



COVID-19 NH press – 3.13.20

Testing for COVID-19 in NH.....	2
Boston Marathon postponed to September due to coronavirus	2
Should N.H. Lawmakers And Town Officials Postpone Voting In Wake Of Coronavirus?	3
Covid-19 update Friday: Dartmouth-Hitchcock ER in Lebanon says don't come without calling	5
Editorial: Get it right, please	5
Editorial: Postpone Legislature	6
CAUTION IN THE COURTS - Jury trials delayed in superior, federal courts	7
Coronavirus in New England: Maine announces 1st COVID-19 patient, Vermont reports 2nd	8
Coronavirus in Massachusetts: As number of COVID-19 cases grow, hospitals look to prevent exposure and ease burden on health care system.....	9
Governor Sununu Letter to Senate President Soucy and Speaker Shurtleff Regarding State Unemployment Benefits, COVID-19	13
Governor Sununu Announces an Insurance Department Order for Insurers to Cover Testing for the Coronavirus.....	13
Covid-19 updates for Thursday: UNH classes to go online temporarily; jury trials canceled.....	15
6th NH coronavirus case treated at Portsmouth hospital	18
Local medics perform COVID-19 drill	19
CDC Money For COVID-19.....	20
What's behind the COVID-19 testing bottleneck.....	21
Single Conference Linked To Most Mass. Coronavirus Cases Looks Like A 'Superspreading Event'	25
How Coronavirus Is Affecting The U.S. Pharmaceutical Supply	27
How to grocery shop during the coronavirus outbreak.....	29

NH Union Leader – March 13, 2020

[Testing for COVID-19 in NH](#)

COVID-19 tests are NOT available upon request in New Hampshire. According to the state Department of Health and Human Services:

- ☒ Anyone worried they have contracted COVID-19 should call their primary care doctor or visit an urgent care clinic to be evaluated by a doctor.
- ☒ Right now, New Hampshire is only testing people who have symptoms of the virus and have traveled somewhere where there has been a lot of COVID-19 infection or have had close contact with someone known to be infected.
- ☒ If a doctor thinks a patient needs to be tested, he or she will coordinate with the state Department of Health and Human Services to arrange the test.
- ☒ For the test, patients' noses or mouths will be swabbed, and the swabs will be sent to a state lab.
- ☒ It takes about 24 hours for the lab to process a test.
- ☒ If a test is positive, the patient will likely be placed in isolation, according to the Department of Health and Human Services. Health care providers will determine how best to care for their patients who have tested positive.

— Josie Albertson-Grove

The Boston Globe – March 13, 2020

[Boston Marathon postponed to September due to coronavirus](#)

By Tim Logan Globe Staff

The Boston Marathon will be postponed, and rescheduled to Sept. 14, local and state officials are set to announce Friday morning. Governor Charlie Baker and Mayor Martin J. Walsh, along with officials from the Marathon and its sponsors and from other towns along the 26.2-mile route, are set to hold a press conference Friday morning at City Hall where they will announce the new date for the race. It will be the first delay in the 124-year history of the Marathon, which had been scheduled for April 20, and comes as large and small gatherings worldwide are being canceled and postponed to help blunt the spread of coronavirus.

They chose to reschedule it Sept. 14 — a Monday — in hopes of best replicating a typical Marathon three-day weekend, and to fit in among various other major events in the fall, such as college move-ins, Jewish holidays, and the Chicago Marathon, said a source familiar with the planning. Doing that will require special legislation to declare the day a state holiday — like Patriots Day — which Baker plans to file soon. Officials are hopeful that the event — which typically brings more than 30,000 runners, and their friends and families, from 120 countries — will spark tourism and help hotels and restaurants at a time when, hopefully, the region is recovering from coronavirus-related shutdowns that are expected to

last weeks if not longer. Race organizers agonized in recent days over whether to cancel, reschedule, or hold the race only for elite runners, before settling on the new date when they hope to recreate as normal a Marathon weekend as possible. Though one thing will be different: The Red Sox are out of town.

This is a developing story and will be updated.

NH Public Radio – March 13, 2020

Should N.H. Lawmakers And Town Officials Postpone Voting In Wake Of Coronavirus?

By Rick Ganley & Mary McIntyre

<https://www.nhpr.org/post/should-nh-lawmakers-and-town-officials-postpone-voting-wake-coronavirus>

As concerns over coronavirus upend daily routines around the country, in New Hampshire it's been mostly business as usual for state and local governments. That's the case in the State House, where legislative deadlines mean lawmakers have so far kept their normal schedule in a busy time of year. On the local level, towns across the state prepare for town meetings this weekend.

NHPR's Morning Edition Host Rick Ganley spoke with Rick Lehmann, a Concord attorney and former counsel to the New Hampshire Senate, about why state and local government may be more resistant to sudden changes in procedure than other state institutions.

(Editor's note: this transcript has been lightly edited for clarity.)

Rick Ganley: There are lots of possible reasons why quick changes to state and local government could be difficult here in the Granite State. However, the House did agree last night on a new rule to give the speaker flexibility in the future to amend legislative deadlines because of COVID-19. The Senate has not taken a similar action. What does it take for lawmakers to essentially hit pause on their duties in this busy time of year?

Rick Lehmann: All it takes is the agreement of 2/3 of the members of each body to do that. I believe late last night, the Senate did take an action similar to what the House did to authorize the Senate president to change the deadlines after consulting with the minority leader.

Rick Ganley: March [is a] super busy time of year. Deadlines mean bills are piling up and they need action from lawmakers. So how is that going to affect that?

Rick Lehmann: Well, they're going to have to make a decision about whether or not they're going to continue to plow forward with all the ordinary business, whether they're going to prioritize some bills and decide that other things can wait, or whether they're simply going to push the deadlines out and suspend everything until they have a better sense of where we stand with this virus.

Rick Ganley: It's also a campaign year. How do you think that affects things?

Rick Lehmann: Well, in the second year of every legislative session, there are a lot of bills sponsored by both sides that are intended to sharpen the issues for the campaign. My sense is that the first year

budget is really the main piece of business the legislature has to do, and the campaign oriented bills in the second year might be able to wait. That's a decision for legislative leadership to make, though.

Rick Ganley: You've been around the State House and know its demographics. The legislature is older than the general population. The House session brings together hundreds of people into a single room. Given that the CDC recommends avoiding crowds and notes that the elderly are susceptible to this virus, why don't you think this is more of an issue for lawmakers?

Rick Lehmann: Well, I think that in the past 48 hours or so, we've seen a lot of mass events canceled. And the fact that the NCAA basketball tournament and all the professional sports leagues have suspended operations, I think may catch the attention of folks in the State House and effectively create an environment where it easier for them to suspend operations in the House and Senate as well.

Rick Ganley: This is also a busy time for local governments, Rick. Town meetings are scheduled this weekend across the state. We've seen in recent years how weather emergencies have caused postponements. This seems different. How big a deal is it for a town to try to put off an election or town meeting?

Rick Lehmann: It's a very difficult thing for a town. It's a lot harder for the towns than it is for the state legislature. The towns have only the authority that they've already been granted by the state, and they don't have a mechanism that authorizes them to put off their elections in the event of something like this coronavirus. So they're in a much stickier situation than the state legislature is.

Rick Ganley: Are you hearing anything from municipalities or towns about what they're planning to do or what they'd like to do?

Rick Lehmann: I haven't heard anything about it. What sometimes has happened in the past is that towns have had to take a chance and do an act that specifically authorized by law, and then go back to the legislature and ask the legislature to ratify that action after the fact. But that's a dicey proposition because there's no guarantee that the legislature will do that.

Rick Ganley: What would be the penalty if they didn't?

Rick Lehmann: Well, I'm not sure you could characterize it as a penalty, but any action that they take would not have legal effect if it's an affirmative act. If they simply fail to act, they run the risk of having budget issues, having budgets expire and run into trouble setting their tax rate, which is something that happens on a fairly tight schedule based upon the spending and degree of taxation that's approved at town meeting. That's a difficult situation for people responsible for running the town.

Rick Ganley: What would you advise a municipality?

Rick Lehmann: To call their state [representatives] and senators and try and ask them to rush through some sort of a mechanism to give them more flexibility, to at least postpone taking actions and town meetings and to extend existing budgets.

Rick Ganley: Yeah, I mean, there's a question of participation here [and] how many people are going to show up.

Rick Lehmann: There is a question. And then in every town, there are people who are motivated to see some things pass and other things fail. And it would be a shame to have the people who are most willing to risk getting sick be the ones who get what they want out of the democratic process and town meeting.

Concord Monitor – March 13, 2020

[Covid-19 update Friday: Dartmouth-Hitchcock ER in Lebanon says don't come without calling](#)

Monitor staff

Dartmouth-Hitchcock Medical Center in Lebanon is telling doctors not to send patients to the emergency department unless absolutely necessary because of an increase of patients in the face of the Covid-19 outbreak. "If a patient does not exhibit signs that warrant an emergency department evaluation or immediate hospital admission, providers should ask the patient to don a mask and return to their home for self-quarantine, and follow CDC guidelines pending further decisions on COVID-19 testing," the center said in a release to providers and the public. It also asks patients of Dartmouth-Hitchcock not to come directly to the emergency room if they are "experiencing fever, cough, or shortness of breath or are concerned about potential exposure to Covid-19" but first to call a hotline 650-1818 "for screening and, if appropriate, scheduling testing." The move comes "in response to an increase in the number of patients who are being sent directly to the Dartmouth-Hitchcock Medical Center Emergency Department in Lebanon for screening and testing," the center noted.

Dartmouth College is telling its 4,400 undergraduates not to return to campus housing until at least May 1 and to plan for the possibility that they may not return to campus at all during the spring term. Students instead are expected to take courses remotely. The directive came as the college's winter term is ending and students are leaving for a two-week spring break. The University of New Hampshire, including UNH law school in Concord, will move all classes online for at least two weeks after spring break ends March 23.

NH Union Leader – March 13, 2020

[Editorial: Get it right, please](#)

Trump trips; NH hides useful info

Making things as clear as they can, as quickly as they can, in connection with the new coronavirus is important on the part of government officials at all levels. The President's televised address Wednesday night failed to do so. New Hampshire's own information sharing also seems a bit wobbly. President Trump's announcement that all travel and trade from Europe would be suspended for 30 days was

dramatic. It may help slow the virus and it told Americans that this is a serious matter and we all need to pay attention.

But it is unsettling that in a short but major address, Trump could get some things so wrong. Suspension of trade? Wrong, as Trump himself tweeted out within an hour of his talk. Suspension of travel from Europe? Yes, for foreigners; but no for Americans and permanent residents. It appears U.S. citizens and residents may be quarantined when they get here, but at least they can get here. The Trump team certainly knows that its enemies are prepared to pounce on any misstep it makes. On something as major as this, we would hope that it would look to make sure it has its facts straight.

Meanwhile, here in New Hampshire, Gov. Chris Sununu is doing a good job of coordinating public health messages in a fastchanging situation. He should instruct public health officials to be as open as possible in giving the public the facts as to instances of the virus. Officials have been refusing to identify in what city or town a COVID-19 case has been found, on the grounds that this might reveal confidential patient information. It would do no such thing. But it would help to alert people in that city or town and help to inform their own decisions. With the government urging the public to use common sense, we would note that this goes both ways.

NH Union Leader – March 13, 2020

[Editorial: Postpone Legislature](#)

Setting the right NH example

With New Hampshire having the largest legislative body of all 50 states, and with the average age of its members being a wee bit on the high side, it would seem to us that the Legislature would be a leading candidate for postponing its full sessions for a while. It is commendable that legislative leaders want to look to see how the General Court might operate remotely and still be constitutionally correct. But while that process is going on, and while individual committee hearings could continue, temporarily suspending full sessions seems to us to be well within “abundance of caution” parameters.

We know these folks are tough as nails, but right now they might set a better example for New Hampshire by showing caution rather than demonstrating that they are daredevils. If they do stay in session, we hope the lawmakers won’t gum up the works, literally. Voting machines in a couple of towns Tuesday were temporarily knocked out of commission because of voters applying too much hand sanitizer, which got transferred to ballots, which then crumpled. Working from home also was thrown a curveball by the recommendations from a Nashua high-tech fellow. He said people working remotely should (a) still dress as if they were going to the office and (b) don’t think about doing loads of laundry between conference calls. The “dress for work” item isn’t a killer. From what we see these days, there’s



not much difference in work or home attire. But not being able to throw in some laundry during the work day? That's just wrong.

NH Union Leader – March 13, 2020

[CAUTION IN THE COURTS - Jury trials delayed in superior, federal courts](#)

State superior courts impose 30-day hold; U.S. District Court puts trials and other proceedings off until May 1.

By Jason Schreiber Union Leader Correspondent

In an unprecedented move, the New Hampshire Judicial Branch has canceled all criminal and civil jury trials in Superior Court for the next 30 days as coronavirus concerns grow. Later Thursday, officials at U.S. District Court in Concord said that effective immediately, all jury trials and grand jury proceedings scheduled to begin before May 1 are continued. Court-hosted naturalization events scheduled before May 1 are also cancelled. Superior Court Chief Justice Tina Nadeau made the announcement Thursday as New Hampshire's sixth presumptive positive case of COVID-19 was announced by state health officials. The trials will be suspended beginning Friday and rescheduled to later dates.

"We have not ever canceled jury trials as a result of a public health emergency, but in 2009 we did cancel jury trials several months a year because of the budget crisis, so we have had to handle a reduced jury trial schedule in the past. We do not have a huge backlog of cases in the Superior Court, however, any postponement of jury trials will affect the caseload," Nadeau said in a statement. The trial suspension means anyone who was scheduled to report for jury duty between March 13 and April 13 will not have to appear. Those with a report date on April 14 or later are being encouraged to check the judicial branch's website for updates before showing up at court.

Any plaintiffs, defendants or prosecutors involved in a trial scheduled for that period will be notified of new trial dates. The suspension of trials will be reviewed on an ongoing basis. "For the well-being of the public and our state, the Judicial Branch closely monitors the guidance provided by the New Hampshire Department of Health and Human Services and the federal Centers for Disease Control and Prevention. We continue to work every day to make sure the courts are accessible and safe," Nadeau's notice said. The decision to cancel jury trials will have a ripple effect as busy courts try to reschedule, according to Rockingham County Attorney Patricia Conway. Weekly trials are already scheduled in Rockingham County Superior Court into the fall.

"Whenever anything gets continued we have to find a new trial date and, unfortunately, when that happens things just continue to get pushed out for a longer period of time. When you have the issue of speedy trial rights," Conway said. It's possible that some cases could end up dismissed if a trial is delayed for too long, she said. Conway said the trial suspension will also create issues for victims, subpoenaed

witnesses, and others involved in the jury process. Some criminal defense attorneys in New Hampshire also expressed concern. "While I am glad that our judiciary is taking this pandemic seriously, there is also concern about speedy trial rights of pretrial incarcerated defendants awaiting their day in court," said attorney Ryan Russman of Exeter.

MassLive – March 13, 2020

[Coronavirus in New England: Maine announces 1st COVID-19 patient, Vermont reports 2nd](#)

By Jackson Cote | jcote@masslive.com

Maine announced Thursday its first coronavirus patient, while Vermont health officials reported the state's second case, as the number of people diagnosed with the illness increases across New England. The Vermont patient, a man in his 70s from Chittenden County, is in critical condition as of Wednesday, NECN reported. Maine's first reported case of the disease is a woman in her 50s from Androscoggin County, the state's Department of Health and Human Services said in a statement. The man from Vermont was admitted Tuesday to the University of Vermont Medical Center in Burlington with concerns he may have the respiratory infection, called COVID-19. His test was sent to the Vermont Department of Health and came back Wednesday afternoon as a presumed positive diagnosis, according to hospital officials. "It was a well coordinated effort," Stephen Leffler, president of the hospital, said at a press conference Thursday. "The patient was seen in our ED, and we determined he needed admission to the hospital."

Diagnoses are presumed positive by state agencies and confirmed by the U.S. Centers for Disease Control and Prevention. The man's possible exposure history is being investigated, and officials are working to identify anyone who may have had close contact with him. The announcement comes less than a week after state officials reported Vermont's first COVID-19 patient, an individual from Bennington County, according to a statement from the Vermont Department of Health. There are currently six cases of the coronavirus in Connecticut, six in New Hampshire, five in Rhode Island and 108 in Massachusetts. Gov. Charlie Baker declared a state of emergency Tuesday.

Nationally, 1,215 COVID-19 patients and 36 deaths have been reported as of Thursday, according to the CDC. A total of 125,048 cases and 4,613 deaths have been confirmed globally, according to the World Health Organization, which announced Wednesday the outbreak has reached pandemic status. The UVM Medical Center has eliminated work-related travel and is discouraging personal travel, according to John Brumsted, president of the University of Vermont Health Network. Like hospitals across Massachusetts, the medical center has also revised its visitation policy in light of the coronavirus



outbreak. “Things are moving incredibly, incredibly quickly,” Brumsted said during the press conference. “We’re continually monitoring the situation as it evolves.”

MassLive – March 13, 2020

[Coronavirus in Massachusetts: As number of COVID-19 cases grow, hospitals look to prevent exposure and ease burden on health care system](#)

By Jackson Cote | jcote@masslive.com

As the number of coronavirus cases in Massachusetts grows, hospitals are scrambling to prevent the spread of the respiratory infection and ease the burden of the disease on health care providers. Medical centers across the state have taken numerous preventative measures to try to combat transmission of the illness, from quarantining nurses who had contact with diagnosed patients to limiting the number of visitors to facilities. “We’re so lucky in our country to have this incredible hospital system,” Dr. Katrina Armstrong, physician-in-chief of Massachusetts General Hospital, told MassLive. “We know our role in these settings. I can tell you that I think each hospital is really stepping up to the challenge right now.”

The doctor added that medical professionals who combat viral diseases are taking an approach called “flattening the curve.” The number of cases during an outbreak tends to rise quickly, reach a peak and then fall. By flattening the curve, hospitals aim to reduce the tally of people with the disease at a given time and stretch it out over a longer timeframe so hospital workers are not suddenly bombarded with a large pool of patients. The belief that individuals should catch the virus at the outbreak’s start and recover quickly is common, Armstrong said, even among people in her profession. But the idea is misguided. “The best thing for the health care system, given all that we’re doing, is to delay to the number of cases,” Armstrong said. “It is critically important.”

The number of people with the illness, named COVID-19, stood at 95 statewide on Wednesday and has surpassed 1,000 nationally. Gov. Charlie Baker declared a state of emergency Tuesday, and the World Health Organization on Wednesday designated the outbreak, which began in Wuhan, China, a pandemic. President Donald Trump also announced he would be restricting travel to the U.S. from 26 countries in Europe, where concerns of the disease has prompted a lockdown of Italy, a nation hit particularly hard by the illness, the Associated Press reported.

Elderly individuals and those with previous medical concerns are most at risk, though the disease causes different levels illness. Despite the high death toll, more than 60,000 people have recovered from the virus globally, according to WHO. Some with mild illness have recovered in roughly two weeks. In Massachusetts, individuals positively diagnosed with the coronavirus totaled 44 in Middlesex County, 23



in Norfolk County, 19 in Suffolk County and seven in Berkshire County. Essex and Worcester counties each reported one patient, according to the state Department of Public Health. Roughly 445 people have been placed under quarantine in the commonwealth. The outbreak has prompted multiple public schools to cancel class or change schedules, colleges and university's to call off their spring semesters and several municipalities to scale back public events.

Here is a look at how hospitals are combatting transmission.

Baystate Health

Baystate Health instituted a policy last week restricting patients to one visitor at a time at all of its medical facilities, including Baystate Medical Center and Baystate Children's Hospital in Springfield, Baystate Wing Hospital in Palmer, Baystate Franklin Medical Center in Greenfield, and Baystate Noble Hospital in Westfield. Anyone showing symptoms of a fever or cough has been asked to avoid the locations as well. Plans are in place to manage an influx of patients to Baystate's hospitals and clinics. An epidemic preparedness team is in place, and the health care system's Springfield location has multiple areas capable of safely housing COVID-19 patients and isolating the virus, according to the hospital. Baystate Health has specialized equipment already on hand as well.

Berkshire Medical Center

The largest hospital in Berkshire County has furloughed dozens of employees after 70 workers were quarantined following treatment of a person who contracted the virus. The hospital has urged people who have not come into contact with the disease or traveled to an area where the illness is prevalent to keep their scheduled appointments. However, it has asked patients seeking a same-day visit to not walk into a medical office without an appointment. Instead, they should call their primary care providers first. "We ask that all sick patients wear a face mask and use an alcohol-based hand sanitizer upon entering our offices," Berkshire Medical said in a statement. "Patients with a high suspicion of Coronavirus exposure will be asked to remain at home while Berkshire Health Systems coordinates care with the MA Department of Public Health."

Beth Israel Lahey Health's nearly 40 locations

The Beth Israel Lahey Health network has asked any individuals with flu, flu-like illness or coronavirus risk factors to refrain from visiting patients at any of its nearly 40 locations. Patients will not be allowed visitors unless approved by clinicians. If the approval goes through, only one visitor per patient is allowed. "Please note, all visitors will be screened for COVID-19 risk factors. If the visitor screens positive for any risk factors, they will not be permitted to visit," the network says on its website. The health care system also a formed team of experts from across its network to monitor the progression of the disease and address immediate needs and plan for potential impacts. The system said it is "fully prepared" to assess and care for patients. The network includes dozens of emergency departments, inpatient facilities



and urgent care centers across Amesbury, Andover, Boston, Braintree, Brookline, Chelsea, Chestnut Hill, Dedham, Duxbury, Haverhill, Lexington, Medfield, Methuen, Milton, Needham, Newton, Pembroke, Plymouth, Quincy, Randolph, Sandwich, Sharon, Waltham, Wayland and Wellesley.

Boston Medical Center

Boston Medical Center regularly conducts employee drills for infectious diseases, and staff have undergone training for potential COVID-19 cases. BMC on Monday also restricted employee travel and suspended domestic and international conferences. “We ask that all employees exercise prudent judgment when making travel plans. These decisions regarding travel restrictions may change as the situation evolves,” the medical center said in a statement.

Brigham and Women’s Hospital

Researchers, medical professionals and administrative officials at Brigham and Women’s Hospital in Boston have been preparing to care for suspected or confirmed COVID-19 patients since the health care provider first learned of the outbreak in late January, the hospital said in a statement. Brigham and Women’s has updated its ambulatory screening protocols to “rapidly detect” potential coronavirus diagnoses, is training personnel about the appropriate use of protective equipment, conducting drills and planning a potentially large influx of patients with the disease. The hospital has yet to say whether it is updating its visitation policies. “The situation remains fluid as public health authorities assess, surveil and attempt to prevent the spread of infection,” Brigham and Women’s said in its statement. Dr. Daniel Kuritzkes, chief of the division of infectious diseases at the hospital, has asked the public to take preventative measures like social distancing and limiting large gatherings. He also, like Armstrong, urged medical professionals to flatten the curve. “This gives hospitals and health care workers more time to adapt and fewer patients to cope with at any one time. It doesn’t reduce the total number of people ultimately infected, but spreads them out over time, which is critical to sustaining capacity,” he tweeted.

Floating Hospital for Children and Tufts Medical Center

Tufts Medical Center and the Floating Hospital for Children, both located in Boston aim to lessen the risk of exposure by rescheduling non-urgent appointments and advocating for social distancing. The facilities started to “progressively reduce the level of discretionary and elective clinical care” on Wednesday, according to the medical center. “[We] believe this will reduce the potential of incidental infection of our patients and staff,” Rhonda Mann, a Tufts spokesperson, said in a statement. “This move will also conserve vital resources needed to provide optimal care to those who ultimately may need it most.” The medical center will remain open for patients who are ill, hurt or need emergency care that cannot be delayed, according to the statement.

Massachusetts General Hospital



Officials at the Boston-based hospital announced Wednesday the facility has activated its incident command system due to the increasing number of countries reporting COVID-19 cases. Armstrong said this system manages bio-threats and epidemics, and it has been prepared for weeks. "We became aware of this issue several weeks ago," the doctor said, adding that medical professionals need to understand how staffing, supply chains and managing current hospital patients affects virus prevention. "It's become a 24/7 activity." The hospital will screen visitors who come to any one of its nearly 30 buildings. People who recently traveled to nations with widespread local transmission, if their visit is deemed essential and they are asymptomatic, will be allowed on the campus but will have to wear a surgical mask.

People with upper respiratory tract symptoms seeking to visit Mass General must instead go to a Partners HealthCare facility, according to the hospital. "If you have upper respiratory symptoms including fever, sore throat, or cough - regardless of travel history - please postpone your visit to see Mass General patients or staff until you feel better," the hospital said in a statement. Access to coronavirus testing kits is still a challenge for MGH, according to Armstrong. "We're working hard to create more accessible testing options," she said. "But right now we're very limited." Doctors are also trying to get out the message that people need to avoid large gatherings. Armstrong said that is difficult, though, as individuals want to go to concerts, sporting activities and other events. She noted that her birthday is Friday, but due to the virus, she will be celebrating from home. "The message needs to get out to the public that they need to stay home and avoid large events," Armstrong said. "That's a hard thing to do in our country. We have a fondness for social contexts."

Mercy Medical Center and other Trinity Health of New England affiliates

Mercy Medical Center in Springfield, a 182-bed acute care hospital part of Trinity Health Of New England, has instituted its own COVID-19 protocols as well, limiting visitors to one per patient and restricting children under the age of 14 from visiting. The restrictions are also in place at affiliate hospitals, including Family Life Center for Maternity and Weldon Rehabilitation Hospital, both located in Springfield, as well as Providence Behavioral Health Hospital in Holyoke. "Do not visit if you have any symptoms of a cold, the flu or COVID-19," Mercy Medical said in a statement. "These restrictions are in place for the protection of our patients and colleagues."

UMass Memorial Medical Center

UMass Memorial Medical Center in Worcester, which treated Worcester County's first and only coronavirus case, enacted a temporary visitation policy this week that restricts the number of visitors to the hospital to one designated adult per day for each patient. The medical center announced Thursday that it has begun setting up tents as well in order to screen patients and limit possible exposure to others at the hospital. "The tents at the University campus are on loan from the Massachusetts



Department of Public Health Region II,” said Tony Berry, a UMass Memorial spokesperson. “Once the set-up is completed next week, patients will be screened in this area and our caregivers will be prepared to care for any health care needs at that time.”

The hospital has also formed a coronavirus task force that is monitoring the global status of the outbreak, keeping up to date with CDC guidelines, collaborating with the Worcester Department of Public Health, refining infection control protocols and providing caregivers training on how identify individuals who may have been exposed to COVID-19. The medical center is using the same approach for fighting the spread of the coronavirus that it did for combatting the ebola outbreak in 2014, according to Berry. The medical center has an EPIC electronic health care system that prompts staff to ask every patient that enters the hospital about any recent travel outside the U.S. As the CDC adds in additional patients who might be at risk to the system, UMass Memorial screens to cover those at-risk groups. An alert pops up and infection control workers are notified if a patient answers yes to screening questions and has fever or respiratory symptoms.

“We have been engaged in an intense period of planning, training, and conducting readiness exercises ... to protect our caregivers, patients and visitors from this virus,” Berry said in a statement. “From a housekeeping perspective we have increased the cleaning frequency in disinfection of high touch surfaces in all public areas.”

Press Release – March 12, 2020

Governor Sununu Press Office

[Governor Sununu Letter to Senate President Soucy and Speaker Shurtleff Regarding State Unemployment Benefits, COVID-19](#)

CONCORD, NH – Today, Governor Chris Sununu sent a letter to Senate President Soucy and House Speaker Shurtleff regarding temporary changes to state law that would allow for greater access to unemployment benefits for people who are impacted by COVID-19 and are temporarily unable to work. <https://www.governor.nh.gov/news-media/press-2020/documents/soucy-shurtleff-covid-letter.pdf>

Press Release – March 12, 2020

Governor Sununu Press Office

[Governor Sununu Announces an Insurance Department Order for Insurers to Cover Testing for the Coronavirus](#)

Concord, NH – Governor Chris T. Sununu today announced that Insurance Commissioner Nicolopoulos has issued an Order requiring New Hampshire health insurers to cover services associated with testing for the novel coronavirus 2019 (COVID-19) without cost-sharing, and to take a series of related



measures designed to promote early detection and access to prevention, treatment, and recovery services. The Order outlines a series of actions that New Hampshire health insurers are required or advised to take, including keeping New Hampshire residents informed about available benefits; offering telehealth medical advice and treatment, when possible; and expanding access to prescription drug refills.

"I want to thank Commissioner Nicolopoulos for issuing this Order to make sure that New Hampshire residents can access testing and treatment for the coronavirus," said Governor Sununu. "Several insurance companies operating in New Hampshire have been very proactive in their efforts to combat the coronavirus outbreak, and this Order will help more New Hampshire consumers feel confident that they can access necessary services without cost acting as a barrier."

"We want to ensure that New Hampshire residents have insurance coverage for health care services associated with the coronavirus. It is important to remove actual or perceived barriers to testing and treatment for New Hampshire residents. We do not want anyone to be reluctant to seek medical services due to anticipated costs," said Insurance Commissioner Chris Nicolopoulos. "If people are getting the care that they need, we may be able to mitigate overall costs to the health insurance markets."

The New Hampshire Department of Health and Human Services will ensure that New Hampshire residents receiving Medicaid coverage have their testing costs covered. Medicaid recipients may have very nominal cost sharing (\$1-\$2) for prescription drugs. Medicare Part B will cover testing for COVID-19. New Hampshire residents enrolled in self-funded employer-based health insurance plans that are not regulated by the NHID should contact their employer to fully understand the scope of coverage.

The Order issued by the Insurance Department to health insurance companies regarding actions they should take in relation to the potential impact of COVID-19 on New Hampshire includes:

Keeping Consumers Informed: NHID is directing insurers to keep their members informed with accurate information about coverage for COVID-19 related testing and treatment.

Testing for COVID-19 and Treatment for Initial Diagnosis: Health insurance companies must provide coverage, prior to application of any deductible and without cost-sharing, for the initial health care provider visit and test for their members who meet the CDC criteria for testing, as determined by the insured's health care provider.

Providing Telehealth Appointments: Given that COVID-19 is a communicable disease, some members may utilize telemedicine in seeking an initial diagnosis instead of in-person health care services. Health insurance companies are reminded that they may not deny coverage, including mental health services provided to a quarantined individual, simply because it was provided through telemedicine. Health



insurers are directed to ensure that their telehealth programs will be able to meet any increased demand.

Preparing Health System for Increased Cases: NHID is directing insurers to verify that their provider networks are adequately prepared to handle a potential increase in the need for health care services, including offering access to out-of-network services where appropriate and required, in the event more COVID-19 cases are diagnosed in New Hampshire.

Prescription Drug Refills: Health insurance companies are directed take steps to ensure that members have continuous access to prescription medications. Members are able to obtain a one-time refill of their covered prescription medications prior to the expiration of the waiting period between refills in order to maintain an adequate supply of medications. For maintenance medications, insurers are directed to permit members to obtain a 90-day supply. With regard to refills of certain drug classes, such as opioids, benzodiazepines, and stimulants, insurers may limit early refills as necessary to take into consideration patient safety risks.

The Order can be found on the Insurance Department's website. <https://www.governor.nh.gov/news-media/press-2020/documents/health-care-coronavirus-order.pdf>

For additional information about New Hampshire's response to the Novel Coronavirus 2019, visit the New Hampshire Department of Health and Human Service's website.

<https://www.dhhs.nh.gov/dphs/cdcs/2019-ncov.htm>

DHHS daily updates:

<https://www.dhhs.nh.gov/dphs/cdcs/2019-ncov-updates.htm>

Concord Monitor – March 12, 2020

**Covid-19 updates for Thursday: UNH classes to go online temporarily; jury trials canceled
From staff and wire reports**

<https://www.concordmonitor.com/covid-coronavirus-concord-nh-33287874>

The state playoffs for high school girls and Unified basketball as well as the state spirit championships that were scheduled for Thursday, March 12, have been postponed to an indefinite date, the NHIAA said Thursday. The New Hampshire Interscholastic Athletic Association said news about other tournament events would be forthcoming. All state tournaments were scheduled to wrap up by this coming weekend.

UNH, UNH law to go online

The University of New Hampshire, including UNH law school in Concord, will move all classes online for at least two weeks after spring break ends March 23. An announcement from James Dean, UNH president, said face-to-face classes have been canceled in Durham, Concord and Manchester through April 3, during which time they will be “100% online or via other alternative (non-face-to-face) delivery.”



UNH Franklin Pierce School of Law “will otherwise remain open for normal business operation. “ during the period. Information about library hours and operations will follow. All student meetings and events are canceled or will be moved online. UNH is slated to resume in-person classes on April 6. “We will keep you informed if this changes,” Dean wrote. “On-campus housing will be available on a restricted basis.” Sporting events will be held without public audience.

Holy Communion curtailed

Bishop Peter Libasci of the Diocese of Manchester announced Thursday that distribution of Holy Communion via the chalice will be suspended because of concern about spreading the Covid virus. The announcement said that priests should “assure parishioners that if they are sick, they are not obliged to attend Mass and, in fact, should not attend, “ that “coffee socials and the like after Mass are to be suspended” and suspend the Sign of Peace, which involves parishioners shaking hands. “In the event any of our schools close due to illness, each school will coordinate alternative instructional delivery tools with parents and students. The Catholic Schools Office has contracted with Google to provide Google Classroom, and all diocesan and parochial schools will hold mandatory training of all faculty and staff next week,” the statement said.

Jury trials postponed for a month

All criminal and civil jury trials in New Hampshire Superior Courts have been canceled for the next 30 days, beginning Friday, according to an announcement from Superior Court Chief Justice Tina Nadeau. “Please do not appear at the courthouse for jury duty service,” Nadeau wrote. “If you are a plaintiff, defendant or the state in any trial scheduled for that period, your trial will be rescheduled and you will receive notice of the new trial date.” People told to report for jury duty after April 14 should check the New Hampshire Judicial Branch website for updates before showing up. “Extension of the present 30 day period will be reviewed on an ongoing basis,” Nadeau wrote. The rule does not include district courts or the state’s Supreme Court.

Sixth case in N.H.

New Hampshire has a new presumptive case of COVID-19, the disease caused by the novel coronavirus, according to the Department of Health and Human Services announced. There are currently 6 positive cases in New Hampshire. The adult male from Rockingham County traveled to multiple countries in Europe. The person self-isolated upon return from Europe and notified his healthcare provider after developing symptoms. Individuals within his household contacts have also self-quarantined, state officials said. Department of Health and Human Services officials investigated the man’s activities and determined he had been isolated at home since returning to New Hampshire except to seek healthcare. The department has not identified any person other than household contacts who may have been in close contact with the man while infectious.



New state Covid-19 hotline

211NH has been mobilized to handle Covid-19 related calls from New Hampshire residents. Residents with questions or concerns surrounding the virus outbreak can call 2-1-1. 211NH is New Hampshire's statewide information and referral service operated by Granite United Way. It will replace the current Department of Public Health Hotline (603-271-4496).

School waivers

The New Hampshire Department of Education is seeking three waivers from the federal government to provide meals to children if school gets disrupted in response to the Covid-19 virus. The waivers from the United States Department of Agriculture, Food and Nutrition Services would allow three things:

- An alternative or "grab and go" meals service that would limit contact between people;
- Allow schools not designated as high need to cover meals provided to students under the Emergency School Closure provision of the Summer Food Service Program or Seamless Summer Options; and
- allow sponsors to provide reimbursable meals.

At this time, no New Hampshire schools have opted for long-term remote instruction. Should a school decide to shift to long-term remote instruction, the buildings would be closed, but students would continue their education remotely. Should the waivers be granted, schools could use their building to provide meals. Should these waivers be granted, all meals would be free to students at all locations, and families would be able to bring meals home. The program would be similar to the Summer Meal Service Program, which provided meals to families at more than 100 locations last summer. Local school officials would determine where and how meals would be distributed locally.

Annual meetings

With town and school district meetings in full swing, officials are wrestling with how to safely gather large numbers of people into one room for hours at a time. In Hopkinton, board members, administrators and other officials met Wednesday to plan for school district annual meeting this Saturday in the high school gymnasium. "It is our intent to hold the meeting as scheduled. We will continue to monitor any changes in guidance from both the NH Department of Health and Human Services and the CDC," said a statement Thursday from Liz Durant, the school board chair, and Superintendent of Schools Steve Chamberlin. The meeting will be streamed and can be watched for free, at www.youtube.com/watch?v=pYcbRyk9VV8&feature=youtu.be. However, all voting must take place in person. Hand sanitizers will be available and ballot counters will have rubber gloves. "Space will be provided for social distancing in the gym and the Auditorium will be available as an additional venue. Speaking to an article and voting will have to take place in the gym," the release said.



Seacoast Online – March 12, 2020

6th NH coronavirus case treated at Portsmouth hospital

By Karen Dandurant, news@seacoastonline.com

PORTSMOUTH — The sixth presumptive positive case for COVID-19 was announced Thursday, in a person recently treated at Portsmouth Regional Hospital. Lynn Robbins, director of marketing and communications at PRH, confirmed the person treated at the hospital and the sixth case announced by the state Department of Health and Human Services is the same person.

DHHS announced Thursday that a third man from Rockingham County had tested positive for COVID-19, the disease caused by the coronavirus. The virus causes only mild or moderate symptoms in most people and the vast majority recover. “Portsmouth Regional Hospital has well-established protocols in place to care for patients with infectious diseases, and we have been working diligently to help ensure we’re prepared for coronavirus disease 2019, COVID-19,” Robbins said in a prepared statement. “Late last night, PRH was notified by the New Hampshire Department of Health and Human Services that a patient who was tested at our hospital, and subsequently discharged to continue self-isolation, is presumed positive for coronavirus disease 2019.

All proper precautions were taken with the patient to ensure the least amount of risk to hospital staff, patients and visitors,” Robbins stated. “Our teams were prepared to care for this patient and followed protocols appropriately,” she added. “Our preparedness efforts around the virus are in line with the Centers for Disease Control and Prevention and NHDHHS guidelines.” DHHS said the man traveled to multiple countries in Europe. The person self-isolated upon return from Europe and notified his healthcare provider after developing symptoms, officials said. Household contacts have self-quarantined.

DHHS investigated the man’s activities and determined he has been isolated at home since returning to New Hampshire except to seek healthcare. DHHS has not identified any person other than household contacts in New Hampshire who may have been in close contact with the man while infectious. Despite increased testing in New Hampshire, DHHS has not yet identified any widespread transmission in the state nor individuals who test positive without clearly identified risk factors, such as travel or contact to a confirmed COVID-19 case. Any person who develops fever or respiratory symptoms, such as cough and shortness of breath, should stay home away from others and seek health advice by phone from a healthcare provider to discuss symptoms and any risk factors for COVID-19, officials said. DHHS said due to the increasing numbers of infections globally and around the United States, all persons should:

- * Stay home and avoid public places when sick (i.e. social distancing).
- * Cover mouth and nose when coughing and sneezing.



- * Wash hands frequently.
- * Avoid being within 6 feet of a person who is sick.
- * Avoid sharing drinks, smoking/vaping devices or other utensils or objects that may transmit saliva.
- * Disinfect frequently touched surfaces.

Information: dhhs.nh.gov/dphs/cdcs/2019-ncov.htm and cdc.gov/coronavirus/2019-ncov/index.html.

Conway Daily Sun – March 12, 2020

[Local medics perform COVID-19 drill](#)

Terry Leavitt

CONWAY — Here’s a scenario that Memorial Hospital hopes it never has to deal with but which was the point of a realistic drill that took place on Thursday morning: a call coming in about someone who may have caught the coronavirus. Staff sprang into action, preparing a negative pressure room and medical personnel with masks and protective gear in anticipation of the person’s arrival. In addition to the doctors, nurses and EMTs playing out the scenario, hospital and emergency management leaders were taking notes.

Conway Fire Chief Steve Solomon said: “One of our big things we’re trying to do is give the public is a sense of calm, of security. We don’t want them to be seeing pictures of people dressing up like spacemen and freaking out. We want them to know we train for this; this is actually what we do. “We’ve practiced this type of stuff before, and we are modifying procedures and testing it out so if we do encounter patients, they should feel comfortable that we do know what we’re doing and can take care of them.” The exercise started at the fire station in Conway, with a simulated 911 call, during which the “patient,” an EMT student at SOLO in Conway, was identified as a possible COVID-19 patient. Paramedic Capt. Josh MacMillan and EMT Leslie O’Dell practiced donning protective clothing and respirators, going through an initial encounter with the patient and then, with firefighter and EMT Ben Croce driving, they took him to the hospital.

A few minutes later, an ambulance pulled up to the emergency department, and the patient was wheeled in on a stretcher by two EMTs from Conway Fire and Rescue. They traveled down the hallway and into the negative pressure isolation room, where the man was transferred to a bed. Dr. Eric Davitt and nurse Shelby Martin heard the EMTs’ report, took vital signs and talked to the patient, who, through his oxygen mask, told them he had traveled overseas recently and was feeling sick. Meanwhile, the EMTs stepped back into the hallway and started taking off their protective gear, cleaning some parts and bagging others, eventually taking everything back through the department to their ambulance, where Solomon said they would decontaminate the vehicle and gear. “Drills like this aren’t unique,” said Matt Dunn, medical director of the hospital’s emergency department. “We have to prepare for any type of really high risk situation. We usually drill annually; sometimes more frequently.” Training is critical, he



said, in situations where staff use equipment they don't use every day. "We have to be prepared, understand our protocols, make sure our interagency communication is really robust — New Hampshire 911 to EMS to the Emergency Department, we're all on the same page," Dunn said.

There were a couple of problems that became obvious, such as difficulties communicating in the ambulance while wearing respirators and removing protective clothing at the hospital, but they were all things that can be addressed. "This is all part of preparation, and that's why we do these drills to identify problems. That's the goal," said Will Owen, RN, emergency preparedness coordinator at the hospital. Hospital President Art Mathisen said: "One thing I've always learned is when you do a real rehearsal, you learn things, and you get better. That's why we wanted to do this because this is pretty real world scenario that could happen. And now we're going to be even much more ready if it really does happen." On the whole, Dunn said on the drill went very well. "This is what we do every day as a community hospital. We take care of patients. We try to keep our community safe," Dunn said. "Part of doing that is really keeping our team safe. And our team is everyone here, as well as everyone coming here bringing patients," he said.

InDepthNH.org – March 12, 2020

CDC Money For COVID-19

By Paula Tracy, InDepthNH.org

Excerpt

<https://patch.com/new-hampshire/concord-nh/sununu-appoints-eddie-edwards-licensure-post-he-s-packing-purell>

Without discussion, the council unanimously voted on an expedited contract to accept \$5 million from the Centers for Disease Control and Prevention for the purposes of addressing the COVID-19 virus which is effective immediately. The money became available following Congressional votes last week. It follows the declaration of a public health emergency on Jan. 31 by the U.S. Department of Health and Human Services relating to the global health crisis caused by the novel Coronavirus, COVID-19, which has killed many across the world in just a few short months of spreading from China. The money will be used for testing suspected cases of the virus, monitoring, and home visitation and the purchase of personal protective equipment and its distribution to health-care providers.

Making Hand Sanitizer

This was the first Executive Council meeting since the state's first positive COVID-19 case was announced and there are now five cases and an estimated 226 people being monitored for their exposure. It was business as usual, with the possible exception that Sununu is now packing Purell, Glittery Purell, to be specific. Students from the Swasey Central School in Brentwood shook hands with Sununu, and just as he has done throughout his tenure, the governor bent down, looked each child in



the eye, shook hands and asked for their name. Something new, however, came after shaking all those little hands. From the breast pocket of his suit coat, he showed students studying New Hampshire government from the New Hampton School his tiny bottle of Purell. After shaking a lot of hands, Sununu noted that it had glitter.

"I don't know whose idea it was to add glitter, but it's a bad idea," he said, noting the glitter sheds on to other objects. Concern for enough hand sanitizer – with or without glitter – has emerged as an issue nationwide. Later in the meeting, Executive Councilor Debora Pignatelli of Nashua suggested the state start producing hand sanitizer as there is a lack of availability. She noted that the state of New York is looking into doing it. Lori Shibinette, the state's director of Health and Human Services said, "It's definitely something that Commissioner (Charlie) Arlinghaus could do," to great laughter, referring to the Commissioner of Administrative Services, who manages all state buildings. He laughed as well and said he could start to try to do that in his garage. But he noted he is seriously exploring the idea and is looking at what other states are doing.

Pignatelli said that people are struggling to find sanitizer. She asked Shibinette about the many concerns people have. Shibinette suggested people wash hands with soap and water to reduce the risk of the spread of COVID-19. "Are we preparing for other challenges that might come up?" Pignatelli asked Shibinette. "New Hampshire is very well prepared," Shibinette said. The governor said his office will continue to provide information to the council on the virus. "We can also learn from what other states are going through as well," Pignatelli said.

Commonwealth – March 12, 2020

[What's behind the COVID-19 testing bottleneck](#)

Baker pushes feds: 'This is a critical issue for us'

Shira Schoenberg and Sarah Betancourt

DOUG QUATTROCHI traveled to New York as the coronavirus outbreak was beginning there, then came home to Worcester and developed a fever and shortness of breath. His doctors ruled out pneumonia and the flu, but would not test for COVID-19 because he could not demonstrate that he had contact with a person known to be infected. Quattrochi was walking around for several days until CareWell Urgent Care agreed to take a swab, though they could not guarantee it would get tested. He shared food with a senior and attended an event at Boston Symphony Hall before he self-quarantined, still not knowing whether he was infected or not.

"It seems to me the public response is really flawed," Quattrochi said. "I've got to believe there's a lot of people who have potentially been exposed and somehow we have no clue." As the number of coronavirus cases rises in Massachusetts and individuals languish in self-quarantine, kits to test for the

illness remain scarce, leading to concerns among some providers and patients that infected people are walking around exposing others. Protocols have been established limiting who can be tested and only one lab in Boston, operated by the Department of Public Health, is authorized to conduct the tests, creating a bureaucratic backlog that is time consuming and cumbersome. One hospital has started sending swabs to a lab in California, while another is using couriers – and sometimes even its own infectious disease head – to transport samples from the Berkshires to Boston.

The scarcity of testing in Massachusetts mirrors what is happening throughout the country, as officials nationwide say they do not have enough testing capability. Vice President Mike Pence has acknowledged a shortage, despite conflicting statements from President Trump and his top health officials. Even as testing capability has begun to expand from just the US Centers for Disease Control and Prevention into state and private labs, the CDC continues to maintain strict guidelines around who is eligible to be tested. The problem is particularly acute in Massachusetts, which had 108 documented cases of COVID-19 as of mid-afternoon Thursday, the fourth-most in the US after Washington, New York, and California. That is up from 95 Thursday morning. “The 95 cases we have—that’s where Italy was at two weeks ago,” said Sam Scarpino, an assistant professor of network science who heads the epidemics lab at Northeastern University. “They have 12,000 cases as of this morning, and their hospitals are overrun.”

Limited eligibility for testing

With testing resources scarce, the Centers for Disease Control has set strict eligibility guidelines for who can get tested, which the state Department of Public Health is relying on. The CDC recommends testing people who have traveled to countries with known cases and who have had contact with individuals with confirmed cases, including health care workers. It also recommends looking for certain symptoms, including fever and shortness of breath. But those are just recommendations, and discretion has been left in the hands of providers and then the state’s epidemiologists.

Dr. Shira Doron, an infectious disease physician and hospital epidemiologist at Tufts Medical Center, said if a doctor thinks a patient should be tested – and the hospital’s team of infectious disease specialists agrees – the hospital will call the state epidemiologist and leave a message. It could take up to four hours for the epidemiologist to return the call and approve the test or not. Test results take one to four days to come back. During that time, Doron says, the patient is in isolation “waiting for results and anxious.” For inpatients, hospital staff are using up protective equipment like masks, possibly unnecessarily.

Some individuals who meet the strict criteria say they have gotten tested quickly. MGH doctor Monique Aurora Tello posts on Facebook about concerns over test shortages. North Adams city councilor Jason



LaForest, a nurse, was told Monday evening that he sat near a person with coronavirus at a meeting. He woke up on Tuesday with a cough, sore throat, and mild headache. He told the state Department of Public Health, and a few hours later was instructed to drive to the emergency room in North Adams for testing. His test came back Thursday as negative. A local community leader in the Boston area, who asked that his name be withheld, returned from a national convention in Washington with flu-like symptoms and was told days later that a friend there, who the man hugged and talked to, tested positive. The man told his doctor, who called a hospital review board, and received approval for testing, which came back negative. But several doctors have complained in Facebook posts or in public interviews that they do not believe the state is allowing enough people to be tested. Monique Aurora Tello, a doctor at Massachusetts General Hospital, said in a Facebook post that she saw eight patients Thursday morning with probable coronavirus who had traveled on buses and planes. “The state wouldn’t let us test them all. Not enough tests!!” she said.

A shortage of labs

The test for COVID-19 involves taking one swab from a patient’s throat and another one through the nostril into the back of their throat. This is done at providers’ offices and at hospitals and sent to the state lab. Hospitals are also still developing ways to take swab samples without jeopardizing their staff. While some hospitals, like Tufts, take the swab in a clinic or hospital setting, others, such as Brigham and Women’s Hospital, are conducting “drive-through” testing in an ambulance bay. Processing the swab involves a polymerase chain reaction test, a method that lets scientists test for viral genetic material. Test kits have been doled out slowly by the CDC, with some in the medical field chalking the delays up to bureaucracy and others blaming it on a shortage of the materials needed to process the tests.

The other big problem is the state’s limited capacity to conduct the tests. Currently, the State Public Health Lab in Boston is the only lab in Massachusetts approved by the US Food and Drug Administration to test patient swabs. The lab is operating around the clock, but still having problems keeping up. According to Ann Scales, spokeswoman for the Department of Public Health, the test is a manual process that involves “a lot of staff time and effort.” A recent shift to automating the process quadrupled the state lab’s testing capacity — but only from around 50 tests a day to 200. Although DPH says results should be available within 24 hours, multiple hospital officials said the turnaround time can be anywhere from one to four days.

After a meeting with officials from Berkshire County in Pittsfield, Gov. Charlie Baker said the state lab now has the capacity to do an additional 5,000 tests, on top of the several thousand it was already capable of doing. But Baker said the state desperately needs more testing capability, and the key to expanding testing is federal approval for private labs and hospitals to conduct tests on their own. “This is among our highest priorities,” said Baker, who has mentioned it several times this week. “This is a



critical issue for us.” North Adams Rep. John Barrett III said getting new testing sites approved, particularly in Western Massachusetts, is a “no-brainer.” “This is no time to fool around with regulatory bureaucracy,” Barrett said.

Quest Diagnostics, a Fortune 500 company based in New Jersey, launched its own COVID-19 test on March 9, and the company says providers anywhere in the US are now able to order it. But the Quest test has not been approved by the Food and Drug Administration, so a positive test from Quest must then be confirmed by a government-run lab. If Quest test wins FDA approval, company spokeswoman Rachel Carr said the company aims to begin operating “high complexity laboratories,” one of which will be in Marlboro, Massachusetts, within two weeks.

LabCorp, a North Carolina company that operates clinical laboratories, began offering its own test to physicians March 10, but that test is also awaiting FDA approval. That leaves Massachusetts hospitals, many of whom are awaiting federal approval to launch their own testing operations, searching for fast and accurate labs. UMass Medical Center in Worcester is using the state lab, but if DPH does not approve running a test, the center will in some instances send the swab to Quest Diagnostics in California. In the last two days, UMass Memorial has sent 20 samples to Quest and none to the state lab. Kimiyoshi Kobayashi, the hospital’s chief quality officer, said UMass Medical will “definitely” want to use Quest’s Marlboro lab rather than taking swabs to the airport each day to fly them to California, then waiting three to four days for results. “It’ll reduce turnaround time,” Kobayashi said. “It would be ideal if we could test patients quickly and in an efficient manner.”

Many hospitals are still relying on the state lab – a process that can be cumbersome and inconvenient. “Our infectious disease director has literally driven samples to Boston,” said Michael Leary, a spokesman for Berkshire Health System, which oversees Berkshire Medical Center and Fairview Hospital in Great Barrington. The hospital is now using a courier to deliver swabs and is investigating whether it can conduct tests at Berkshire Medical Center. Doron, the Tufts epidemiologist, said the hospital is considering using its own lab or a private lab. “We want to move away from having to call the state health department about every possible case, with all of the slowdowns and throughput that entails,” she said.

But Doron said it is often not that simple. In addition to needing federal approval, there is a shortage of the materials needed to process the tests, some labs are not set up to provide 24-hour notifications of test results, and there is the question of who will pay. Massachusetts General Hospital is considering sending tests to LabCorp in California and is also working to develop an in-house test to avoid the three to four-day turnaround time at the state lab. “The state lab has a lot in its line of requests for testing. It’s been a challenge,” said David Hooper, chief of the infection control unit at the hospital. But Hooper said



getting in-house test kits approved by the FDA requires proof that other means of state testing, like the state lab, are swamped.

The testing debate

Most people in the medical community believe more testing is desperately needed, but some are beginning to wonder whether the disease has already progressed beyond the testing phase.

Doron of Tufts said with no treatment available and cases already spreading throughout the community, it may become impossible to isolate everyone with the illness. There may then be little benefit to widespread testing of people with mild symptoms, other than for research purposes to establish the prevalence of the disease. She noted that the general recommendations are the same for someone with any respiratory illness – practice good hygiene and stay home. But others say testing is an effective tool in dealing with the growing number of patients. “We’re not running nearly enough tests, and we don’t have a great sense of how many cases we’re missing,” said Scarpino of Northeastern University.

South Korea is running 15,000 COVID-19 tests a day, while the output in Massachusetts is 200 a day, and that’s with a recent improvement that quadrupled the capacity. “We’re off by a factor of a thousand for the number of tests we need,” Scarpino said.

Update: The Department of Public Health said, after this story was published, that Quest and LabCorp have begun testing in Massachusetts, and one of those labs reported its first presumptive positive case to the state lab on Thursday.

WBUR – March 12, 2020

Single Conference Linked To Most Mass. Coronavirus Cases Looks Like A 'Superspreading Event'

Carey Goldberg

<https://www.wbur.org/commonhealth/2020/03/12/coronavirus-outbreak-biogen-conference-superspreading>

Update: The Boston Marriott Long Wharf, the hotel that hosted a Biogen company gathering linked to a majority of the coronavirus cases in Massachusetts, is closing temporarily. In a letter to guests on Thursday, the hotel said it made the decision with the Boston Public Health Commission. Among the coronavirus numbers that Massachusetts officials have shared recently, one is particularly striking: Of the state's 95 cases detected as of late Wednesday, they say 77 stemmed from a meeting that the Cambridge biotech company Biogen held in late February.

In public health parlance, the Biogen meeting is looking like a "superspreading event." Perhaps you've heard of Typhoid Mary, the New York cook who spread Typhoid fever in the early 20th century. She



used to be seen as an anomaly, because it was thought that everyone was more-or-less equally prone to spread a disease. But now, it's known that "superspreaders" or "superspreading events" are common in epidemics, including SARS in 2003 and a measles outbreak in Canada in 2011 that appeared to stem from one patient's stint in the Montreal airport.

Yale professor Nicholas Christakis, a physician and sociologist who studies networks, says the current outbreak in Italy also stemmed from a "superspreader." "We know from genetic analyses in Italy that the epidemic there was started, we think, by two people, one of whom gave it to 43 other people," he says. "The question arises," he says, "when we see a superspreading episode like this episode at Biogen appears to be, what's the cause of it? Is it just chance? Or is it something to do with the particular circumstances?" Though superspreading has been documented in one epidemic after another, it's not well understood. "We certainly think biology plays a role," says Dr. Ashish Jha, a professor of health policy at the Harvard Chan School of Public Health. "Some people end up having a very high viral load and then they shed a lot more virus than other people. It may be something with your immune system, something to do with how that immune system is reacting to the virus."

Initial findings suggest the coronavirus could be quite contagious early on, possibly even before symptoms show up or get bad. Typically it is not possible to know in advance who or under what circumstances we're going to get a superspreading event. Christakis from Yale says other factors could cause people to become superspreaders — like even a propensity to cough. "Maybe they have a lung disease, for example," he says. "And so they're doing more coughing anyway. And so compared to a person who doesn't cough, they transmit it more." The environment can contribute to spreading, too, he says — poor ventilation, overcrowding. Or — a superspreader may just be more gregarious. "So there are many types of situations or circumstances that can contribute to the phenomenon of superspreading," says Christakis, author of "Blueprint: The Evolutionary Origins of a Good Society." "And it's not always possible to know — or typically it is not possible to know in advance — who or under what circumstances we're going to get a superspreading event."

So that's part of why large gatherings are a bad idea right now, Harvard's Ashish Jha says: If you have a superspreader in a crowd, "It can really make things explode. And the name of the game right now for America is a slow and steady rise in infections. We've got to stop explosive growth because that's what's going to cripple our health system and really harm people. And superspreaders can end up being an important part of that problem if we get them into large groups." In retrospect, Jha says, Biogen probably should have canceled its meeting. "But I understand that decisions are easier to make in retrospect," he says.

This segment aired on March 12, 2020.



New England Public Radio – March 12, 2020

How Coronavirus Is Affecting The U.S. Pharmaceutical Supply

By Sydney Lupkin

<https://www.nepr.net/post/how-coronavirus-affecting-us-pharmaceutical-supply#stream/0>

The coronavirus outbreak that originated in Wuhan, China, is causing businesses, health officials and patients to worry about potential shortages of prescription drugs. That's because the vast majority of active ingredients in medicines dispensed in the U.S. are made in factories overseas, many in China. NPR has exclusive reporting on how disruptions in China are affecting some drugmakers' ability to make key ingredients. On March 3, we emailed facilities registered with the U.S. Food and Drug Administration to ask what products they manufacture, how the outbreak was affecting their work and how they were coping.

Since then, nine companies with operations in China spoke directly to NPR. The facilities make a wide range of pharmaceuticals and some also make other health-related products, including nasal strips and agricultural insecticides. So far, the serious supply disruptions many have feared haven't come to pass. Many facilities are back online after production interruptions related to the coronavirus response. Others say they were far enough from the epicenter of the outbreak in Wuhan to continue working immediately after the extended Chinese New Year break. Still, even facilities that are almost back to normal are anticipating a second wave of setbacks. "A lot of our suppliers still are not answering phones because they can't get to work or their site isn't open," says Elut Hsu, president of Morrisville, N.C.-based Asymchem, Inc., which has eight facilities in northeast China that manufacture drugs and drug ingredients. Asymchem is a contract manufacturer whose ingredients go into antibiotics, oncology drugs and antivirals sold by other companies.

Asymchem had replenished ingredients and supplies ahead of the new year holiday. "We always stock up enough for at least a month," she says. "So we're OK for now. But the secondary wave of supply issues could be coming." Some projects had no interruptions, and others were delayed about four weeks, she says. That kind of delay usually isn't enough to prompt a shortage. Hsu says the extent of the outbreak became apparent to her colleagues in China as they were preparing to travel home for Chinese New Year at the end of January. Many employees are from other parts of the country. Some cut their holidays short to return to work on time, but others needed to remain in quarantine.

Although the Asymchem facilities in China were able to reopen on Feb. 10, the southernmost facility — nearest to Wuhan — was working with a smaller staff. It's taken weeks to return to their normal workforce. Many manufacturers are taking extra precautions to avoid the virus. Some people tell NPR they're required to eat meals alone, wear masks to work, and have their temperatures checked once a day or more. They also avoid gatherings like meetings. Gary Ye, of Tianyu Pharmaceuticals, says his



facility couldn't start back up until the last week in February because there were more than 100 coronavirus cases in his city, Taizhou, on Feb. 10. Although he says no one who works at Tianyu Pharmaceuticals has been diagnosed with the illness, they returned to work with extra requirements to keep the virus from spreading. His facility makes drug substances bound for the United States, including losartan for hypertension and montelukast for allergies and asthma.

"It had some impact to our business, we had to explain to clients we could not meet some deadlines in some cases," he wrote in an email. "For drug substance manufacturing, it's quite difficult to speed up, the only thing we can do is to make the most of our production capacity." He says his facility also experienced difficulties related to travel restrictions between provinces and cities. Although medical and living supplies were allowed through borders, manufacturing material was not. Those restrictions have since been lifted. "It's very costly for all kinds of measures China are taking, but obviously quite effective and successful," he added.

Spread of coronavirus in China has slowed dramatically and businesses have begun to resume work.. "At this stage, most of the companies seem to be largely in operation," says Benjamin England, a consultant and attorney with several dozen clients who import products to the U.S. Many manufacture drugs in China. "We're not at least hearing of there being continued delay or restrictions with respect to production. And that's true on the medical device side, too." Sheng Ding, dean of pharmacy at Tsinghua University in Beijing, says most drug manufacturing in China operates outside of Wuhan and is therefore returning to normal. "Things (e.g., getting back to work in full speed) are changing pretty quickly, especially in the last week as the outbreak situation is under control," he wrote in an email.

Several U.S. drugmakers, including Pfizer and Mylan, have told their investors that the virus could harm their ability to manufacture products or get supplies to do so. The Food and Drug Administration says it is in contact with more than 180 drug manufacturing facilities, and as of Feb. 26 it had identified 20 products or ingredients that are exclusively manufactured in China and could go into shortage. The agency said on Feb. 27 that only one shortage has officially been attributed to the outbreak so far because manufacturers can't get the active pharmaceutical ingredient they need to make it. The agency didn't name the drug and said there are alternatives for patients.

A 2012 law requires companies to tell the FDA if they are having manufacturing problems six months in advance of a possible shortage — or as soon as they know. Then, the FDA can jump in to help prevent a shortage. But the law has its weaknesses, says Erin Fox, senior director of drug information and support services at the University of Utah Health Hospitals, who tracks national drug shortages. "If the company chooses not to report, nothing bad happens to them," she says. "They don't get fined." What's more,



companies aren't legally required to tell the FDA why their drug is in shortage. And they can't force a company to make a drug if it doesn't want to anymore.

The agency gets "a lot of blame when drugs are short, but they don't really have much control at all," Fox says. Still, any drug shortages caused by coronavirus manufacturing disruptions probably won't appear immediately or all at once, Fox says. "If [manufacturers] bought six months worth of raw material before Chinese New Year and they're maybe not ready to make a batch until right now, they may not run out of that raw material until later this fall," Fox says. "And then by then, maybe things will be OK." Rachna Shah, a professor in the supply chain and operations department at Carlson School of Management at the University of Minnesota says she, too, is reassured by the knowledge that drug manufacturers hold months of inventory. "There's more fear than there needs to be," she says.

Bangor Daily News – March 12, 2020

[How to grocery shop during the coronavirus outbreak](#)

By Lori Valigra, BDN Staff

PORTLAND, Maine — Fresh produce may be part of a healthy diet, but the coronavirus outbreak poses additional concerns to some grocery shoppers. Crowds in supermarkets, bins of tomatoes that shoppers readily touch, open salad bars and exposed prepared food areas can cause unease during a rapidly spreading outbreak. In response, supermarkets are beefing up cleaning procedures and adding more sanitizing stations within the store for customers. They also are educating employees and providing them with up-to-date information on the latest guidelines from the U.S. Centers for Disease Control and Prevention and the U.S. Food and Drug Administration.

"They are taking extra steps to clean and sanitize the stores and equipment and emphasize personal hygiene," said Christine Cummings, executive director of the Maine Grocers & Food Producers Association in Augusta. "We'll see an increase in the use of gloves and masks and things to help prevent the spread of infection. Shoppers shouldn't be fearful. It demonstrates the store is taking extra precautions." She said shoppers need to be thoughtful about their own hygiene and habits. "If you don't intend to buy a certain piece of produce, don't pick it up," she said. "If you feel ill or have symptoms, stay away." The new coronavirus cannot live in food, but health experts still are learning how it is transmitted. The most common way is through sneezing and close contact with infected people.

The Centers for Disease Control and Prevention said it is possible to become infected by touching one's face or mucus membranes after contact with surfaces. And a research study of an earlier coronavirus found that virus could survive for several days on the surface of lettuce and strawberries. Handling such produce and then touching the face or mouth may transmit an infection, the authors found. That's one reason experts recommend washing produce and hands as well as thoroughly cooking food. Consumer



Reports said that while it's important to rinse fruits and vegetables thoroughly with water after buying them, there's no data to show that washing them with soap will do a better job of eliminating coronavirus.

The magazine recommends paying with credit or debit cards to avoid handling cash, using a germicide to wipe carts and hands before shopping and washing nonporous containers before storing them in the cupboard at home. For their part, supermarkets say they are following recommended health precautions to prevent disease spread. That includes sanitizers for shopping carts and cleaning throughout stores. "As a food retailer, we have rigorous protocols in place to ensure we remain compliant with strict food safety regulations," said Teresa Edington, a spokesperson for Shaw's Supermarket and Star Market. "We encourage customers to wash their fresh food at home. We urge everyone to follow the recommendations of the CDC to help prevent the spread of disease, like frequent hand washing, covering your mouth when you sneeze or cough, and staying at home when you have a fever."

She said the supermarket chain, which has 154 stores in New England and 21 Shaw's in Maine, has given its employees the latest information from the CDC and is maintaining an internal resource page. Edington said customers should follow the Food and Drug Administration's guidelines for handling food, including washing fresh produce under cold water prior to preparing and eating it. Hannaford, which has more than 180 stores in New England, has been following CDC recommendations as well, spokesman Eric Blom said. "Hannaford has rigorous cleaning procedures in place that focus on touchpads, checkout belts and surfaces that people may touch frequently," he said. "Cleaning takes place across the store, from the grocery areas to the bathrooms. Our food safety practices are exhaustive and thorough." He said the store also has implemented travel restrictions, asked workers not to attend conferences or other group gatherings and postponed or canceled meetings with large numbers of people.

"We have seen a sharp spike in demand for products such as cleaning supplies and hand sanitizer, and we are working closely with our suppliers to provide our customers with the products they need," he said. "Our team is searching widely for new sources of supply for harder-to-find items, and stores have implemented a purchase limit on certain items to ensure those products are available to customers." For its part, Walmart, which is a large food seller, has been sending memos to employees about what to do if they get sick and how to keep the stores clean, spokesman Casey Staheli said. Walmart has a total of 25 stores in Maine, including supercenters, discount stores and Sam's Clubs. "Stores are cleaned daily, which includes using sanitizing solutions in high-touch, high-traffic areas," Walmart said in a March 10 memo. "We've seen increased foot traffic, so we're sending additional cleaning supplies for use in places like the registers and on shopping carts."



The store also is looking for easier ways to sanitize shopping carts. It has plans in place for a third-party to sanitize a store if it is affected by the virus. It also is evaluating whether to change hours at some 24-hour stores to allow for additional cleaning. Another option for shoppers is to avoid going into stores altogether. “For older people and those with underlying health conditions — the group that the Centers for Disease Control and Prevention recommends stay home — I would highly recommend using a grocery delivery service,” said Jim Rogers, director of food safety research and testing at Consumer Reports. Cummings expects more shoppers to take advantage of online ordering and curbside pickup. “That’s already a trend because of the convenience factor,” she said. “But with the virus, it allows folks to reduce their exposure to crowds.”