

NC DHHS COVID-19 Update: Testing, Guidance and Resources

DHHS Leadership 6/15/20

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Topics of Discussion

- Welcome...Secretary Mandy Cohen
- Epidemiology and Statistics...Dr. Zack Moore
- Testing Methodology Updates... Dr. Scott Shone
- Testing Principles(Guidance)...Drs. Betsey Tilson & Shannon Dowler
- Symptom Tracker & Find my Testing Site...Dr. Cardra Burns
- RFQ, High Throughput, and Paying for Testing...Jay Ludlam, JD
- Resources...Dr. Betsey Tilson
- Questions and Answer...ALL

Logistics for today's COVID-19 Forum

Question during the live webinar



questionsCOVID19webinar@gmail.com

Technical assistance

technicalassistanceCOVID19@gmail.com

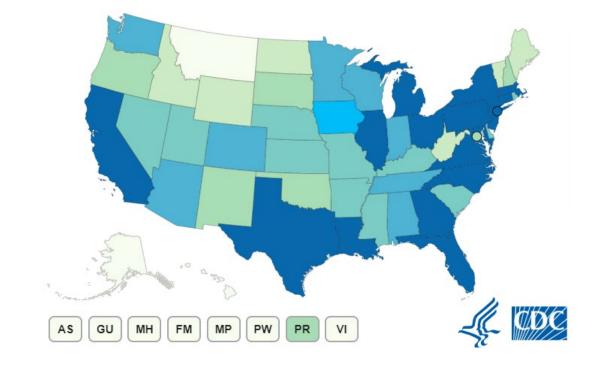


Mandy Cohen, MD, MPH
Secretary
Department of Health and Human Services

June 15, 2020

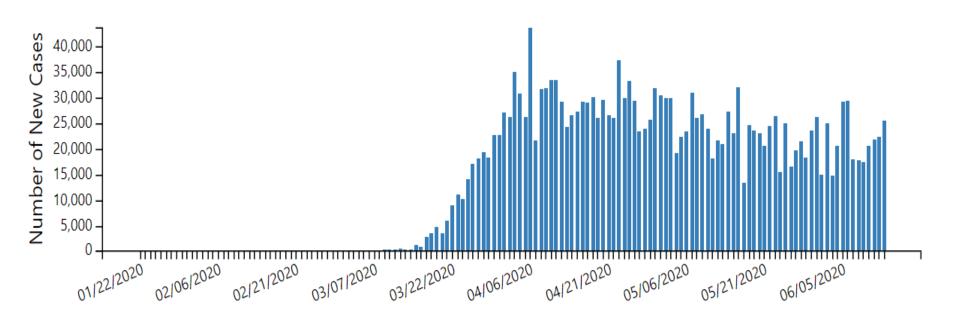
COVID-19: National and State Surveillance

June 15, 2020

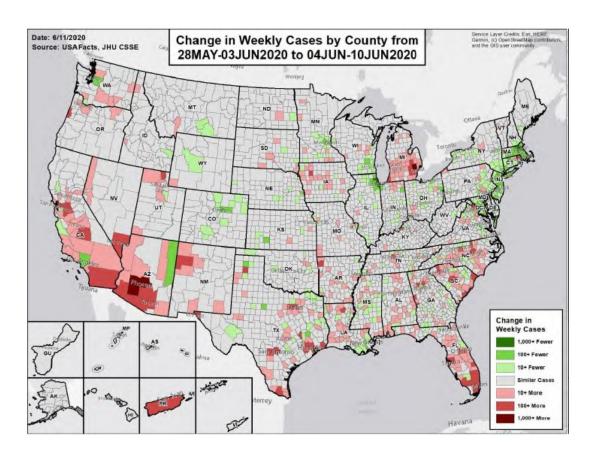




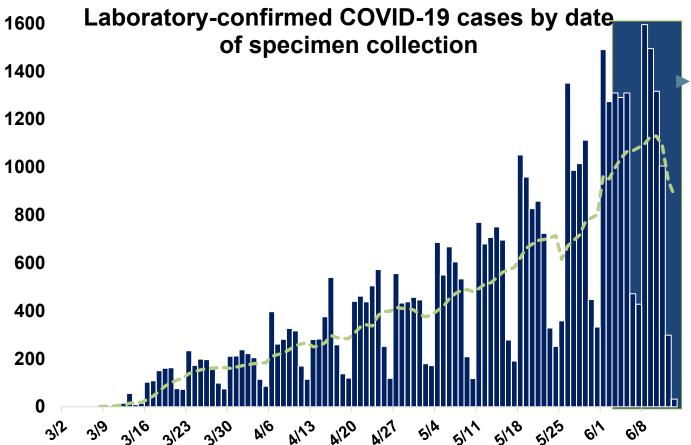
U.S. Cases since Outbreak Began



Increasing Cases in Multiple Regions

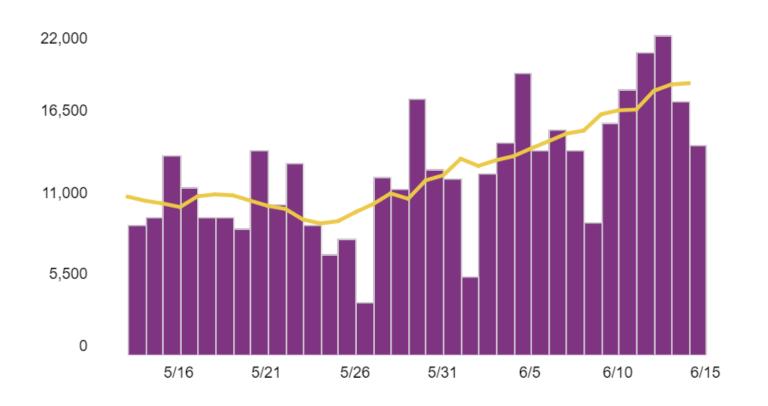


N.C. Confirmed Cases by Specimen Date



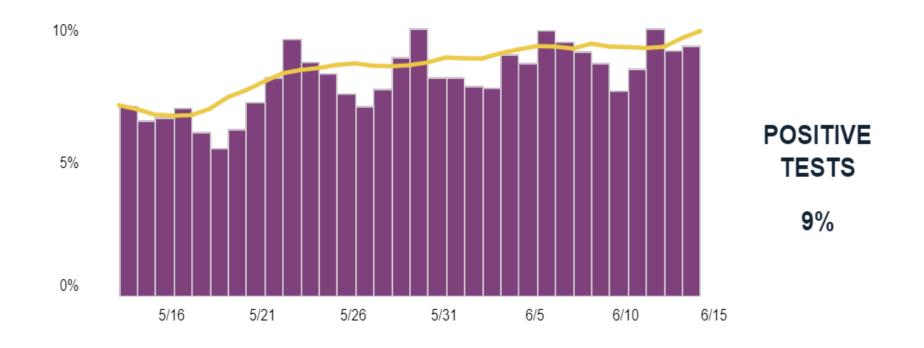
Total Cases: 44,119

Total Tests Reported

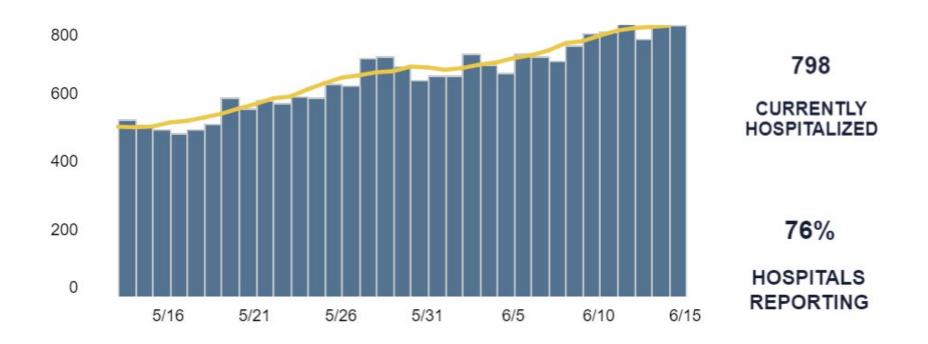


TOTAL TESTS 627,130

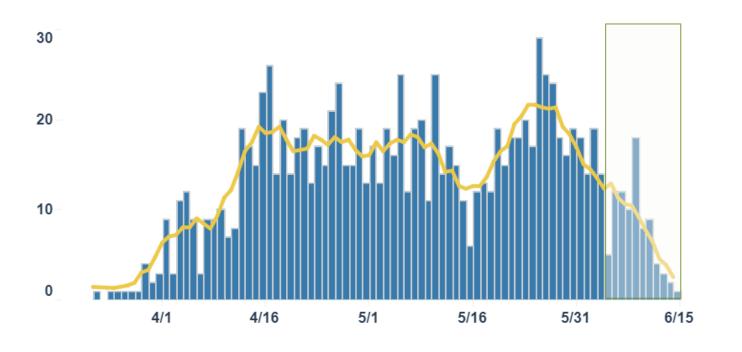
Positive Tests as a Percentage of Total Tests



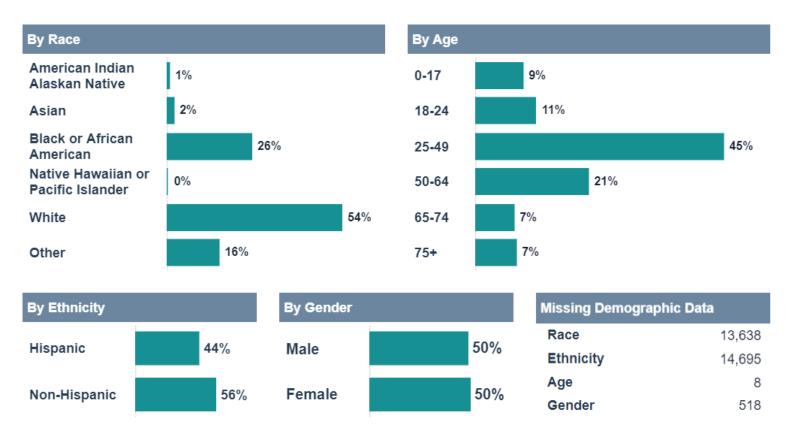
N.C. Daily Number Hospitalized

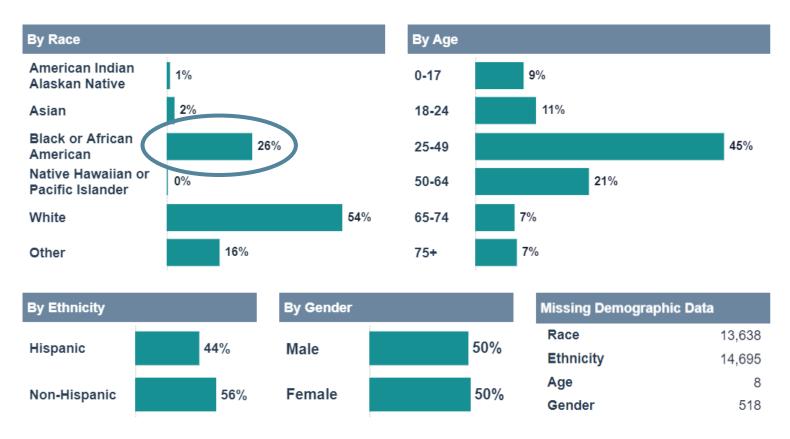


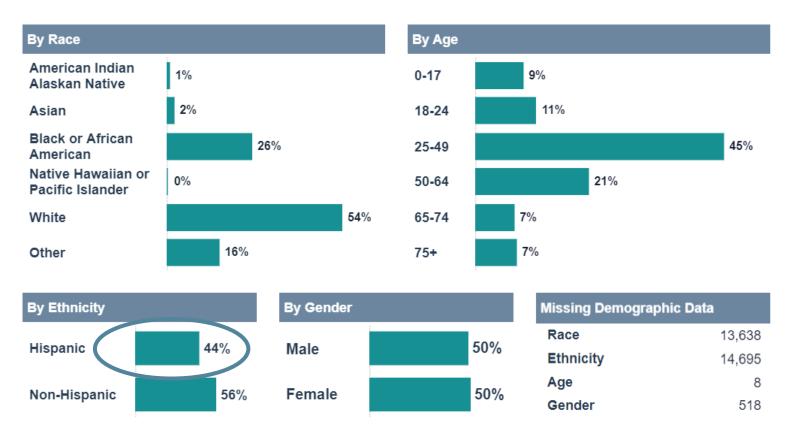
N.C. Confirmed COVID Deaths by Date of Death

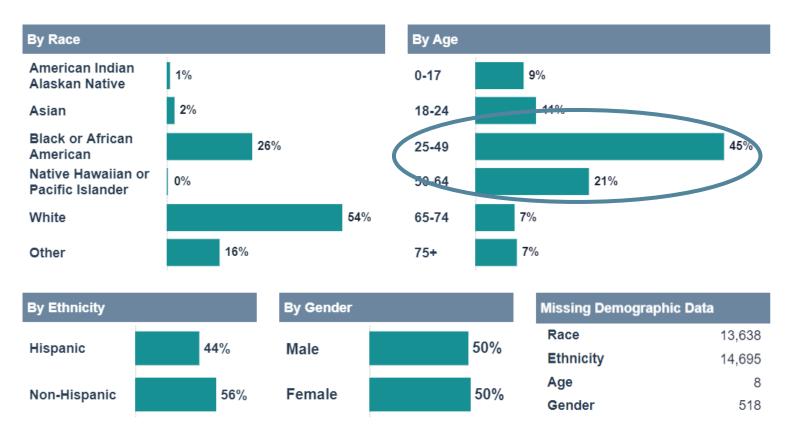


TOTAL DEATHS 1,109

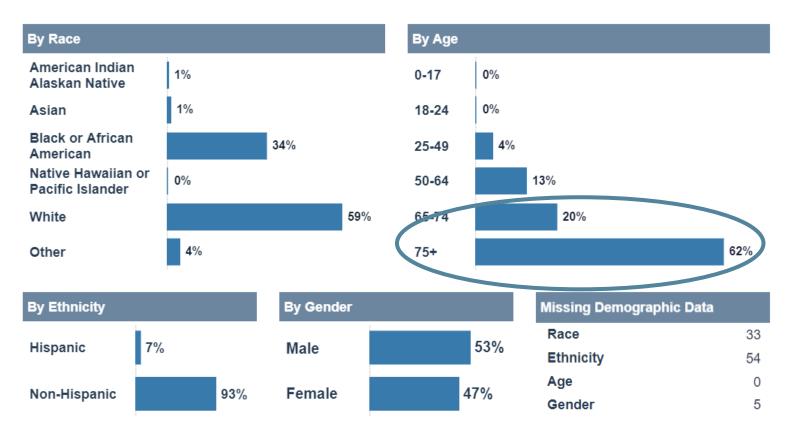




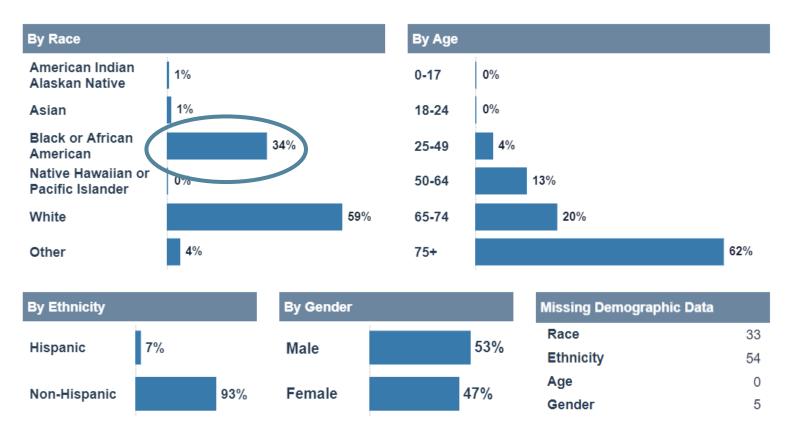




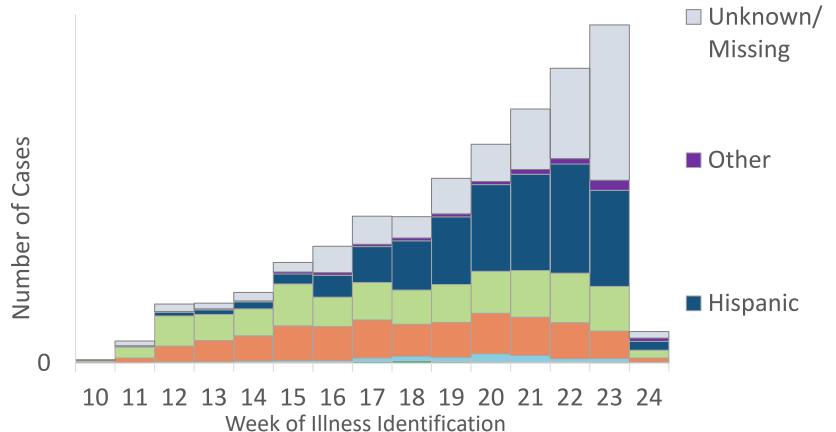
N.C. COVID-19 Deaths – Demographics



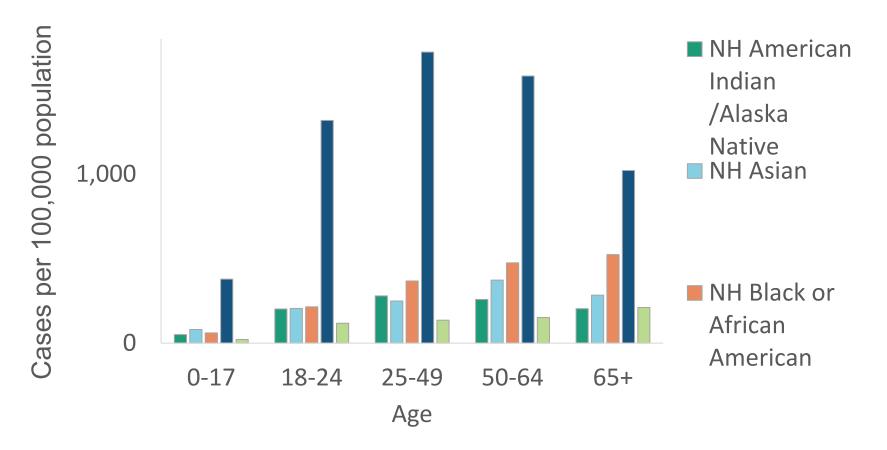
N.C. COVID-19 Deaths – Demographics



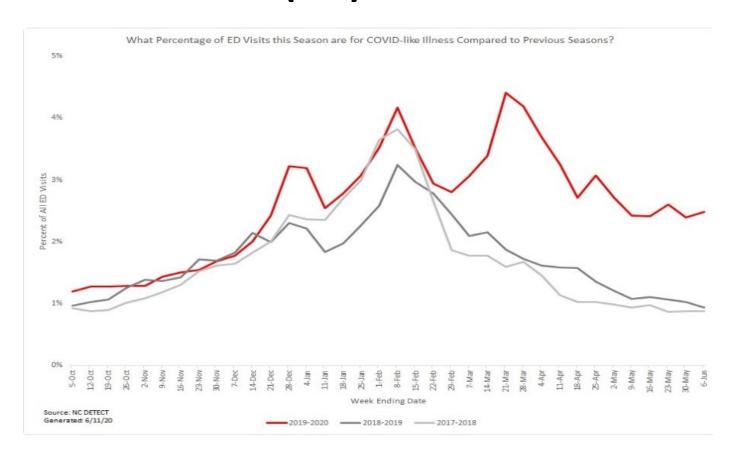
N.C. Confirmed Case by Race and Ethnicity



N.C. Confirmed Case by Race and Ethnicity



COVID-Like Illness (CLI) in N.C.



COVID-19: Testing Methodology Updates

June 15, 2020





Types of Tests





- ☐ Two types of diagnostic tests
 - □ molecular (RT-PCR) tests that detect the virus's genetic material
 - antigen tests that detect specific proteins on the surface of the virus





- ☐ Looks for antibodies made during immune response
- □ Antibodies can take several days or weeks to develop after infection
- □ Antibody tests should not be used to diagnose an active coronavirus infection
- ☐ Unknown how antibodies correlate to immunity



Diagnostic Tests

Laboratory

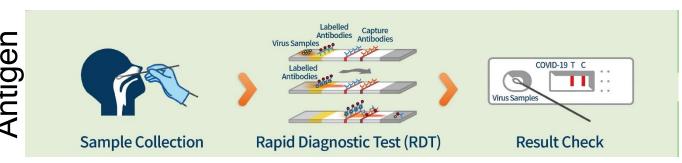


► Sensitive ► Specific ► Several hours ► High throughput

POC/Near-Patient



POC/Near-Patient



- Less Sensitive
- Specific
- Minutes
- ► Low throughput

FDA EUAs

Date SUA Pirot bound -		Diagnostic (Wost Recent Letter of Authorization) (PDF)	Technology I	Authorized	Authorization Labeling ² (PDF)	9-05/11/2000	Telrapire.	Teagy COVID-15 (PCR Multi Kit (\$55KG)	Meleculer		HCP (34743) Petiens (36443) IFU (3.61443)	W 04/08/2222		80 SARS Cain Skepperts for 80 MAX System (STEKS)	Malessler	8,0	HOP (12 Petient IFU (2.5
₩05/12/2020		Dispressor SARS Contra Resistera FCR (0.014800)	Moleculer	H .	HCP (1/29/2) Petiens (129/2) Pt (229/2)	Wesniess		Alinty in SARPCOPE enery (390/00)			HCP (20003) Retients (12142) IFU (\$1042)	0.04.08.3133		Quertifica \$485- Colf 2 Test lot (\$1902)	Melecular	*	HOP (12 Patients IPU (62)
	Products Pharmacoultes and Mackinery Industry					© 08/08/0000		Sefe 2 SARS Artigen FIA (129/E)		H, M, W	HOF (129(2) Patients (127(2) IFU (1.9(4)	W0407/2020	indice internetional, inc. Snameper LLC	Smort Detect SARS- Cell's (PPRCE IO) (12003)	Melecular		HOP (28) Petients (FU(1.20) HOP (12)
₩ 08/10/2020		Cue COVID-19 Test (16668)	Molecular	H, M, W	HCP (140KB) Patients (132KB) IRU (6.15KB)	# 05/07/0000		Gromager COVID-10- RT-gRCR Detection Kit (21-042)	Meleculer Meleculer		HCF (129(E)) Patients (122(E)) IFU (1.20(E))	P04/02/2020		Gramager COVID-19 RhOlphal PCR Detector Kit (220KG) ARISS SARE-CHYS	Malandar	4.0	Peters IFU(227 NOF (12
Wos/10/2000	tes Blotechnology Corp.	ExPloSe SARP Corrs Teating Kin (142KB)	Malesular	*	HCP (1 4943) Patients (12743) IFU (42043)			PCR (316(4)	Malecular		HCP (2594) Peters (2194) IFU (6214) HCP (2194)	¥04/03/2020	Special	Assay (12808) ScienCell SARS/Cell/2	Meleculer		Patients IPU(5.22 HOP (1.6
Posnoces	Tide Laboratories, LLC	OTEN COND-15 RP POR THAI (135KB)	Melesvier	×	HCP (16892) Patients (12092) BUA Summery (17092)	W08/08/2020		OFFI SARS COVER RT POR Test (\$1542) Sharlack CRISTR	Melweuler		HOP (210/02) Petients (221/02) IDV (210/02) HOP (280/02)		Cordinated to Cordinated to Cordinated to Cordinated to Cordinated to Cordinated to Cordinate to	Coronarius Basitima RNACR (RNyPCR) Detector Kit (\$1992)	Veletiler		HOP (1.6 Petients IFU (212
₩ 08/10/2000	indies interestional,	SCH112 Delett IgG SUSA (107HB)	SeeingrigS	×	HCP (\$43KB) Bedrings	P05/06/2020	inc.		Melveyler		HCP (250G) Patients (150G) (FU (1.154G) HCP (250G) Patients (151G) (FU (1.164G)	************	in.	Coronaviva Disease 2219 (CDVID-19) KK (217/02)	HO MOLEY	•	HCP (12 Petients IFU (cre
¥06/09/2020	(fumbs, inc.	Humina COVIDSes Test (10040)	Moleculer	×	(165/2) (FU(71002) HCP(731/2) Patients (11602)	W-05/05/2000		(4234) FTD SARDCHYS (2004)	Melwouler	×	HCP (12142) Potenty (12142) Potenty (12142) Ity (12142)		Diskinger & Company (\$0)	BIODIX SARS-COVED Respects for BD MAX System (150/00)	Melveyler	8,9	HOP (12) Petients (FU(2.7)
¥ 06/09/2020	ChromeCode Inc.	HOPOR SARS-Colvid Asset (72242)	Molecular	×	PU (2790E) HCP (130E) Peterte (1310E) ISU (790EE)		Lucambeurg S.A.A. (a Siamers Nachhineans Company)				(FU (\$100KE)	W 04/01/2020	Calles Inc.	gSARS-Covid (gSingle) Regid Text (1-00KS) (Referred June 12, 2022)	Sarology ight and igS	8,0	HOP (12) Patients IFU (226)
U 08/08/2020	Eurolement US Inc.	\$URDRed*Time \$ARD- CoVID (128/B)	Malesular	×	HCP (15642) Patients (KE)	E-08/04/2000	Company) BURDINIUM US Inc.	AHPSARDCOVS SUSA (qS) (22342)	Seving 195	×	HOF (LDEE) Recipients (STICE) ITV (2010E)	W 04/01/2222	igaum Dispressios, UC	CDV11 (Dx ease) (260/G)	Melecular	*	HOP (12) Petients DUA Sun
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W08/08/2020	Demons Sentens Healthcom	Cimeration Visite SARP-CAVIS Total	Teral Archesty	ж, и	HCP (1884S)	W 08/02/2000		Newl Commentus (2019+CaV) Nucleic Acid Dispressio fo (FCP-Dispressores Proking) (\$5042)		8,00		¥ 02/20/2020	CIASSIVSHBA	Connector Respiratory SARD Cothil Penal (12848)	Melessier	и, и	HOP (16 Patients IFU(1.8)
¥06/06/2020	Dispression Inc. Denotion Health (Delphy)	COVET (24842) COVET (24842) Senatron SASP-CoVPC BIA Test (22042)	Melesvier	×	(129/2) (FU(1.51/42) HCP(151/42) Patients (120/2)		Diegrestics	Carra (2024)	Swology Antibody	-	HOP (149/00) Redplants (129/00) IRU (121/00)	₩ 62/27/2020	Dispresites Southersun).		Melveyler	H, W, W	HOP (12) Petients (FU(2.5)
¥08/06/2020	Co., Ltd.	Vibrant COVID-19 Ab Assety (380/3)	Seology IgM and IgG	*	IFU (20048) HCP (12749) Recipients (15949) BUA Summery		Leboratories, inc.	Burkel SARPCHIS 66PCR Test (\$1943)	Melecular		HCP (127KE) Patients (125KE) IFU (1.56KE)	¥02/27/2020	Luminer Malessier Claressies	NoTAG Call Schedold Penal Assey (21002)	Melveyler		HOP (12) Patients IFU (16)
					(157VZ)	# 06/20/2020	Diagnostics, LLC	Blefire Respiratory Renal 1.1 (RPL1) (40048) New York SARS-CoV	Service Total	4,11	HCF (139/E) Patients (129/E) IRU (1.20/E) HCF (159/E)	¥02/26/2020	ing.	Res [†] Time Fluorescent stress to far	Melveyler		HOP (16) Patients IFU (001
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₩ 08/04/2020	Kengshev Blotest Blotesh Co., Ltd.	Rightstyn COVID-15 IgS/IgAV Rapid Team Cossette (225/G)	Seeingright and igS	*	HCF (32/0) Recipients (129/0) FU (82/0)	W-04/29/2000	Phaenir, inc.	Rheoric COVID-19 MOv Assey (72242)	Melweuler	*	HCP (1011G) Patients (211G) IFU (2.07HB)	¥02/26/2020		Coronavirus Nucleic Autil Ownestiur ICI (219 KB)			HOP (12) Patients IFU (27)
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₩06/01/2020	Grenty Dispression, U.C.	Gravity Diagnostics COVID-19 Assets (27048)	Molecular	×	HCP (250KB) Patients (188KB) But Summery			Ortection (It (12902)	Meleculer	*	HOF (143KS) Patients (125KS) IFU (1.00KS)	© 02/23/2020		Text (222 KG)	Malessler	H, W, W	HOF (12) Patients IFU (2.2)
¥05/39/3000	Samero Hashinera Clapsositas	ADVIA Centeur SARS- Cell*D Telel (COVZT) (227/02)	Total Artibody	R,W	(250(E) HCP (EDG) Seciplents (126(E) (FU (1.26(E)	¥06/28/2020	Abbert Laboratories Inc.	\$400 Ce1/2 (gS essey (367/6)	Services (gS anily		HCP (112KE) Bestylente (127KE) IRL-ARDHTECT (188KE)	© 02/20/202		Primeriesign Ltd COVID-15 generally Red-Time PCR costsy (120/02) Xpert Xpress SARP Covid lead (102 KE)	Velevie	K.W.W	HOP (12) Patients IFU (1,01) HOP (12)
¥05/39/3110	Siemers Hashinare Dispression	And Total (COVET) 2 Tend (COVET) (22948)	Total Artibody	RW	HCP (EDG) Redplants (129/E) IPU (1.05ME)	¥06/26/200	DieSerin inc.	UAISON SARSONYO ST/SD (go (SRBKS)	Services (qS enly	4,0	(2.51 Mg) HCP (12 Mg) Recipients			Carro test (140 KB)			HCP (12) Fetterts IPU - Leb (21042) IPU - Pet (1.42/HE
¥05/29/2020	Hazigan Selaminin LLC	COVID-19 IgS/IgM Rept Test Cossette (Minis Blood/Serum/Pleams	Seology IgN and IgG	R,W	HCP (\$148) Recipients (136/8) (FU (\$5148)	¥06/26/202	Orine Cinical Dispression	VITROS Immunellegreette	Serology igS only	н, м	Re(glants (1200) PU (2000) HOP (1500) Re(glants		Didderin Melesyler U.C	Simpless COVID-19 Direct (10242)	Melveuler	8,0	HCP (12) Petients IFU (622
¥05/28/2020	Principali Decreation	(259/E) LessEelChecked	Moleculer	*	uce huara)		inc.	Immunellagrante Products Anti-SARS- Col/1 (gS Respert Peck (27008)			(129/2) (129/2) (FU (225/2)	W 02/19/2020		effectivene Two (126KE)	Malessier	4,4	HOP (14 Petienta IFU (257
	ing.	16) Teat (28243)			Peterts (12002) IFO: Home Collect (25902) DUA Summery (5002)	# 04/24/2020		Rept Next (228/00)	Seniegright and igS Nalecyler	4.00	HCF (3318) Recipianta (9318) IFU (35018) HCF (13518)	Wear 8 2020		Abbert Resiliera SARD-Carril assay (320/8)	Meleculer		NOP (15) Patients (FU (25)
W 05/32/3120	dbe Spectroniks	Hymon SARS Col/12 Test (h (122/2)	Malesular	×	HCP (10942) Patients (STH2) Its (33342)	P0/22/200	ire. eltone	Resister SARS-CoVIII			Personal (12042) (FU (20042) HCP (12042)			Lyne SARS-Col/1 Assety (20042)	Makester		HOP (12) Petients IFU (CTS
₩ 08/21/2020		BisCore 2019 HCs/F Real Time PCR ISS (41548)	Meleszler	×	HCP (353/S) Patients (150/S) IPU (1.57MS)	B0021/2000	Diegrastics Omiss Saspana, Inc.	279 CR (15 U.S. (150 G) Algies 2015 + Cay	Malessier		Retent (12642) ITU (86642) MOF (12642)	© 02/17/2020	Dispression Infections Disease, Inc.	Quant SARS-Covins ARPPOR (29742) (released May 27, 2220)			HOP (12) Patients IPU (257) IPU (Hor Collect)
₩ 05/21/2020	SelSen Co., Uni.	DisPlacQ Novel Consentive (2019- nCot) Detector Kt (2020)	Moleculer	×	HCP (250KE) Patients (200KE) IFU (2.08ME)	P-01/202020	Tree	Assay (12018) Present 0: 2010 Cerr (12008)	Melweyler		Patients (12142) (FU(2.0042) HCF (14942)	W02/16/2020	Hologis, Inc.	Penther Fusion SARS- Col/12 Assets (2004)	Melveuler	*	Peterts Invited
₩05/21/2020	Secour Demotorials, Inc.	Ag-10P COVID-19 Repti Detector IOI (2004)	Moleculer	*	HCP (250/G) Patients (152/G) (Fo (1.00/G)	P06/16/2020		GeneRader COVID-19 Plus Residence (C)	Melwouler	×	Petiens (12002) (FU (02502) HCP (12702) Petiens (12502) (FU (03002)	E 03/16/2020	Leberatory Corporation of America	COVID-15 RTHCR Two (290/0) (Resound April 20, 2000)	Malessier	*	HOP (12) Patients BUA Sun
₩es/1\/2000	P23 Labo, LLC.	P22 Labs TegPath SARS-CoV-1 Assey (27249)	Molecular	×	HCP (20042) Petietts (19042) IFO: Home Collect (50042)	W 06/17/2000	Feaun Pharma USA Inc.	(2008) Result COVID-19 RP PCR Detection fot (21708)	Malecular	×	HOF (24942) Potiets (15042) FU (26042)						HCP (12 Patients QUA Son (12842) IFU - Hor Collectio (2.2644)
Person	DAM	Lync Diver \$100 Conn 1 Apple (2000)	Melesvier	×	BUX Summery (829/E) MCP (280/E) Patients (180/E)	Poursamo		GS COVID-15 EPPCR KIT (\$17KB)	Melweuler	*	HCF (133KS) Fatients (121KS) IFU (038KS)		Therms Daher Scientific, Inc.	TegReli COVID-15 Combo KX (100KE)	Velesie		HOP (12) Patients IPU(629
¥es/is/see		Swippel COVID-19	Rome Collection (I)	N/A	FU (2002) FU (2002) FU (2002)	P06/16/2020	Constability	Curefrantione SARS- Cerril Assey (20012)	Melweuler	*	HCP (139/E) Petients (139/E) 824 Summary (101/E)	¥02/12/2020	Meleszler Systema, Inc. (RHS)	(11162)			HOP (35 Patients (FU(1.5)
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Pesasann		Assurance SARS/Conn 2 Panel (20742)	Malecular	*	DJA Summery (20542) HCP (12742) Patients (12542) DJA Summery	W06/18/2020	Mount Sinel Leboratory	CDVID19 BUSA (gS Arribody Text (22942)	Servicey lgS	*	HCP (230G) Petients (256G) BUA Summery (2016G)	W 02/04/2022	coc	(21002) (Retenued 09/10/0000)	Malecular		HOP (12) Patients IPU(1.16)
Wesnersee		Aptina SARS Carris essey (121/03)	Malesular	×	DJA Summery (2001E) HCP (1001E) Patients (971E) (FU (2001E)	# 06/16/2020	Ortho Cinical Dispression, Inc.	VITROS Immunodegreatic Prefuets Anti-SASS- CoVS Total Respect	Serology Total Antibody	8.0	HOP (22003) Redpletts (12103) IRU (27003)			Coronerius (2019- nCeri) Resistant Re- FCR Dispressio Ferral (200/2) (Relused 03/15/2020)			IFU(1.76
© os/16/2020	Ceretiens, Inc.	NeePlet CDVID-15 Detection Ct (12502)	Melesvier	×	MCP (7 ESKS)	¥06/162000	Chamble Dispression System, Inc.	Peck (27942) 099 00V0113 Intiting System	Serology IgN and IgS	H, M	HC (239G) Network (239G) No (1,004G)					_	
W05/13/2020	Applied DNA Sciences, Inc.	Unes 001/0-19 Asset (0) (202/0)		*	PU (\$2702) HCP (\$2302) Petients (13102) ISU (\$1002)	BALCATES.		(3690E) IAMP COVID-19 Detection (It (120GE)	Malwouler	×	HD (1.06VE) HDF (12TKE) Patients (120KE) ITU (220KE)						
					(F) (2100E)	W04/10/2020	ne. Bulgara Cinteal Caronica	Rutgers Chrisel Senomics Laboratory	Meleculer	*	HO (2002) HOT (2003) Patients (19262)						

Diagnostic Tests

POC/Near-Patient

Check Instructions for Use for Limitations:

Negative results should be treated as presumptive and, if inconsistent with clinical signs and symptoms or necessary for infection control or patient management, should be tested with different authorized or cleared molecular tests.

Who Gets a Test?

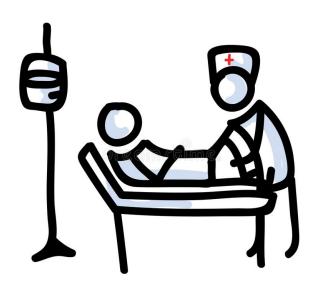


Clinicians should conduct or arrange for diagnostic COVID-19 testing for:

- Anyone with symptoms suggestive of COVID-19
- Close contacts of known positive cases, regardless of symptoms
- The following groups are some of the populations with higher risk of exposure or a higher risk of severe disease if they become infected. People in these groups should get tested, if they believe they may have been exposed to COVID-19, whether or not they have symptoms.
 - People who live in or have regular contact with high-risk settings (e.g., long-term care facility, homeless shelter, correctional facility, migrant farmworker camp)
 - Historically Marginalized populations who may be at higher risk for exposure
 - Frontline and essential workers (grocery store clerks, gas station attendants, child care workers, construction sites, processing plants, etc.) in settings where social distancing is difficult to maintain
 - Health care workers or first responders (e.g. EMS, law enforcement, fire department, military)
 - People who are at high risk of severe illness (e.g., people over 65 years of age, people of any age with underlying health conditions)
- People who have attended protests, rallies, or other mass gatherings could have been exposed to someone with COVID-19 or could have exposed others.
 - Testing should be considered for people who attended such events, particularly if they were in crowds or other situations where they couldn't practice effective social distancing.

NCDHHS | COVID-19: Testing Update June 15, 2020

Linda is a 55 year old home health aide with diabetes and hypertension. She has been working full time and is worried about being exposed to COVID. She sends a message to her PCP about whether she can get a test. What is the best answer?

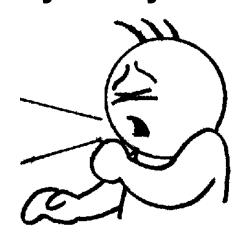


Tameika is a 23 year old healthy server at Waffle House and she has been working overtime since the restaurant opened to dine in customers. She wears a cloth mask at work. She lives with her parents and her dad is currently in chemotherapy for colon cancer. Should she get tested?



Raul is a 29 year old otherwise healthy construction worker who feels fine. He does not have health insurance. His income supports his family of 5. Several people on the job site have been out sick and his wife wants him to get a test but his boss has said not to worry. What are Raul's

John is a 19 year old with a past medical history of mild intermittent asthma and seasonal allergies who has three days of mild cough, fatigue and decreased appetite. He attended several protests over the prior weekend but wore his mask faithfully. His mom told him to get a COVID test but his PCP's office said since his symptoms were mild he didn't need to. What would you say?



Angelica is a 26 year old Spanish speaking pregnant farmworker who recently arrived in NC from FL where she travelled in a large van for two days. She feels fine today and is not sure where she will go for pregnancy care in NC. What would you advise her to do for testing?

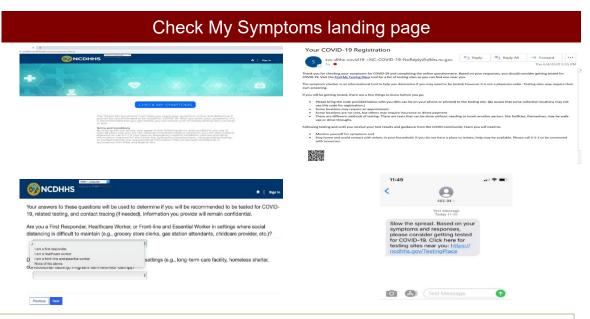


Betty Anne is a 74 year old active member of her local church choir. They have been having church with the windows open and people sitting away from each other. She only rarely goes out for grocery shopping and church and volunteers at the local library reading program. Should she get tested?



What is the Check My Symptoms Tool?

Individuals may use the Check My Symptoms Portal to input key information related to need for testing (i.e., healthcare worker status, chronic diseases, COVID-19 symptoms, age, etc.).*



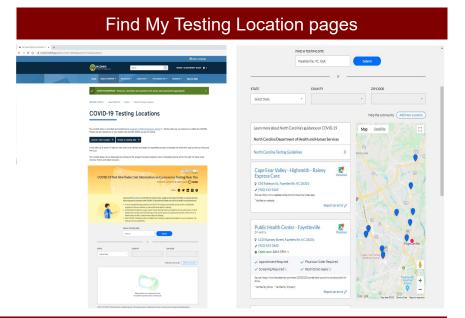
- Residents will utilize the tool to understand if they should get tested
- Individuals will receive either a text message or email depending on their preferred method of contact
- https://ncdhhs-covid19-dtra.powerappsportals.us



What is the Find My Testing Location Tool?

Individuals may navigate to the Castlight COVID-19
Test Site Finder, either via the link in the email/text
message following the Check My Symptoms
Portal or via the NCDHHS public website.

- Residents will utilize the tool to find a testing location near them
- DHHS will utilize the tool to report on the number of testing sites available
- Residents and LHDs will use the tool to register a new test collection site



How it works

Individuals will then enter their address, city, county or zip code of interest. Individuals will then see a list and map of closest testing sites along with pertinent information. In order to get tested, the individual will need to follow the instructions for the particular testing site. This could be via walk-in appointment (i.e., at urgent care facility) or by calling to schedule an appointment and getting a physician's order (i.e., at primary care practice).

https://covid19.ncdhhs.gov/about-covid-19/testing/find-my-testing-place

Request for Qualified Vendors (RFQ)

Provides greater transparency for businesses into the State needs related to COVID-19 Testing and Contact Tracing



Increase testing

115,904 tests were completed over the past week (6/8-6/14)

- **16,557** 7 day rolling average
 - Source: covid19.ncdhhs.gov/dashboard/testing

RFQ will permit NCDHHS to contract with vendors to run high throughput & directed mobile collection sites



Equity access to opportunities

- Executive Order No. 143 to address disparities in communities of color that are being highlighted and intensified by this pandemic
- NC DHHS worked with North Carolina Historically Underutilized Business Office (HUB) in this RFQ



Reserve lab capacity

- Currently have ~32 private and hospital labs performing COVID-19 testing
- State Lab may need to reserve additional laboratory capacity to support initiatives



Offers Flexibility & Directed Community Resources

- Anticipate up to possible 3000 total contact tracing staff to support efforts
- CCNC is now authorized to hire 450 Case Investigators, Contact Tracers and support staff
- Provides additional way to meet demand for community-based resources
 - Bilingual, Spanish in high demand
 - Connecting with community

Reimbursement for Testing Overview

Who Should I Bill for Testing?

All major insurers, including commercial insurance, Medicare, and Medicaid will generally cover COVID-19 testing for their enrollees when it is ordered by a provider. (Medicare and Medicaid also may cover testing in cases where the test is not ordered by a provider.) Providers should bill insurance for COVID-19 testing. Coverage of testing is also available for uninsured individuals under the HRSA COVID-19 Uninsured Program.

Should Patients be Charged Cost Sharing for Testing?
 No. Under the Families First Coronavirus Response Act (FFCRA), COVID-19 testing must be covered at no out-of-pocket cost for individuals enrolled in most private coverage, Medicare, Medicaid, or CHIP.

Reimbursement for Testing through HRSA

Which Providers Can Bill the HRSA Uninsured Program?

Any health care provider who is able to conduct COVID-19 testing under NC law and is able to complete the required attestations and electronic claims submission process, may enroll in the HRSA program. This includes pharmacies and laboratories.

A provider does not need to be enrolled in Medicare or Medicaid to bill HRSA, but providers on the HHS Office of the Inspector General List of Excluded Individuals/Entities and/or any provider who has had their Medicare enrollment revoked by CMS do not qualify for the program. Vendors conducting testing outside of health care provider settings, for example in a pop-up testing site in the community, should ensure a health care provider (such as the laboratory processing tests) is available to bill HRSA for this testing.

Will HRSA Cover Testing for All Uninsured Individuals?

HRSA will cover COVID-19 testing for the vast majority of uninsured individuals, including anyone who is not covered by an individual or employer-sponsored plan, a federal health care program, or the federal employee health benefits program at the time of testing. A provider does not need to assess whether an uninsured individual is <u>eligible</u> for another form of coverage, only that they are <u>not currently enrolled</u> in another form of coverage.

Providers should ask whether the patient has Medicare, Medicaid, or commercial or employer insurance, like Blue Cross Blue Shield. Providers should also consult the Medicaid eligibility system to confirm whether an individual is enrolled in Medicaid when determining whether to bill Medicaid or HRSA. Based on the guidance currently available, individuals enrolled in the Medicaid Family Planning Program appear to be considered enrolled in Medicaid, despite the lack of Medicaid coverage for COVID-19 testing, and appear to be ineligible for HRSA testing coverage. The State is encouraging CMS and HRSA to address this oversight.

Will HRSA Cover Testing for Undocumented Individuals?

Providers are not required to confirm immigration status of uninsured individuals. While a provider must attempt to gather an SSN or state identification/driver's license before submitting a claim, neither an SSN nor a state identification/driver's license is required to qualify for HRSA coverage. Claims submitted without this information may take longer to process, but should not be denied. Note that HRSA coverage is not on the list of public benefits subject to the "Public Charge" rule, and use of this program should not affect citizenship or green card proceedings for immigrants.

Linking to Resources

HTTPS://FILES.NC.GOV/COVID/DOCUMENTS/GUIDANCE/HEALTH CARE/COVID-19-PROVIDER-GUIDANCE-FINAL.PDF

HTTPS://FILES.NC.GOV/COVID/DOCUMENTS/COMMUNITY-TESTING-GUIDANCE.PDF

HTTPS://COVID19.NCDHHS.GOV/INFORMATIO N/HEALTH-CARE/REQUESTING-PPE HTTPS://COVID19.NCDHH S.GOV/ABOUT-COVID-19/TESTING

HTTPS://COVID19.NCDHHS.GOV/INFORMATIO
N/HEALTH-CARE/REQUESTING-SPECIMENTESTING-SUPPLIES