



COMMUNITY CARE NETWORK OF KANSAS

Health. Equity. Justice.

What We Know Now

May 10, 2022

A compilation of the latest news surrounding the COVID-19 pandemic from the Community Care Network of Kansas. Published on Tuesdays and Thursdays. Visit our [COVID-19 Resources](#) page for complete, updated information.

Community Care Spotlight

Today's Spotlight is on **Vibrant Health**, who has an ongoing partnership with Kansas City Kansas Public Schools to host COVID-19 vaccine clinics. The most recent event, held at Grant Elementary, featured free food, a raffle for those who receive vaccines, and other community resources. Vibrant Health is using data from the Wyandotte County Health Department on vaccine rates to prioritize the schools in which events are held at to increase community protection against COVID-19. Based on community need, the next partnership event will feature the offering of all childhood vaccines in addition to COVID-19 vaccines for eligible community members.

BE A 'DOTTE HERO

& GET YOUR SHOTS.

COVID-19 VACCINE CLINIC FOR THOSE AGES 5 & UP

APRIL 27, 2022 FROM 4-6 P.M. AT GRANT ELEMENTARY

1510 N. 4TH ST. KANSAS CITY, KS. 66101

OFFERING FIRST, AND SECOND DOSE OF PFIZER AND BOOSTERS FOR THOSE ELIGIBLE.
MASKS REQUIRED



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From KDHE/Governor's Office/Statehouse

As of 5/6/22:

[Latest statistics](#): 778,045 positive cases, 8,691 deaths, and 30 MIS-C cases (Multi-system Inflammatory Syndrome in Children associated with COVID-19). There were 2,232 new cases and 56 new deaths reported since 4/29/22.



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According to the [Kansas WebIZ vaccination tracker](#), 4,337,083 doses have been administered in Kansas out of the 5,744,810 doses distributed. 1,968,676 people have had their first dose; 1,601,381 have had their second doses; and 807,027 have had their third dose of the vaccine series.

From HRSA

HRSA has [created a short video](#) that can be shared with patients to give them tips to successfully use telehealth for their appointments. Patients can learn about device options and appointment preparation.

HRSA reminds health centers that new FY 2022 American Rescue Plan Uniform Data System Patient-Level Submission (ARP-UDS+) supplemental funding is now available and can be used by health centers to expand their analytics and reporting capabilities. Applications must be submitted in HRSA's Electronic Handbooks (EHBs) by 5:00 PM ET on May 23, 2022.

HRSA reminds health centers that the FDA limited the authorized use of the Janssen (Johnson & Johnson) COVID-19 vaccine to individuals 18 years of age and older for whom other authorized or approved COVID-19 vaccines are not accessible or clinically appropriate, and to individuals 18 years of age and older who elect to receive the Janssen (Johnson & Johnson) COVID-19 vaccine because they would otherwise not receive a COVID-19 vaccine. If you have Janssen (Johnson & Johnson) COVID-19 vaccine on hand, HRSA recommends you store it until expiration so that it is available for use in these limited applications. For additional questions, reach out to HRSA via the [BPHC Contact Form](#).

HRSA's next COVID-19 Responses Programs Office Hour session (Tuesday, May 17) will feature representatives from the HHS Office of the Assistant Secretary for Preparedness and Response providing answers to health center questions about clinical delivery of COVID-19 oral antiviral pills. Sessions are from 1:00-2:00 p.m. ET. [Register one time](#) and you'll have access to all Office Hour sessions from now until February 2023.

From NACHC

[Join NACHC](#) Thursday May 12 at 2:00 pm ET for NACHC's Monthly Telehealth Office Hours where they will review the best practices for building, operating, and sustaining a telebehavioral health practice in an FQHC setting. The session will also offer strategies for improving etiquette, assessing and mitigating patient risk, and updates on telehealth billing and policies related to the COVID-19 pandemic and public health emergency.

NACHC shared that this week the Bipartisan Policy Center released a report entitled [The Impact of COVID-19 on the Rural Health Care Landscape: Challenges and Opportunities](#). The report contains recommendations intended to strengthen rural health care, which include providing stabilization for rural health systems (including FQHCs), strengthening the Rural Emergency Hospital model, ensuring an adequate rural health care workforce, and broadening access to virtual care. Some of the recommendations include permanently removing geographic and site of service restrictions for telehealth and audio-only services, as well as permanently authorizing FQHCs and RHCs to serve as distant sites.

From National Institutes of Health

A [new study](#) released by the National Institutes of Health found that patient experience with telehealth visits before compared to during the COVID-19 pandemic was as positive as or more positive than that with traditional office-based visits. These lessons learned about delivering responsive telehealth care can be used to ensure high-quality care after the pandemic.

From the FDA

Through supplemental funding to the American Rescue Plan Act of 2021, Congress provided temporary funding for the FDA to develop the capacity to sequence SARS-CoV-2 RNA from wastewater samples and to conduct a sampling and sequencing project through 2022. To facilitate sharing of information about progress on this sequencing effort, the FDA published a [public dashboard](#) that graphically presents information from the project. Studies have shown that SARS-CoV-2 (COVID-19) variants of concern from wastewater can be identified 1-2 weeks prior to being detected in clinical samples from the same area, making wastewater surveillance useful for detecting and monitoring SARS-CoV-2 in the population.

The FDA [authorized an extension](#) to the shelf-life from 18 months to 24 months for specific lots of the refrigerated Eli Lilly monoclonal antibody, bamlanivimab. Due to the high frequency of the Omicron variant, bamlanivimab and etesevimab are not currently authorized in any U.S. region. Therefore, these drugs may not be administered for treatment or post-exposure prevention of COVID-19 under the Emergency Use Authorization until further notice by the Agency. However, it is the recommendation of the U.S. Government that product be retained in the event that future SARS-CoV-2 variants, which may be susceptible to bamlanivimab and etesevimab, emerge and become prevalent in the U.S.

The FDA released a [CDER Conversation](#) with Dr. John Farley, director of the Office of Infectious Diseases, providing useful information that can help health care providers in decision-making regarding Paxlovid. The FDA also released a [Patient Eligibility Screening Checklist](#) along with an alphabetized list of other drugs with potentially significant drug interactions.

From the Centers for Disease Control and Prevention

CDC Updates to COVID Data Tracker: [COVID-NET tab](#) was updated to display March 2022 rates of COVID-19-associated hospitalization comparing unvaccinated people, fully vaccinated people, and people with an additional or booster dose. Additionally, the [The COVID-19 Vaccinations in the United States tab](#) was updated to include a count of the people in the United States who have received a second COVID-19 vaccine booster dose.

CDC recently updated [this tool](#) for health care professionals. It provides basic information on the proper storage, preparation, and administration of the currently authorized COVID-19 vaccine products in the U.S.

The CDC released additional updates, including:

- [Cases in the U.S.](#)
- [COVID-19 Case Forecasts.](#)
- [Overall U.S. COVID-19 Vaccine Distribution and Administration.](#)
- [Staffing Resources](#)

From Media/Scientific Reports

COVID-19 manufacturers are shifting gears to plan for the COVID-19 booster shot need. Read more at Reuters [here](#).

Health experts hope to use telehealth to overcome the Paxlovid prescription bottleneck to get treatments into the hands of patients. Read more at STAT News [here](#).