

From: [OT21-2103 Support \(CDC\)](#)
To: [OT21-2103 Support \(CDC\)](#)
Bcc: [Aragon, Tomas@CDPH](mailto:Aragon.Tomas@CDPH)
Subject: [For Your Information] February COVID-19 Health Equity TA Bulletin
Date: Thursday, February 1, 2024 11:19:00 AM
Attachments: [COVID-19 Health Equity TA Bulletin - February 2024.pdf](#)
[COVID-19 Health Equity TA Bulletin - February 2024 Accessible.pdf](#)

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Greetings OT21-2103 recipients,

We're pleased to share the **February COVID-19 Health Equity TA Bulletin!** We encourage you to review these resources and welcome your ongoing feedback and ideas.

February COVID-19 Health Equity TA Bulletin:

The attached bulletin features resources from OT21-2103's technical assistance (TA) providers: Association of State and Territorial Health Officials (ASTHO), National Association of County and City Health Officials (NACCHO), National Network of Public Health Institutes (NNPHI), and CDC's Office of Health Equity.

The bulletin includes short summaries about featured TA offerings, links to access the tools and other content, registration links for live events, and information on how to request assistance. The various types of TA offerings are designed to help you connect with peers, build capacity, and leverage evidence-based practices as you implement OT21-2103 activities. This month's issue also features resource highlights on rural health.

We have also included an accessible version of the TA Bulletin with alternate text for images and standard URL links. If you have been unable to access links within past TA Bulletins, please use this version:

[COVID-19 Health Equity TA Bulletin – February 2024](#)

Or copy and paste into your browser:

<http://covid19healthequity.org/wp-content/uploads/2024/01/COVID-Health-Equity-TA-February-2024.pdf>

If you missed past issues of the TA Bulletin, you can access them all in the [archive](#).

Sincerely,

From: [OT21-2103 Support \(CDC\)](#)
To: [OT21-2103 Support \(CDC\)](#)
Bcc: [Aragon, Tomas@CDPH](mailto:Aragon.Tomas@CDPH)
Subject: [For Your Information] January COVID-19 Health Equity TA Bulletin
Date: Monday, January 8, 2024 8:51:30 AM
Attachments: [Outlook-xxmz3ltd.png](#)
[Outlook-ptpip1ur.png](#)
[Outlook-mufdxmf1.png](#)
[COVID-19 Health Equity TA Bulletin - January 2024 Accessible.pdf](#)
[COVID-19 Health Equity TA Bulletin - January 2024.pdf](#)

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[January COVID-19 Health Equity TA Bulletin:](#)

The attached bulletin features resources from OT21-2103's technical assistance (TA) providers: Association of State and Territorial Health Officials (ASTHO), National Association of County and City Health Officials (NACCHO), National Network of Public Health Institutes (NNPHI), and CDC's Office of Health Equity.

The bulletin includes short summaries about featured TA offerings, links to access the tools and other content, registration links for live events, and information on how to request assistance. The various types of TA offerings are designed to help you connect with peers, build capacity, and leverage evidence-based practices as you implement OT21-2103 activities.

We have also included an accessible version of the TA Bulletin with alternate text for images and standard URL links. If you have been unable to access links within past TA Bulletins, please use this version:

[COVID-19 Health Equity TA Bulletin – January 2024](#)

Or copy and paste into your browser:

<http://covid19healthequity.org/wp-content/uploads/2024/01/COVID-Health-Equity-TA-January-2024.pdf>

If you missed past issues of the TA Bulletin, you can access them all in the [archive](#).

Sincerely,
OT21-2103 Support Team
National Center for STLT Public Health Infrastructure and Workforce
Centers for Disease Control and Prevention

OT21-2103Support@cdc.gov

[Read more about this funding on our website](#)

Resources for OT21-2103 recipients



From: [Jackson, Brendan R. \(CDC/NCIRD/OD\)](#)
To: [Erica Pan, MD, MPH, FAAP \(CDC.cdph.ca.gov\)](#)
Subject: Automatic reply: CA updates to COVID-19 isolation guidance
Date: Thursday, January 18, 2024 8:54:41 AM

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I am out of the office on January 18th. For respiratory virus issues, please contact Eduardo Azziz-Baumgartner (eha9@cdc.gov), who is acting Incident Manager of the NCIRD Respiratory Viruses Response.

Brendan Jackson, MD, MPH

Incident Manager, NCIRD Respiratory Viruses Response
CDR, US Public Health Service
Centers for Disease Control and Prevention
brjackson1@cdc.gov | 404-639-0536

From: [Davis, Lisa \(CDC/IOD/ORR/DSLRL\)](#)
Bcc: [Pan, Erica S@CDPH](#)
Subject: Partner Alert: Brief Updates from CDC's Emergency Response Activities and Other Information for Your Situational Awareness
Date: Friday, February 2, 2024 11:02:32 AM
Attachments: [ApplesauceRecall-Flyer.pdf](#)

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Greetings Partners,

The following are updates from CDC's public health emergency responses, as well as additional content for your situational awareness.

If you wish to unsubscribe from this listserv, please email a request to the STLT Communications Team at eocevent411@cdc.gov and copy your health department liaison officer.

Respiratory Virus Updates

- [CDC Respiratory Virus Updates | CDC](#) – On February 1, a new blog was posted that highlights the importance of receiving the updated 2023-2024 COVID-19 vaccine. It will restore and provide enhanced protection against the variants currently responsible for most infections and hospitalizations in the United States, including variants from the XBB lineage and the new variant, JN.1.
- [FDA revises letter of authorization for the emergency use authorization for Paxlovid | FDA](#) – On January 29, the Food and Drug Administration (FDA) announced that the Emergency Use Authorization-labeled Paxlovid, distributed by the U.S. government, will remain authorized for use only through March 8, 2024. Additional information is available in FDA's Paxlovid [letter of authorization](#) dated January 29, 2024. ASPR has worked with Pfizer, the manufacturer of Paxlovid, to ensure that the federal inventory of Paxlovid is the NDA-labeled product.
- [Respiratory Virus Data Channel Weekly Snapshot \(cdc.gov\)](#) – On January 26, new respiratory illness trends were posted. The amount of respiratory illness (fever plus cough or sore throat) causing people to seek healthcare was elevated but decreasing across most areas of the country. In the past week, 22 jurisdictions experienced high or very high activity.
- [Flu News & Spotlights | CDC](#) – This page highlights new influenza-related developments and features stories from past and present influenza seasons.
- [Help Promote V-safe to Vaccine Recipients | Blogs | CDC](#) – CDC has added three vaccines to its vaccine safety monitoring system. Vaccine recipients can self-report how they feel after receiving the [maternal RSV vaccine](#), [RSV vaccines for older adults](#), or [2023-2024 updated COVID-19 vaccines](#). Healthcare providers should encourage patients to [register for a V-safe account](#).
- [COVID-19 Treatments Locator](#) – This new resource includes the Test to Treat locator and the providers' therapeutics locator. Partners are encouraged to opt into the locator. A health partner ordering portal account is not needed to opt into the locator.
- [Treatment-PDF_PAXCESS-Brochure.pdf \(cdc.gov\)](#) – Learn more about Pfizer's PAXCESS

program, which offers access and affordability options to patients who are prescribed Paxlovid.

- Patients can enroll at [PAXCESS Patient Support Program \(iassist.com\)](https://iassist.com).
- [Merck Patient Assistance Programs to Help Those in Need](#) – This program provides free Lagevrio to patients who meet the eligibility criteria and who, without assistance, could not otherwise afford this COVID-19 antiviral medication. Patients, providers, and pharmacies can learn more about eligibility and how to enroll through this website.

Applesauce Lead Poisoning Outbreak Updates

- Flyer: Recalled Cinnamon Applesauce Pouches That Have High Lead and Chromium Levels (*see attachment*) – This new resource can be widely distributed and adapted by health departments as needed.
- [Investigación sobre los niveles elevados de plomo y cromo en las bolsas de puré de manzana y canela \(noviembre de 2023\) | FDA](#) – The Spanish translation of FDA’s “Investigation of Elevated Lead and Chromium Levels: Cinnamon Applesauce Pouches, is now live.

Other Updates

- [HHS Announces Department Actions to Slow Surging Syphilis Epidemic | HHS.gov](#) – The U.S. Department of Health and Human Services (HHS) has established the [National Syphilis and Congenital Syphilis Syndemic \(NSCSS\) Federal Task Force](#) to respond to the U.S. syphilis and congenital syphilis epidemic. The actions of the Task Force leverage federal resources to reduce rates, promote health equity, engage impacted communities, and direct resources to support those most impacted.
- [RFA-Data-Readiness-for-Operational-Success.pdf \(naccho.org\)](#) – With support from the Administration for Strategic Preparedness and Response (ASPR), the National Association of County and City Health Officials (NACCHO) has a funding opportunity for local health departments to strengthen readiness for public health threats through data sharing of assets distributed by ASPR during a public health emergency. The project's main objective will be to enable bidirectional data-sharing between ASPR and the local health department for coordinated, scalable, and timely responses to public health threats.

Upcoming Meetings

- [February SNS Office Hours: Updates from the SNS Office of Science](#) – Join ASPR at 4 p.m. ET on February 28 for the next monthly Strategic National Stockpile (SNS) Office Hours. This session features SNS health scientists who will provide the most recent SNS science updates and answer questions on SNS formulary topics.

MMWR and Other Publications

- [Early Estimates of Updated 2023–2024 \(Monovalent XBB.1.5\) COVID-19 Vaccine Effectiveness Against Symptomatic SARS-CoV-2 Infection Attributable to Co-Circulating Omicron Variants Among Immunocompetent Adults — Increasing Community Access to Testing Program, United States, September 2023–January 2024 | MMWR \(cdc.gov\)](#) – Receipt of updated COVID-19 vaccine provided approximately 54% increased protection against symptomatic SARS-CoV-2 infection compared with no receipt of updated vaccine. Vaccination provides protection against JN.1 and other circulating lineages.
- [Respiratory Syncytial Virus-Associated Hospitalizations Among Children <5 Years Old: 2016 to 2020 | Pediatrics | American Academy of Pediatrics \(aap.org\)](#) – Younger infants and premature children experienced the highest rates of RSV-associated hospitalization and had

increased risk of ICU admission. RSV prevention products are needed to reduce RSV-associated morbidity in young infants.

Many thanks for your continued partnership.

Sincerely,

Lisa B. Davis
Health Department Liaison Officer, HHS Region 9
Jurisdictional Readiness and Response Support Branch
Division of State and Local Readiness
Office of Readiness and Response

Centers for Disease Control and Prevention (CDC)
1600 Clifton Road, NE, MS H21-5, Atlanta, GA 30329
404-734-4810 Office | 404-734-4810 Cell
lbd2@cdc.gov

From: [Jackson, Brendan R. \(CDC/NCIRD/OD\)](#)
To: [Daskalakis, Demetre \(CDC/NCIRD/OD\)](#); [Wentworth, David E. \(CDC/NCIRD/CORVD\)](#); [Pan, Erica S@CDPH](#)
Cc: [Watt, James@CDPH](#); [Hall, Aron \(CDC/NCIRD/CORVD\)](#); [Durden, Teresa \(CDC/NCIRD/CORVD\)](#)
Subject: Re: CA updates to COVID-19 isolation guidance
Date: Wednesday, January 17, 2024 8:13:25 AM
Attachments: [Picture \(Device Independent Bitmap\) 1.jpg](#)

Thank you Erica for this update. Sounds like you had a really solid rollout with some very reasonable guidance.

This will be very helpful for us at the national level. Once again, California is a leader among states.

If you could, please keep us in the loop as you hear reactions to this change.

Noting that Barbara has left CDC. Adding Aron Hall as deputy director for science, and Teresa Durden as deputy for policy, comms, and operations, under Dave in CORVD.

Best,
Brendan

From: Pan, Erica S@CDPH <Erica.Pan@cdph.ca.gov>
Sent: Tuesday, January 16, 2024 10:21 PM
To: Daskalakis, Demetre (CDC/NCIRD/OD) <yzq5@cdc.gov>; Wentworth, David E. (CDC/NCIRD/CORVD) <gll9@cdc.gov>; Jackson, Brendan R. (CDC/NCIRD/OD) <iyn0@cdc.gov>
Cc: Mahon, Barbara (CDC/NCIRD/OD) <bdm3@cdc.gov>; Watt, James (CDC cdph.ca.gov) <James.Watt@cdph.ca.gov>
Subject: CA updates to COVID-19 isolation guidance

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Hi all, I admittedly wasn't sure which of you to send this update to, so sending to a few of you and hoping the info is getting to the right CDC leads who may be interested.

We wanted to let you know that last week we updated our COVID-19 isolation guidance to be a bit more like other respiratory viruses (eg stay home when sick, for 24h post fever) instead of 5 days of isolation/exclusion. We have been working on them off and on since the last late summer/early fall surge and posted them last week to remind people that multiple respiratory viruses are circulating, people should stay home when sick, and if testing positive to still wear a mask for 10d and avoid high-risk settings and contacts.

[COVID-19 Isolation Guidance \(ca.gov\)](#)

OR did this last May 2023, and we still have CA OSHA specific standards/regs that exclude workers for COVID-19 that will be in place until Feb 2025, thus there are still some requirements linked to our

public health guidance.

This will apply to schools now as well. (our current K-12 guidance docs are here: [K-12 Guidance 2023-24 School Year \(ca.gov\)](#) and for school staff more general symptoms based approach we posted last fall [Considerations when a Child has Symptoms of Illness in Child Care or School](#)).

Healthcare settings will still follow CDC healthcare setting guidance to exclude positive HCP for at least 5 days with at least one negative test: [AFL 21-08 \(ca.gov\)](#), unless there is a critical staffing shortage.

We updated key stakeholders such as schools and our social services colleagues, and coordinated with CA OSHA, but there was not a big announcement or press release.

We also drafted some more detailed TPs for our LHDs if any of your team is interested in seeing those as well. (much of the rationale is in the intro to the guidance, but we have longer TPs we circulated as well).

If any of your teams have more Qs or want more information, we can connect them to our leads, wanted to let you know.

(and Demetre, I look forward to seeing you at CSTE Exec meeting on Thursday!)

Take care,
Erica

Erica Pan, MD, MPH, FIDSA, FAAP
Pronouns: she/her/hers

California State Epidemiologist
Deputy Director, Center for Infectious Diseases
California Department of Public Health

Clinical Professor, Pediatric Infectious Diseases
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Scheduling Assistant - Cinthya Quintero
Cinthya.Quintero@cdph.ca.gov
510-620-9534

I sometimes work flexible hours, so while it is convenient for me to email now, I don't expect a response or action outside of your working hours.

[CDPH Home \(ca.gov\)](#)



From: [CDC Weekly Preview \(CDC\)](#)
To: [CDC Weekly Preview \(CDC\)](#)
Bcc: [Aragon, Tomas@CDPH](mailto:Aragon.Tomas@CDPH)
Subject: Embargoed MMWR Weekly Preview for Thursday, January 4, 2024
Date: Wednesday, January 3, 2024 1:19:40 PM
Attachments: [image001.jpg](#)
[image002.png](#)
[image004.png](#)

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All information in this email is embargoed. Please do not distribute or share this information through email, print, the Internet, or social media until after 1pm (ET) Thursday, January 4, 2024. Information and dates are subject to change.



***This MMWR and all related materials, including supplementary tables, are embargoed until 1 PM ET Thursday, January 4, 2024
Summaries for January 5, 2024***

Second Nationwide Tuberculosis Outbreak Caused by Bone Allografts Containing Live Cells – United States, 2023

2023 U.S. tuberculosis (TB) outbreak caused by contaminated bone product shows the need to protect patients from tissue-transmitted TB

- In July 2023, CDC was alerted to a potential TB disease outbreak from surgical procedures using bone allograft material contaminated with TB bacteria. CDC, FDA, and state health departments worked quickly to contain the outbreak.
- Due to the limitations of nucleic-acid amplification tests, TB bacteria were not detected in the contaminated product lot prior to product distribution. Additional safety measures, such as culture-based testing of tissue products and exclusion of donors with sepsis, are needed to prevent future outbreaks.
- While CDC does not have the authority to regulate the use of tissue and tissue products, the agency will continue to support public health initiatives that focus on improving transplant safety.

Link once embargo lifts: bit.ly/mm7253a1

Related: [Tuberculosis \(TB\) Disease Associated with Suspected Contaminated Viable Bone Matrix Material Used in Surgical and Dental Procedures | HAI | CDC](#)

Contact: CDC Media Relations (media@cdc.gov; 404-639-3286)

Notes from the Field: Supply Interruptions of First- and Second-Line Oral Drugs to Treat Tuberculosis During the Previous 12 Months – California, January-March 2023

Drug shortages create additional challenges for tuberculosis (TB) programs and patients in California

- TB drug supply disruptions have been a recurring concern in the United States. The California Department of Public Health and California TB Controllers Association surveyed TB programs to analyze the impact of recent drug shortages.
- Nearly 90% of TB programs in California responded to the survey. Among programs that reported one or more TB cases during 2016-2021, 64% experienced a delay in availability or unavailability of any oral first-line TB drug. Though all patients with TB disease were ultimately able to begin treatment, shortages and disruptions caused delayed starts to treatment, longer duration of treatment, and changes to treatment regimens.
- Ensuring drug availability is a high priority for TB programs. In response to these shortages, and to continue progress toward TB elimination, California established a buffer supply of several TB drugs to reduce the impacts of future drug shortages.

Link once embargo lifts: bit.ly/mm7253a2

Related: [TB Drug Supply Interruptions and Shortages | Dear Colleague Letters | TB | CDC](#)

Contact: CDC Media Relations (media@cdc.gov; 404-639-3286)

Notes from the Field: Seizures, Hyperthermia, and Myocardial Injury in Three Young Adults Who Consumed Bromazolam Disguised as Alprazolam — Chicago, Illinois, February 2023

Young adults in Chicago hospitalized after taking counterfeit pills disguised as alprazolam

- Bromazolam is a benzodiazepine derivative that has not been approved for therapeutic use. Although mostly detected alongside fentanyl or other opioids, consumption of bromazolam can be life-threatening even in the absence of other drugs. In February 2023, three young adults in Chicago were found unresponsive hours after ingesting what they believed to be alprazolam.

- All three experienced seizures and myocardial injury, two were hyperthermic, and all were admitted to an intensive care unit. Testing of samples from all three patients confirmed the presence of bromazolam. These cases suggest an unexpected syndrome of seizures, myocardial injury, and hyperthermia in people who ingest this drug.
- Illegally obtained prescription drugs may be counterfeit and may not contain the drug of choice. There has been an increased presence of bromazolam in pills that people think are prescription benzodiazepines, and people who experience nonfatal overdoses from bromazolam may have complicated hospitalizations and serious health outcomes.

Link once embargo lifts: bit.ly/mm7253a5

Related: [Polysubstance Use Facts \(cdc.gov\)](https://www.cdc.gov/pollsubstance-use-facts/)

Contact: CDC Media Relations (media@cdc.gov; 404-639-3286)

QuickStats: Rate of Triplet and Higher-Order Multiple Births, by Age of Mother — National Vital Statistics System, United States, 1998 and 2022

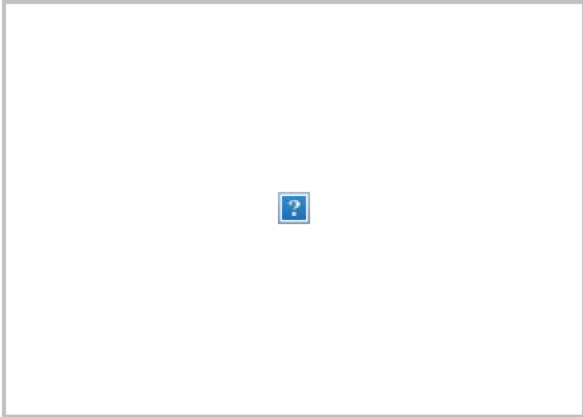
Link once embargo lifts: bit.ly/mm7253a6

Upcoming MMWRs for January 11, 2023

Titles and dates are subject to change.

- Topical Antifungal Prescribing for Medicare Part D Beneficiaries — United States, 2021
- Adverse Childhood Experiences and Adult Alcohol Use During Pregnancy — 41 U.S. Jurisdictions, 2019–2022
- Committee on Immunization Practices Recommended Immunization Schedule for Children and Adolescents Aged 18 Years or Younger — United States, 2024
- Advisory Committee on Immunization Practices Recommended Immunization Schedule for Adults Aged 19 Years or Older — United States, 2024
- Effectiveness of Bivalent mRNA COVID-19 Vaccines in Preventing COVID-19–Related Thromboembolic Events Among Medicare Enrollees Aged ≥ 65 Years and Those with End Stage Renal Disease — United States, September 2022–March 2023
- **QuickStats:** Percentage of Children and Adolescents Aged 5–17 Years Who Had Been the Victims of Violence or Witnessed Violence in Their Neighborhood, by Disability Status and Age Group —National Health Interview Survey, United States, 2022

MMWR Weekly Briefing Podcast: Week of December 11, 2023



[Click here to subscribe to *MMWR*](#)

From: [Davis, Lisa \(CDC/IOD/ORR/DSLR\)](#)
Bcc: [Pan, Erica S@CDPH](#)
Subject: Partner Alert: Brief Updates from CDC's Emergency Response Activities and Other Information for Your Situational Awareness
Date: Friday, January 26, 2024 12:59:09 PM

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Greetings Partners,

The following are updates from CDC's public health emergency responses, as well as additional content for your situational awareness.

If you wish to unsubscribe from this listserv, please email a request to the STLT Communications Team at eocevent411@cdc.gov and copy your health department liaison officer.

Respiratory Virus Updates

- COCA Now: Reminder of Recommendations for Seasonal Administration of Maternal RSV Vaccine – On January 26, CDC and the Advisory Committee on Immunization Practices reminded healthcare providers about the seasonal administration of the RSV Vaccine (Pfizer Abrysvo) for pregnant people during 32–36 weeks gestation, while emphasizing administration should be by January 31 for most pregnant people.
 - Additional information will be posted on [COCA Now Messages | CDC Emergency Preparedness & Response](#)
- [CDC Respiratory Virus Updates | CDC](#) – On January 22, a new blog was posted on CDC's activities to track the spread of influenza viruses including which influenza viruses are most common, where they are occurring, and how this might impact the public's health. CDC also provided an update on JN.1, which remains the most widely circulating variant of SARS-CoV-2 in the United States and globally.
- [COCA Now: January 22, 2024: Information on Respiratory Syncytial Virus \(RSV\) Vaccine Administration Errors in Young Children and Pregnant People](#) – On January 22, CDC posted a new CDC Clinician Outreach and Communication Activity (COCA) Now recommending strategies to reduce RSV vaccine administration errors in young children and pregnant people.
- [Readout of HHS Meeting with Health Care Providers on COVID-19 Therapeutics Commercialization | HHS.gov](#) – On January 22, the Health and Human (HHS) and Pfizer met with healthcare provider associations and groups to discuss the transition of oral antivirals for COVID-19, including Paxlovid, to the commercial market. Emphasis was placed on the importance of provider education and clear communication to consumers, and to remind providers that no patient should be forced to pay the full out-of-pocket cost to access Paxlovid, regardless of their insurance status.
- [Respiratory Virus Data Channel Weekly Snapshot \(cdc.gov\)](#) – New content was posted on January 19 where the amount of respiratory illness (fever plus cough or sore throat) causing people to seek healthcare was elevated or increasing across most areas of the country. In the

past week, 25 jurisdictions experienced high or very high activity.

Applesauce Lead Poisoning Outbreak Updates

- [Investigation of Elevated Lead & Chromium Levels: Cinnamon Applesauce Pouches \(November 2023\) | FDA](#) – On January 24, the United States Food and Drug Administration (FDA) announced there was no indication that the elevated lead and chromium levels in applesauce pouches extended beyond the recalled products. The FDA does not have any confirmed reports of illnesses or elevated blood lead level adverse events reported for other cinnamon-containing products or cinnamon.

Other Updates

- [Vaccines and Treatment for Monkeypox | SNS | HHS/ASPR](#) – ASPR’s Strategic National Stockpile (SNS), in coordination with CDC, deployed vaccines and treatments to several jurisdictions affected by mpox. The expiration dates of these products are posted on this webpage, which will be updated as extensions are granted by FDA.
- [Stay Alert for Measles Cases](#) – On January 25, CDC released a COCA Now regarding recent cases of measles in the United States and recommendations for healthcare providers should they suspect a patient has measles.

Upcoming Meetings

- There will be a replay of last week’s All-STLT Update Call at 3 pm ET on January 30. Hear SMEs share updates on CDC’s emergency response-related activities. Also, hear the answers CDC provides to questions raised by public health professionals across the country regarding the topics presented during the call.
 - **Link:** <https://cdc.zoomgov.com/j/1610167208?pwd=Y1h2QWp5SFJDZlhnU2NoeDZrT21JUT09>
 - Passcode: =015GRNP
- [CDC and CMS Present Stories from the Field: Immunization Strategies for Long-term Care | qioprogram.org](#) – Join CDC and the Centers for Medicare & Medicaid Services (CMS) at 2 pm ET on Wednesday, January 31, to hear directly from nursing home teams that have developed successful strategies to overcome COVID-19 vaccine hesitancy and fatigue, schedule onsite vaccination clinics and address staff turnover to ensure residents receive timely vaccinations.
 - **Register** at [Webinar Registration - Zoom](#)
- [Clinician Outreach and Communication Activity \(COCA\) Webinar: Diagnostic Testing and Treatment Guidelines for COVID-19 and Influenza \(cdc.gov\)](#) – At 2 pm ET on February 1, CDC subject matter experts will present an overview of COVID-19 and influenza therapeutic options, including eligibility, indications, and efficacy.
 - **Link:** <https://www.zoomgov.com/j/1613771800?pwd=ZzIFWU9lbkZORFg4M21iaTlUTDd2dz09>
- ASPR Partner Update Webinar – At 2 pm ET on Tuesday, February 13, ASPR will discuss its 2024 organizational priorities and current activities to support preparedness and response capabilities for public health and health systems.
 - **Register** at [ASPR Partner Update](#)

MMWR Publications

- [Underuse of Antiviral Drugs to Prevent Progression to Severe COVID-19 — Veterans Health Administration, March–September 2022 | MMWR \(cdc.gov\)](#) – A review of 110

immunosuppressed patients with non-severe COVID-19 at risk for progression who did not receive an antiviral drug found that 80% were not offered such treatment. For nearly one half of these, the only reason given for not offering antiviral treatment was mild symptoms. Other reasons included symptom duration less than 5 days (22.7%), lack of symptoms (22.7%), and concern about drug interactions (5.7%). One fifth of the 110 patients were offered treatment but declined.

Many thanks for your continued partnership.

Sincerely,

Lisa B. Davis
Health Department Liaison Officer, HHS Region 9
Jurisdictional Readiness and Response Support Branch
Division of State and Local Readiness
Office of Readiness and Response

Centers for Disease Control and Prevention (CDC)

1600 Clifton Road, NE, MS H21-5, Atlanta, GA 30329
404-734-4810 Office | 404-734-4810 Cell

lbd2@cdc.gov

OVERVIEW OF REPORTING REQUIREMENTS

REPORTING REQUIREMENTS FOR PREVENTION & PERFORMANCE MEASURES

REPORT	WHEN TO SUBMIT
<ul style="list-style-type: none"> Recipient Evaluation and Performance Measurement Plan** Recipient Data Management Plan (DMP)** 	6 months into the Cooperative Agreement (CoAg)
<ul style="list-style-type: none"> Data on Performance Measures 	Annual/Semi-annual reporting beginning in Year 2 of the Cooperative agreement*
<ul style="list-style-type: none"> Targeted Evaluation Project (TEP) 	Year 4 of the Cooperative Agreement
<ul style="list-style-type: none"> Evaluation Translational Product 	Final year of Cooperative Agreement (CoAg)
<ul style="list-style-type: none"> Annual Performance Report (APR), Workplan, Budget** 	No later than 120 days before the end of the budget period. Serves as a yearly continuation application.
<ul style="list-style-type: none"> Federal Financial Reporting Forms Final Performance and Financial Report 	90 days after the Period of Performance (PoP) ends

*Specific performance measures for required activities, such as naloxone distribution and linkage to care, will be prioritized for semi-annual reporting to inform CDC about these critical efforts in reducing overdose deaths. CDC will confirm the frequency of all performance measure reporting based on reporting needs and the feasibility of reporting more frequently than annually.

**Please see the table below for the due date for these deliverables.

REPORTING REQUIREMENTS FOR MORBIDITY AND MORTALITY SURVEILLANCE

As part of the OD2A-S funding opportunity, recipients are required to regularly share with CDC data collected on emergency department (ED) visits and hospital admissions involving suspected nonfatal drug overdose for the Drug Overdose Surveillance and Epidemiology (DOSE) system and drug overdose deaths using the State Unintentional Drug Overdose Reporting System (SUDORS).

- DOSE REPORTING:** Recipients are required to submit DOSE data to CDC either monthly (syndromic-sharing only) or annually (hospital/billing data-sharing only).

Note: For the first year of reporting, recipients must submit Historic data for syndromic (January 2018 - December 2023) and hospital/billing (January 2018 - December 2022). Please see below Year 1 Milestones and Reporting Timeline for specifics.

- SUDORS REPORTING:** As part of the OD2A-S funding opportunity, recipients are required to regularly share with CDC data collected on confirmed unintentional and undetermined intent drug overdose (UUDO) deaths using the State Unintentional Drug Overdose Reporting System (SUDORS). Recipients must share case-level de-identified data from all required data sources with CDC using the SUDORS web-based data entry system.

Note: For the first year of reporting, recipients must complete abstraction for UUDO deaths occurring January-June by January of the following calendar year and must complete abstraction for UUDO deaths occurring during July-December by July of the following calendar year. In years 2-5, recipients must complete data abstraction on UUDO deaths occurring during January-June by December of the same calendar year and complete data abstraction on UUDO deaths occurring July - December by June of the following calendar year.

- BIOSURVEILLANCE:** Biosurveillance data submissions do not have specific "dates." The data submission will be ongoing throughout the year and will have access to the latest available data at any point. Contact Biosurveillance functional mailbox (OD_LAB_SURVEILLANCE@cdc.gov) for additional questions.
- DATA LINKAGE:** Recipients will submit the required aggregate indicators and metadata to CDC on an annual basis, during Annual Progress Report (APR) reporting timelines.

YEAR 1 MILESTONES AND REPORTING TIMELINE

MONTH	MILESTONE
SEPTEMBER 2023	
September 1, 2023	✓ Welcome to OD2A-S
September 7, 2023	✓ Kickoff Webinar (2:30pm – 4:00pm EST)
September 11 – 29, 2023	✓ Introductory Calls <i>CDC POs and EOs with Recipient Pls/PMs</i>
September 25, 2023	✓ Partner’s Portal Training Session
OCTOBER 2023	
October 2, 2023	✓ Revised Budgets Due
October 27, 2023	✓ Response to Technical Review Comments Due ✓ Revised Work Plan Entered into Partner’s Portal Due
NOVEMBER 2023	
November 2, 2023	✓ Evaluation Webinar
DECEMBER 2023	
December 1, 2023	✓ Final FFRs and FPRs Due <i>(For OD2A 1.0 Recipients)</i> <i>FPRs submitted in both Partner’s Portal and Grant Solutions</i>
December 7, 2023	✓ OD2A-S Revised Work Plans are Due in Partner’s Portal
JANUARY 2024	
January 4, 2024	✓ Continuation Guidance Released
January 5, 2024	✓ APRs are Generated in Partner’s Portal
January 26, 2024	SUDORS bi-annual data reporting deadline (Required CDC Reporting) <i>For recipients who previously received OD2A funding for SUDORS (CDC-RFA-CE16- 1608)</i> <i>Drug overdose deaths occurring during January 1, 2023 – June 30, 2023, submitted to CDC</i>
FEBRUARY 2024	
February 29, 2024	<ul style="list-style-type: none"> • OD2A-S Year 2 Continuation Application Due • Data Linkage indicators will be reported in the APR • Data Management Plan Due
MARCH 2024	
March 11, 2024	DOSE Discharge/Billing <u>Historic</u> Data Due <i>For data from January 1, 2018 – December 31, 2022</i>
March 16, 2024	Draft Evaluation and Performance Measurement Plan (EPMP) Due

APRIL 2024	
April 1, 2024	<p>DOSE Historic Submission Due <i>(For recipients who received funding from CE16-1608)</i> For data from January 2018 – December 2023</p> <p>Two DOSE Monthly Submissions are DUE:</p> <ol style="list-style-type: none"> For data from January 1 - 31, 2024 For data from February 1 - 29, 2024. <p>Note: A total of 3 mutually exclusive files will be submitted.</p>
April 26, 2024	Technical and Budget Reviews Due
MAY 2024	
May 6, 2024	<p>DOSE Monthly Submission Due <i>(For recipients who received funding from CE16-1608)</i> For data from March 1 – 31, 2024</p>
May 6 – 8, 2024	OD2A Recipient Meeting in Atlanta, GA
JUNE 2024	
June 3, 2024	<p>DOSE Monthly Submission Due <i>(For recipients who received funding from CE16-1608)</i> For data from April 1 – 30, 2024</p>
JULY 2024	
July 1, 2024	<p>DOSE Monthly Submission Due <i>(For recipients who received funding from CE16-1608)</i> For data from May 1 – 31, 2024</p>
July 8, 2024	<p>Discharge/Billing Data (Optional Surveillance Strategy) Due For recipients selecting annual ED hospital discharge/billing data submission and optional annual DOSE ED/inpatient hospital/billing data submission activities</p>
July 26, 2024	<p>SUDORS (Required CDC Reporting) For recipients who previously received OD2A funding for SUDORS (CDC-RFA-CE16- 1608) Drug overdose deaths occurring during July 1, 2023 – December 31, 2023, submitted to CDC</p>
July 31, 2024	Final Evaluation and Performance Measurement Plan (EPMP) Due
AUGUST 2024	
TBD	Year 2 NOA Released
August 5, 2024	<p>DOSE Monthly Submission Due <i>(For recipients who received funding from CE16-1608)</i> For data from June 1 – 30, 2024</p>
August 31, 2024	<ul style="list-style-type: none"> • Last Day of Budget Period • Year 1 Partner’s Portal Modules Close • Data Dissemination Plan, Work Plan (Final) due in Partner’s Portal
SEPTEMBER 2024	
September 1, 2024	Year 2 Funding Period Begins

*If the report due date falls on a holiday, program staff will issue instructions for reporting due date adjustments.