



SENATE FINANCE COMMITTEE
Senate Bill 741
COVID-19 Testing, Contact Tracing, and Vaccination Act of 2021
February 24, 2021
Information

Chair Kelley, Vice Chair Feldman and committee members, thank you for the opportunity to share our thoughts on Senate Bill 741. The bill requires the Maryland Department of Health, in collaboration with local health departments of the State, to adopt and implement a plan to respond to the outbreak of COVID-19. It also requires institutions of higher education in the state to adopt and implement COVID-19 testing plans.

When the pandemic first “hit” in the spring of 2020, the University System of Maryland (USM) campuses made a rapid pivot to remote teaching and learning for the remainder of the semester. Then as plans were being developed for the Fall 2020 term, each campus considered responses and decisions that would put the safety of students, staff and faculty first. These decisions included reduced density in campus housing, having those classes in which face to face teaching was critical remain in that format, but continue the hybrid or on-line approach for as many courses as possible.

Another critical part of keeping the campuses safe was the development of testing and tracing programs, with the capability of quarantine and isolation of students as required. These plans required close collaboration with the local health departments and the preparation of living spaces for isolation when necessary. We learned many lessons during the fall semester, that we will outline here along with some of the summary results. The plans, results and proposed plans for spring 2021 can be found at <https://www.usmd.edu/spring2021> Also included is a dashboard for each campus that was updated on a regular basis.

We learned that testing on arrival is important, as it set the stage for starting the term knowing that those on campus had tested negative. Then schedules were developed to perform surveillance testing using PCR across the semester that allowed us in general to keep positivity rates at levels significantly lower than surrounding communities. Some rapid antigen tests were also performed in accordance with specific programs, such as athletic programs run under the auspices of the conferences or NCAA. Of the more than 150,000 tests performed almost all were PCR tests with samples sent to the lab at University of Maryland, Baltimore (UMB) which routinely returned results to the campuses within 24-36 hours, with only a few situational exceptions. The surveillance testing allowed us to identify outbreaks and take appropriate actions, which included appropriate isolation procedures for our residential students. The

surveillance testing plans were customized according to the nature of the populations on campus and in consultation with local public health departments. The positivity rates were routinely well below the positivity rates for the surrounding communities and were usually at a less than 1% or 1.5% on the campuses, with a very few exceptions. A spike in positivity led campuses to employ a variety of strategies to reverse positivity rates. These included: additional public health communications to their campus communities, increased testing and/or frequency of testing, brief increases in remote learning, and collaboration with local government and public health officials to reinforce compliance with masking and social distancing requirements.

For Spring term of 2021, detailed plans are currently being submitted. Plans will include descriptions of much more aggressive testing regimens to address the significantly higher background positivity rates in the community. Most campuses will modify their testing strategies to twice weekly testing of a substantial portion of those coming on campus using the BionaxNOW Rapid Antigen Test. The first 130,000 of these tests were provided by the Maryland Department of Health and will suffice testing needs for 2-4 weeks into the semester, with campuses ordering from Abbott to serve the remainder of the semester. The USM has signed an agreement with Abbott so that our campuses can be assured of the ability to order and obtain more tests as needed on the campuses. In addition, most campuses are also using PCR surveillance testing of specific groups, and PCR is currently being used to confirm rapid antigen positive test results. Rapid antigen tests are being used for people as they arrive on campus for intermittent work on the campus. Frequent rapid antigen tests will be used in specific populations or groups that would be at higher risk of transmission, including athletic teams and performing arts groups. Also, for example, if a residential student tests positive, then a “go team” can go directly to that dorm and test all of the exposed residents with the rapid antigen test and in minutes know what other students or staff may be infected.

In the aggregate, the USM institutions are performing nearly 30,000 tests per week during the spring semester. In addition to the aggressive testing programs, our campuses, in collaboration with the local health departments, have trained professionals on the campus to initiate and support the contact tracing procedures of the health departments. We believe these procedures, in the aggregate will continue to maintain our campuses as some of the safest places to live and work in the state. The USM also participates in the COVID 19 Task Force set up by MHEC and we have continued to cooperate closely with the Maryland Department of Health as well as MHEC in sharing our practices with the other segments of higher education in the state.

The USM has been collaborating with scientists from Harvard, Wisconsin, California and North Carolina to share experiences and determine ways to adapt to the changing environmental situations. The use of a combination of the more sensitive PCR tests and the quickly obtained results of the rapid antigen tests will provide a clearer picture of the presence of virus on a campus and permit quick and comprehensive response to limit the spread of the virus on the campus and in the community.

As the nation makes the turn to vaccination protocols, our campuses have been very active. UMB, along with their partner the University of Maryland Medical System, have established vaccination sites on the UMB campus, stood up the mass vaccination site at the Baltimore Convention Center and will be a major partner in the M & T Bank Stadium mass vaccination site. Our medical professions students are working in a variety of capacities at the vaccination sites, carefully trained and supervised so that we are following all accreditation and certification regulations. We are also working with the state to establish a core of student volunteers to assist at these sites in many of the nonmedical capacities required to make the sites run smoothly. We will do all that we can to support the rapid vaccination of as many in the population as possible, as we look forward to the possibility of starting the fall semester in a much more “normal” capacity.