential Treatment Facilities (for children and youth)
- Rural Health Clinics

*Information on CMS-certified facilities is available at <https://qcor.cms.gov/main.jsp>

CMS Vaccine Mandate - Deadlines

Phase 1 – by February 14, 2022

Covered facilities must demonstrate:

- That they have developed and implemented **policies and procedures** for ensuring all facility staff, regardless of clinical responsibility or patient or resident contact, are vaccinated for COVID-19; and
- That 100 percent of staff have received **at least one dose** of a COVID-19 vaccine; have a pending request for or have been granted a qualifying religious or medical exemption; or identified as having a temporary delay as recommended by the CDC. Failure to do so constitutes noncompliance, although CMS has stated it will not engage in an enforcement action if a facility is 80 percent compliant and has a plan to achieve 100 percent compliance within 60 days.

CMS Vaccine Mandate - Deadlines

Phase 2 - by March 15, 2022

Covered facilities must demonstrate:

- That they have developed and implemented policies and procedures for ensuring all facility staff, regardless of clinical responsibility or patient or resident contact, are vaccinated for COVID-19; and
- That 100 percent of staff have received the necessary doses to complete the vaccine series (*i.e.*, one dose of a single-dose vaccine or **all doses** of a multiple-dose vaccine series) or have been granted a qualifying religious or medical exemption, or identified as having a temporary delay as recommended by the CDC. Failure to do so constitutes noncompliance, although CMS has stated it will not engage in an enforcement action if a facility is 90 percent compliant and has a plan to achieve 100 percent compliance within 30 days.

CMS Vaccine Mandate for Healthcare Providers and Suppliers

Exemptions

- Medical conditions
- Sincerely held religious beliefs, practices or observances

Applies to:

- Facility employees (unless 100% remote)
- Licensed practitioners
- **Students**, trainees and volunteers
- **Individuals who provide care, treatment, or other services for the facility and/or its patients by contract or under arrangement**

Excludes

- Individuals providing infrequent, ad-hoc, non-health care services (*i.e.*, annual elevator inspection)

Occupational Safety and Health Administration (OSHA) Vaccine Mandate for Large Employers

- Emergency Temporary Standard (ETS) (86 FR 61402) effective November 5, 2021
- Applied to private employers with 100 or more employees. Required vaccination of employees with a testing/masking opt out.
- Several lawsuits were filed in November of 2021 challenging the legality of the mandate. On November 6, 2021, just one day after issuance of the ETS, a federal circuit court issued an injunction to prevent implementation and enforcement of the mandate. Thereafter, the various lawsuits were consolidated into one action.
- On January 13, 2022, the U.S. Supreme Court held that OSHA lacks the authority to issue a vaccine mandate, stating that COVID-19 is not an occupational hazard, but more of a general threat impacting society beyond the workplace.

What does this mean for EMS?

Hospitals (or other covered entities) may require:

- EMS students to show proof of COVID-19 vaccination before being allowed to enter their facility
- EMS agencies that they contract with may be required to show proof of COVID-19 vaccination

EMS Compact

David Newton



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EMS Compact

EMS Compact:

- IS a way to allow for sharing of data between Compact states regarding EMS personnel
- IS a way to expedite licensure in Compact states
- IS NOT a multi-state license
- DOES NOT allow someone to just walk into Georgia with a license from another Compact state and start working
- OEMST will be working on rules to address EMS Compact recognition and licensing process

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Georgia Coordinating Center (GCC)

- GCC Advisory Board (GCCAB)
 - Bylaws & Expansion
 - Upcoming Meetings
 - ▣ Feb 9, Mar 9
 - ▣ 2nd Tue of each month @10am – see Statewide Meetings Calendar

- Diversion & Offload Times
 - Statewide Diversion & Wall Times Task Force

For Questions, Concerns, Info,
Contact:
Rachel Barnhard
rachel.barnhard@dph.ga.gov
(470) 895-0025

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OEMST New Employees

Kelly Joiner



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-
- Jenny Weatherby, Regional Training Coordinator – Region 7
 - Jennifer.Weatherby@dph.ga.gov
 - Ryan Hollingsworth, Regional Training Coordinator – Region 10
 - Markryan.hollingsworth1@dph.ga.gov
 - Ashton Harris – EMS Epidemiologist
 - Ashton.harris@dph.ga.gov
 - Tiffany Harris – Cardiac Epidemiologist
 - Tiffany.harris@dph.ga.gov

CLIA Certificates for EMS Agencies

David Newton



CLIA

"CLIA" means the Clinical Laboratory Improvement Amendments of 1988 (42 USC 263a) and regulations (42 CFR 493) which specifies the federal standards applicable to all U.S. facilities or sites that test human specimens for health assessment or to diagnose, prevent, or treat disease.

ALL EMS Agencies must have a current CLIA certificate as of 1/1/2022 (this will be added to renewal applications on 4/1/2022)

- Agencies will not be able to renew on/after that date without a current CLIA certificate, and the certificate must be kept active at all times
- <https://dph.georgia.gov/EMS/ems-licensure/ems-agency-licensure/clia>

Only Exception

MFR agencies who do not hold additional licensure as a Ground Ambulance Service, Air Ambulance Service, or Neonatal Transport Service, shall be exempt from the requirement to maintain a current CLIA certificate, provided that:

- **The MFR Agency submits an attestation that:**
 - No Medic or other person employed by or acting on behalf of the MFR agency will be permitted to examine materials derived from the human body for the purpose of providing information for the diagnosis, prevention, or treatment of any disease or impairment of, or the assessment of the health of, human beings.

Why??

Federal statute

- Clinical Laboratory Improvement Amendments of 1988 (42 USC 263a) and regulations (42 CFR 493)

What are waived tests?

Waived tests include test systems cleared by the FDA for home use and those tests approved for waiver under the CLIA criteria.

- Although CLIA requires that waived tests must be simple and have a low risk for erroneous results, this does not mean that waived tests are completely error-proof.

Examples:

- Rapid POC COVID-19 tests
- POC Blood Glucose tests
- POC Pregnancy Tests
- Rapid Strep Tests

PATIENT TESTING IS IMPORTANT.

Get the right results.

READY?

SET?

TEST!

- Have the latest instructions for ALL of your tests.
- Know how to do tests the right way.
- Know how and when to do quality control.
- Make sure you do the right test on the right patient.
- Make sure the patient has prepared for the test.
- Collect and label the sample the right way.
- Follow instructions for quality control and patient tests.
- Keep records for all patient and quality control tests.
- Follow rules for discarding test materials.
- Report all test results to the doctor.



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention

<http://www.cdc.gov/clia/Resources/WaivedTests/>

CC0/HRM/C

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Upcoming Meetings/Trainings

Richard Rhodes



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Upcoming Meetings/Trainings – Open to All

- EMSMDAC Quarterly Meeting – Tuesday, 1/25/2022 @ 10am
- EMSAC Quarterly Meeting – Tuesday, 2/15/2022 @ 10am
- OEMST Educational Update in the upcoming weeks