











August 14, 2020

The Honorable Larry Hogan Governor of the State of Maryland 100 State Circle Annapolis, Maryland 21401

Dear Governor Hogan,

As we continue our COVID-19 planning efforts, we request data and information that are critical to preparation in our respective jurisdictions. We respectfully request that this information be shared with our jurisdictions no later than August 24, 2020 to ensure we have it before schools begin instruction.

First, we remain concerned regarding the performance measures and analysis from the statewide centralized contact tracing platform, covidLINK. Specifically, we request the following data to be available to the local Health Officers.

- Lab Resulting Time. Currently, the performance measure for "promptness" is defined as "First Outreach Within 24 Hours of Case Entered Into covidLINK." However, this performance measure is not coupled with the lab turnaround per case. Therefore, if the lab resulting time is over 8 days and the patient is contacted within 24 hours from that point, there are significant implications—often making the contact tracing effort ineffective and untimely. In more critical cases, this precious time lost could mean the difference between life and death. Our Health Officers and practitioners need to be equipped to manage this crisis and this measure is necessary to mitigate the further spread of COVID-19.
- New Cases from Quarantined Contacts. We would hope that the stronger the contact tracing efforts, the better the information that is produced. We recommend the ability for covidLINK to generate a report that allows contact tracers to better asses the types of contacts that have been made. Specifically, we ask that there be a way to ascertain how a contact was made. For example, covidLINK should provide the ability to document whether it was a workplace, community event, or household contact.
- Outbreaks by Occupational Transmission by Jurisdiction. Currently, covidLINK produces a statewide report, "Employment Information for Cases Entered into covidLINK." While this report produces some insight, the contact tracing effort does not differentiate data where the individual had a higher likelihood or absolute confirmation of

transmission from an occupational setting. Collectively, we have been working to manage outbreaks in congregate facilities. As we learn more and can pinpoint the origin of infection for other occupational settings, we will apply our mitigation practices to other critical workplaces.

In addition to the aforementioned specific measures, we also request the following validating information:

- Raw Data per Jurisdiction from covidLINK. We recognize that aggregated statewide
 data provides indicators for the State. However, our local Health Departments have
 epidemiologists who have expertise and knowledge specific to our local communities.
 We request that when statewide reports are released, that the corresponding Excel files
 per jurisdiction are also provided.
- Data Definitions for Indicators. For every local jurisdiction to have congruence in understanding, we request that data definitions be provided to our local Health Officers when information is released. For example, from the statewide covidLINK report "High Risk Gathering and Location Information," the indicator "family gatherings" is released without a definition of what constitutes a "family gathering." These very specific nuances can make the difference in local management and policy decisions. We request that data definitions be made available to local Health Officers and leaders.
- Criteria for Symptoms Used Within covidLINK Completed by Contact Tracers. Currently, the Center for Disease Control (CDC) references several symptoms for COVID-19. However, it has come to our attention that contact tracers are using a script that does not include the following symptoms: diarrhea, congestion/runny nose, nausea/vomiting, and fatigue. We recommend that there is a change within covidLINK to include all CDC symptoms. It is imperative that this change is made so that we have the most comprehensive and accurate data regarding impact of COVID-19 on individuals. Should there be no change, we ask that you provide information that gives a justification on these exclusions.

Lastly, for our planning purposes, we want to better understand source information used by the State so that we can forecast need. Specifically, we ask for:

- **Forward Projections for the Fall/Winter.** Our staff analysts are rigorously researching various models. We would appreciate the source documents used by your team of experts that are being used for forward projections for fall and winter months surrounding COVID-19 case, surge, and supply indicators.
- **Testing Deployment Plans.** For maximizing efficiency and effectiveness, we request an overview of the plans for testing. Specifically, we would like to better understand how the rapid antigen test will be deployed and how these tests will be prioritized amongst jurisdictions.













We appreciate the collaboration with our jurisdictions and know that with this partnership we can continue to stop the spread the COVID-19 and also address the great economic impacts felt by our families and communities. We know an increase in collaboration, in addition to accurate data, will ensure the safety of our residents as we continue to navigate this pandemic.

Respectfully,

Steuart Pittman

Anne Arundel County Executive

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Bernard C. "Jack" Young Mayor of the City of Baltimore

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Secretary Robert R. Neall, Maryland Department of Health cc:

Acting Deputy Secretary Dr. Jinlene Chan