

Guidance for the Ending of the Federal COVID-19 Public Health Emergency

Date: May 30, 2023

BACKGROUND:

On May 11, 2023, the federal COVID-19 Public Health Emergency (PHE) ended. The ending of the federal PHE has implications as to how COVID-19 activity will be monitored and to activity metrics that are used to help guide public health recommendations. CDC's COVID-19 Community Levels and Transmission Levels are no longer being calculated, and have been replaced by COVID-19 hospital admission levels. Less immediately, the expiration of the PHE will also impact access to and cost of vaccines, testing, and treatment.

New Jersey continues to require the reporting of positive and negative molecular tests (NAAT, PCR) and positive antigen tests for SARS-CoV-2. The end of the PHE also will not impact the requirement that K-12 schools report into the Surveillance of Infectious Conditions (SIC) module. Long-term care facilities should continue to complete routine active surveillance and outbreak surveys.

MONITORING COVID-19:

- The CDC COVID-19 Transmission Levels have been discontinued and the COVID-19 Community Levels (CCLs) have been replaced with COVID-19 hospital admission levels.
- In addition to COVID-19 hospital admission levels, the New Jersey Department of Health (NJDOH) will be monitoring COVID-19 activity via the use of mortality data, including the percentage of deaths that were COVID-19 associated.¹ Syndromic and genomic (variant) surveillance data will continue to be used by NJDOH to help inform prevention and control strategies.¹ NJDOH has issued an updated weekly COVID-19 Activity Report that includes data on these indicators to help characterize the impact of COVID-19 in New Jersey.

GUIDANCE AND RECOMMENDATIONS:

- Individual and community-level recommendations previously tied to CCLs have been updated to indicate <u>COVID-19 hospital admission levels</u> should be used to guide decisions related to risk and preventative measures.
- <u>Setting-specific guidance</u> previously tied to CCLs, including <u>guidance for K-12 Schools and Early Care</u>
 and <u>Education Programs</u> and <u>guidance on Management of COVID-19 in Homeless Service Sites and
 Correctional and <u>Detention Facilities</u>, have been updated to indicate <u>COVID-19 hospital admission</u>
 levels should be used to guide decisions related to risk and preventative measures.
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- <u>CDC healthcare guidance</u> no longer uses COVID-19 Transmission Levels to guide facility COVID-19
 infection prevention and control interventions. Healthcare facilities each have unique strengths and
 challenges which often require facility-specific infection prevention and control practices.
 Healthcare facilities should consider several factors when determining when and how to implement



COVID-19 infection prevention and control practices (e.g., patients/residents with highest risk of severe outcomes, input from stakeholders, outbreak status). In addition, state and national data on COVID-19 and trends of other respiratory viruses may be helpful to inform facility-specific COVID-19 infection prevention and control.

- o CDC COVID-19 Hospital Admission Levels
- o NJDOH COVID-19 Weekly Activity Report
- o NJDOH Influenza and Respiratory Illness Surveillance Reports
- National Emergency Department Visits for COVID-19, Influenza, and Respiratory Syncytial
 Virus
- New admission testing in nursing homes has been updated to align with other healthcare settings and is at the discretion of the nursing home.
- There are no changes to the following:
 - o CDC Interim Guidance for Managing Healthcare Personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV-2
 - o CDC Strategies to Mitigate Healthcare Personnel Staffing Shortages
 - Overall outbreak response as described in <u>Interim Infection Prevention and Control</u>
 <u>Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic</u>
 - o COVID-19 isolation and post-exposure recommendations

VACCINES:

The ending of the PHE does not have an immediate impact on the availability of free COVID-19
vaccines. Regardless of insurance coverage, individuals can continue to get <u>COVID-19 vaccines</u> at no
charge while supplies last and before vaccine products shift to the commercial market.

TESTING:

- With the ending of the PHE, insurance providers will no longer be required to waive costs or provide free COVID-19 tests.
 - The <u>CDC Increasing Community Access to Testing (ICATT)</u> program will continue to offer testing, free of charge, with a smaller network of sites.
 - The NJDOH COVID-19 Info Hub has information for accessing low or no-cost testing for COVID-19 at public testing sites, federal community-based sites, Test-to-Treat program sites, and at Federally Qualified Health Centers (FQHC).

TREATMENT:

Treatment to prevent severe illness from COVID-19, such as the antiviral Paxlovid, will remain
available for free while supplies last. Once the stockpile runs out, the cost of Paxlovid and other
FDA-authorized treatments will fall on patients and insurers. <u>Federally Qualified Health Centers</u> offer
low-cost treatment options.

NJDOH REPORTING REQUIREMENTS:

While the federal requirement for laboratories to report SARS-CoV-2 test results ended when the
federal Public Health Emergency terminated on May 11, 2023, all laboratories operating in New
Jersey remain obligated to report their SARS-CoV-2 test results to NJDOH. We request that all
laboratories operating in the State, including those that only perform CLIA waived tests and may be



located in healthcare facilities such as doctor's offices, continue to report SARS-CoV-2 testing results.

- Requirements for K-12 school reporting into the Surveillance for Infectious Conditions (SIC) module
 in the Communicable Disease Reporting and Surveillance System (CDRSS), per Executive Order 302
 and Executive Directive 21-011, are not impacted by the ending of the federal PHE.
- Long-term care settings should continue to report all outbreaks to the local health department and report routinely into the Active Surveillance Survey and the Facility Outbreak Survey.

References

- Silk BJ, Scobie HM, Duck WM, et al. COVID-19 Surveillance After Expiration of the Public Health Emergency Declaration — United States, May 11, 2023. MMWR Morb Mortal Wkly Rep 2023;72:523–528. DOI: http://dx.doi.org/10.15585/mmwr.mm7219e1
- 2. CDC COVID-19 by County
- 3. End of the Federal COVID-19 Public Health Emergency (PHE) Declaration