# Children's National and the Pediatric Health Network COVID-19 Update January 6, 2022





#### Introduction and Welcome

Ellie Hamburger, M.D.

Medical Director

Pediatric Health Network







## Notes About Today's Town Hall:

- All lines are muted throughout the presentation.
- Please use the Q&A to ask questions or make comments.
- We will be recording the session.
- Today's recordings and materials will be posted to the Children's National website and the Pediatric Health Network website following the presentation.
  - --ChildrensNational.org
  - --PediatricHealthNetwork.org





#### AGENDA

#### Situational Update

Roberta DeBiasi M.D., M.S., Chief of Infectious Diseases

#### Caring for Hospitalized COVID Patients

Susan Walley, M.D., Chief of Hospital Medicine

#### A View from the ED

Joelle Simpson, M.D., Chief of Emergency Medicine

#### **Immunization Update & Office Coding Tips**

Claire Boogaard, M,D., MPH, Medical Director COVID-19 Vaccine Program

#### Pediatric Health Network





### **COVID-19 Situational Update**

#### Roberta L. DeBiasi, M.D., M.S.

Chief, Division of Pediatric Infectious Diseases Children's National Hospital/Children's National Research Institute

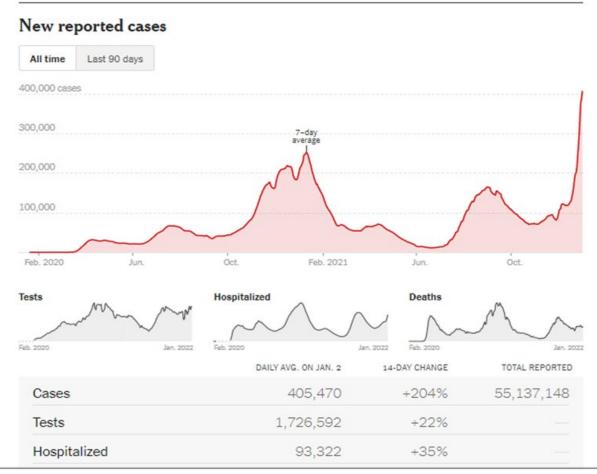
Professor of Pediatrics and Microbiology, Immunology and Tropical Medicine The George Washington University School of Medicine and Health Sciences







#### United States 14-day New Case Trend - As of January 3, 2021



#### Vaccinations

	AT LEAST ONE DOSE	FULLY VACCINATED
All ages	73%	62%
12 and up	84%	71%
65 and up	95%	88%

About this data

#### State of the virus

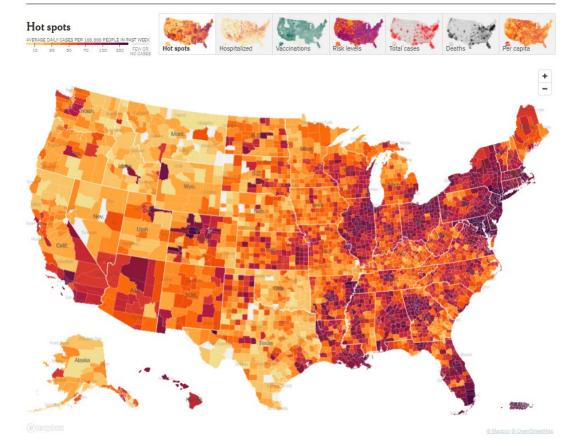
Update for Dec. 30

- · The United States is averaging more than 300,000 new cases a day for the first time in the pandemic. Hospitalizations are growing at a much slower rate than cases.
- · Urban areas in the Northeast are seeing explosive case growth. In Washington, D.C., reports of new infections are up about 800 percent over the last two weeks. In New York City, new cases have increased 600 percent.
- · The Colorado counties that include the ski

#### Global, National and Local as of January 3, 2021 – 7 day trend

	Global	US	DC/MD/VA	Greater DC Region Only
Total Cases	290,851,926	55,134,881	1,950,241	746,501
Percent Change (since last week)	87.7%	102.2%	78.5%	72.9%
Total Hospitalizations		3,699,203	139,998	
Percent Change (since last week)		30.7%	64.3%	
Total Deaths	5,462,340	824,425	28,668	8,926
Percent Change (since last week)	-2.8%	-6.0%	56.6%	66.9%
Case Fatality Rate (7 day average)	0.4%	0.3%	0.6%	0.1%
New Cases Per 100K (7 day average)	17.6	126.2	146.6	265.0
Test Positive Rate (7 day average)		22.1	27.9	26.6

#### US Hotspots – as of Jan 3<sup>rd</sup>, 2022



# US Overall Case Rate(per 100K) 122 (204% increase)

#### **Highest Case Rate States (per 100K)**

- New York = 318 (283% increase)
- DC = 298 (485% increase)
  - Second highest in nation

#### **Other Local Case Rates**

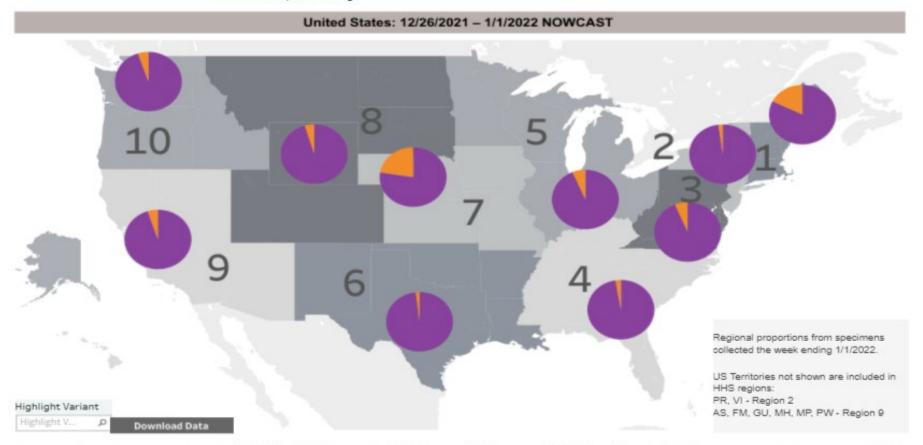
- Maryland = 174 (687% increase)
- Virginia = 116 (258% increase)



#### SARS-CoV-2 Variant Proportions in US through Jan 1, 2022 Omicron now 95% of Isolates



### Omicron Proportions by US Region through Jan 1, 2022



# Children and COVID: AAP/CHA data as of December 30, 2021 (Includes Omicron)

- Cases
  - 7.9 million cumulative child COVID-19 cases reported
  - Children represent 17.4% of all cases cumulatively
  - Children represent 17.7% of cases in past week
    - down from 25.1% of all cases 2 weeks ago



- Hospitalizations:
  - Children still represent only up to 4.0 % of all COVID hospitalizations
  - 0.1-1.6% of pediatric cases resulted in hospitalization
- Deaths
  - <0.25% of COVID deaths are in children</p>
  - <0.05% of COVID cases in children result in death</p>









#### Children's National COVID-19 and MIS-C: March 15, 2020- January 4, 2022

#### COVID

Cumulative **7023** COVID+ symptomatic patients

- **100-200** new COVID+ symptomatic patient tests per day
- 48% Test Positivity New record highs
- 8-19 new COVID+ admissions per day in past 2 weeks
- Cumulative 1088 COVID+ patients admitted
  - 333 (31%) critical care (294 PICU, 39 NICU)
  - 755 (69%) acute care
- Current census COVID+ = 48 (3 NICU, 10 PICU, 35 Acute)
- Peak COVID + census was 56 earlier this week

#### MIS-C



MISC: 210 cumulative – no Omicron-related surge noted yet

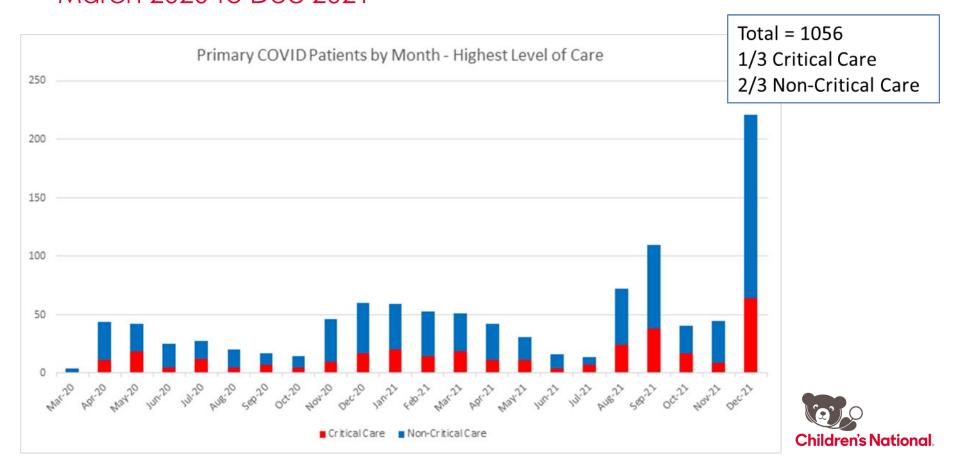




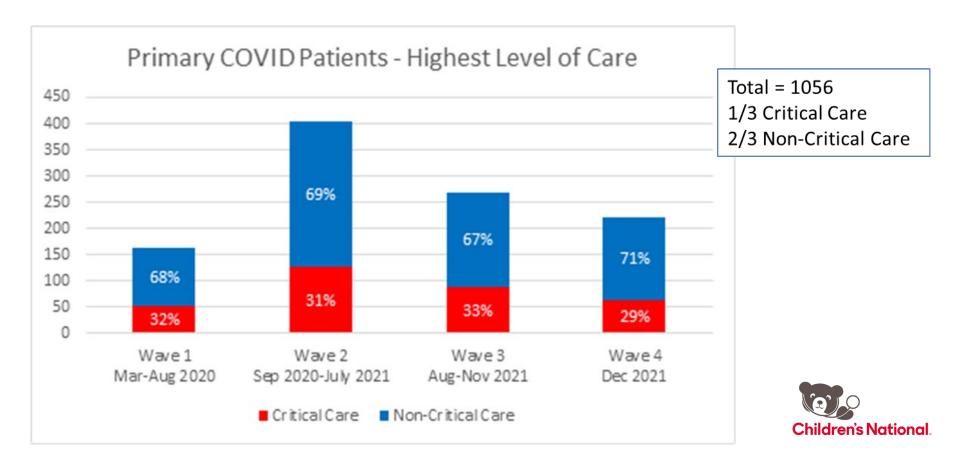


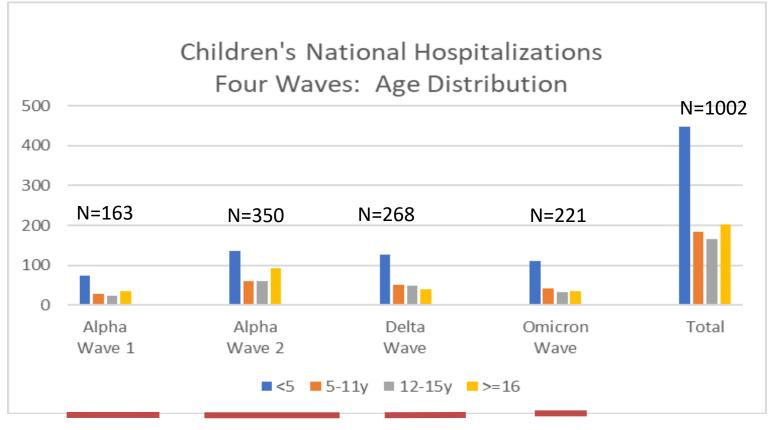


# Children's National Timeline of COVID Admissions by Month – March 2020 to Dec 2021



# Children's National Timeline of COVID Admissions by Wave: March 2020 – Dec 2021





March-Aug 2020

Sept 2020-July 2021

Aug 2021- Nov 2021

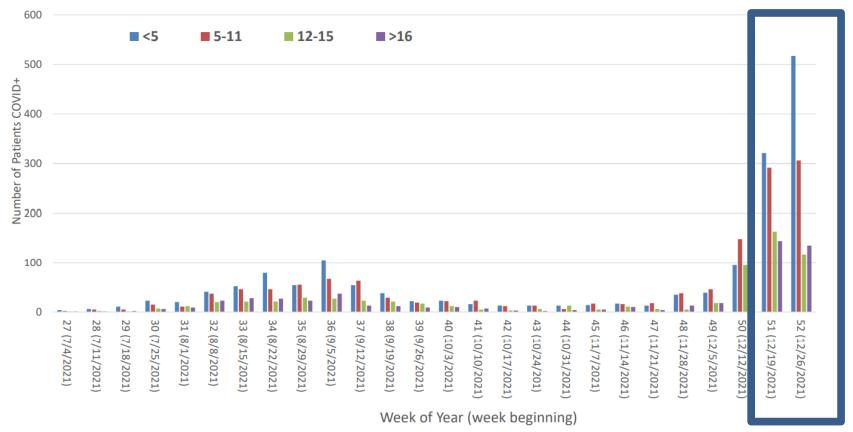
Dec 2021 - present

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# CNH Lab-confirmed COVID-19, Delta vs. Omicron (7/4/2021 - 1/1/2022) Number of Patients Testing Positive By Age Distribution



#### Omicron Admissions By Age: December 1 – 30,2021

Youngest age groups make up majority (70%) of hospital admissions

Of 185 pediatric patients admitted to CNH during Omicron Wave:

- Age <5 years = 91 (49.2%)</li>
- Age 5-11 years = 37 (20.0%)
- Age 12-15 years = 27 (14.6%)
- Age > 16 = 30 (16.2%)

#### Note

- In US, Age 5-11 age group, only 14% are fully vaccinated and only 23% have had one dose(despite eligible since November)
- 0% of <5 years of age are fully vaccinated (not yet eligible)</li>
- In contrast: In the 12–17-year-old group, 53% are fully vaccinated

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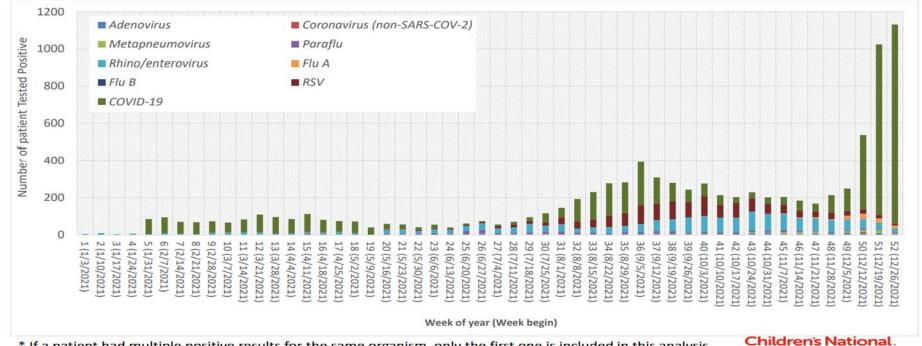




#### Children's National Weekly Respiratory Viral Surveillance

Data Courtesy of Dr. Xiaoyan Song; Epidemiology and Infection Control Team

#### Virus- Specific, 1/3/2021 - 1/1/2022



<sup>\*</sup> If a patient had multiple positive results for the same organism, only the first one is included in this analysis

#### Pediatric COVID Outcome Study (PECOS)

- Recruiting children less than 22 years old
- 3-year long study; 1,000 participants
- Participants will receive \$40 per visit
- Accepting children with or without COVID-19
- Echo, EKG, Cardiac MRI, PFTs, Chest CT, labs, COVID Antibodies, stool, urine testing, surveys
- ChildrensNational.org/COVIDstudy

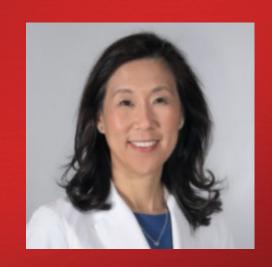






## Caring for Hospitalized COVID Patients

Susan Walley, MD, NCTTP, FAAP
Chief, Division of Hospital Medicine
Professor of Pediatrics
The George Washington University
School of Medicine and Health Sciences





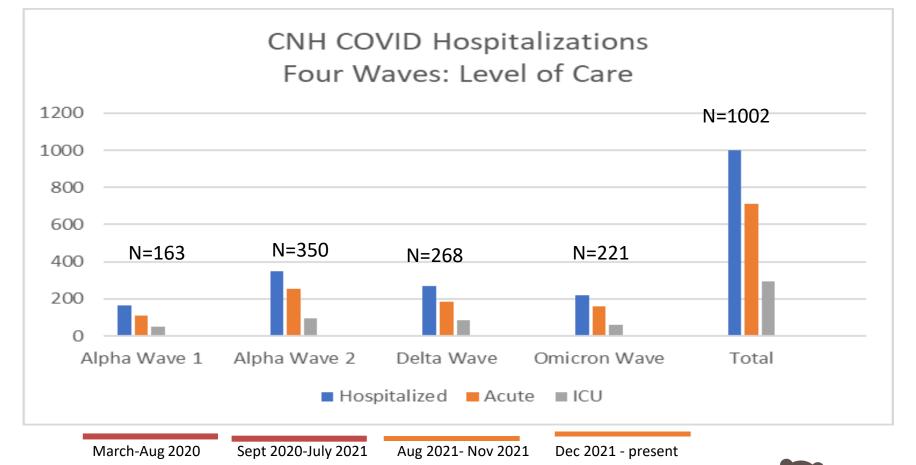


# COVID Hospitalizations at Children's National: As of January 5<sup>th</sup>

- CNH hospitalists cared for the majority of the 1102 hospitalized COVID + patients
- COVID+ inpatient census is 52 patients
- Approximately 1/3 require ICU level care (consistent throughout pandemic)







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## The Omicron Wave

- Younger patients (<5 years)</li>
- More upper airway symptoms (i.e. croup)
- At community sites, seeing many COVID+ mothers with newborns testing negative





# Being Hospitalized During COVID: What Patients and Families Should Know

- All admitted patients are screened for COVID
- Until the screen returns, the presumption is the patient is COVID+
- For COVID+ patients, only one family member may stay with the patient
- All providers will be wearing a PAPR (powered air purifying respirator) or PPE to protect themselves and others





# COVID Hospitalizations: Admission Criteria

- No COVID specific criteria for admission
- Symptom-based criteria for admission similar to other viral illnesses (hypoxemia, dehydration, respiratory distress, stridor at rest)





# COVID Hospitalizations: Treatment

- Treatment is mainly symptomatic
- If hypoxemic requiring oxygen, treatment includes IV remdesivir (5-day course) and systemic steroids





# Multisystem Inflammatory Syndrome in Children (MIS-C)

- 210 total patients with MIS-C admitted to CNH
- Depending on symptoms, COVID+ patients may have screening labs for MIS-C
- Have not seen an increase with omicron (too soon)





## Thank you!

swalley@childrensnational.org





### A View from the ED

Joelle Simpson, M.D. M.P.H
Chief of Emergency Medicine
Medical Director of Emergency Preparedness







## Emergency Department COVID Response

- Increased COVID testing capacity (with patient call back follow ups)
- Providing COVID therapeutics to eligible patients
- Increased regional consultations for management and transport
- Leaders in regional and national forums in emergency management of children with COVID





#### ED patient referrals

- Emergency Department Transfer Center: 202-476-LIFE (5433). Available 24/7.
  - Intake nurse
  - Pediatric emergency medicine physician





## Immunization Update & Office Coding Tips

Claire Boogaard, M.D., MPH Medical Director COVID-19 Vaccine Program







#### **Vaccines**

- Our region is ahead nationally
  - MD, VA, and DC are in the top 12 "states" for fully vaccinating kids 12-17yo (NYTimes)
  - DC as #3 for children 5-11y and #1 for children 12-17yo having received at least one dose (Mayo Clinic)
  - DC as #5 in the nation for vaccinating 5-11yo (<u>Kaiser Family Foundation</u>)
- Children's National efforts:
  - Over 22,000 doses administered to over 13,000 individuals
    - 67.3% given to individuals in high-risk neighborhoods: 42.6% DC Priority Neighborhoods, 24.7% Prince George's County
    - 59.4% are African American/Black and 14.6% are Hispanic
    - Over 4,000 patients ages 5-11yo

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### Newest updates

- FDA and CDC approved changes for the Pfizer-BioNTech vaccine:
  - 12-15yo now eligible for boosters
  - All boosters can be given 5 months after 2<sup>nd</sup> dose of Pfizer vaccine for all individuals 12yo and older
  - 5-11yo immunocompromised now approved for 3<sup>rd</sup> dose (28 days after 2<sup>nd</sup> dose)
- Dosing for children turning 12y between dose 1 and dose 2: 4 options
  - Pediatric/orange cap for both dose 1 and dose 2
  - purple cap/Comirnaty (the current 12y+) for both dose 1 and dose 2
  - grey cap/Pfizer-Tris (the upcoming 12y+) for both dose 1 and dose 2
  - orange cap for dose 1, purple/grey for dose 2







Age	Vaccine	Dose 1- 2 (ideally 21-42 days apart)	3 <sup>rd</sup> dose for immunocompromised (given 28 days from 2 <sup>nd</sup> dose)	Booster (given 5 months after 2 <sup>nd/</sup> 3 <sup>rd</sup> Pfizer dose, 6months after 2nd Moderna, or 2months after J&J)
6mo-4 years	Not authorized	<ul> <li>Not authorized</li> <li>Moderna results Q1 2022</li> <li>Pfizer 3<sup>rd</sup> dose results Q2 2022</li> </ul>	Not authorized	Not authorized
5y-11y	Orange top (EUA): 10mcg/0.2mL	Pfizer COVID-19 vaccine consent signed by legal guardian	Pfizer COVID-19 vaccine consent signed by legal guardian	Not authorized
12y-15y	Purple top (EUA): COMIRNATY 30mcg/0.3mL Gray top (EUA): Pfizer Adult-Tris 30mcg/0.3ml	Pfizer COVID-19 vaccine consent signed by legal guardian	Pfizer COVID-19 vaccine consent signed by legal guardian	Pfizer COVID-19 vaccine consent signed by legal guardian
16y-17y	Purple top (approved): COMIRNATY 30mcg/0.3mL Gray top (EUA): Pfizer Adult-Tris 30mcg/0.3ml	Purple top: General practice consent signed by legal guardian Gray top: Pfizer COVID-19 vaccine consent signed by legal guardian	Purple or Gray top: Pfizer COVID-19 vaccine consent signed by legal guardian	Purple or Gray top: Pfizer COVID-19 vaccine consent signed by legal guardian
18y+	Purple top (approved): COMIRNATY 30mcg/0.3mL Gray top (EUA): Pfizer Adult-Tris 30mcg/0.3ml	Purple top: General practice consent signed by self or legal decision maker Gray top: Pfizer COVID-19 vaccine consent signed by self or legal decision maker	Purple or Gray top: Pfizer COVID-19 vaccine consent signed by legal guardian	Purple or Gray top: Pfizer COVID-19 vaccine consent signed by legal guardian

## Billing for Vaccine Counseling

- Vaccine administered: use administration CPT code
  - If you give the vaccine, counseling is built into the admin code.
  - Do not add CPT code 99401-99404 (preventative med counseling)
  - Only add separate E&M If another billable visit took place
- Vaccine counseled, not administered: CPT code 99401-99404 (Preventative Med Counseling)
  - 99401: 15 mins
  - 99402: 30 mins
  - 99403: 45mins
  - 99404: 60 mins
  - ICD10 code: Z71.85 (Encounter for Immunization Safety Counseling)
  - Add separate E&M for billable visit if appropriate and use -25 modifier

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## Stand by for Update on Therapeutics

- Save the Date: January 20 at 12:15 pm
- Another Special Town Hall: Monoclonal Antibodies and Antivirals





We welcome your questions, feedback, suggestions:

phn@childrensnational.org

THANK YOU!



