

## COVID-19 Response Team Updates

Highlights from today's [press briefing](#) include:

- Vaccine supply, distribution and administration updates
- Allocation of vaccine to states, tribes and territories increased from 11 million last week to 13.5 million this week
- The Administration is on track to have enough vaccine supply for 300 million Americans by the end of July
- Deployment of over 700 federal personnel and 1,200 National Guard members as vaccinators
- Expanded financial support to bolster community vaccination centers nationwide—over \$3 billion in federal funding over 40 states, tribes and territories
- 7 day average daily doses administered is now 1.7 million av daily shots/day up from 1.1 mill only 4 weeks ago
- Variants
- Variants could jeopardize progress we have made in the last month if we don't remain vigilant and continue to apply the same preventive measures (washing hands, wear a mask, social distance, get vaccine when available to you). Find variant update information [here](#).
- Mask Update
- For reasons supported by science, comfort, cost, and practicality, CDC does not recommend routine use of N95 respirators for protection against COVID-19 by the general public.
- Masks now available to the general public are effective and are working. CDC continues to recommend masks with two or more layers that fit snugly over nose and face.
- Breakthrough Infection Information: If a person gets infected despite the fact that they have been vaccinated, we refer to that as a "breakthrough infection," does that person have the capability of transmitting the infection to another person? Does vaccine prevent transmission? Is there a relationship between viral load and transmissibility?
- Study came out from Spain that showed that there was a direct correlation with viral load and efficiency of transmission. Similar to HIV – the higher viral load, higher transmissibility and the lower viral load, lower transmissibility
- Another study came out from Israel that showed there was a markable diminished viral load in those who were vaccinated but had a breakthrough infection compared to individuals who were not vaccinated. Israel has done a ton of vaccinations and remarkable diminution in cases. This is another example of data pointing to the fact that vaccine is important for health of individual in protecting from COVID-19 and variants, but also vaccines interfere and diminish dynamics of outbreaks.
- When your turn to get vaccinated comes up, get vaccinated—not just good for you, but good for others

- Equity Update
  - Robust efforts have been developed in three key areas: vaccination, treatment, testing
  - Vaccination programs such as community vaccination centers are being executed to ensure we reach the hardest hit communities
  - Equity in COVID-19 treatment options: working closely with FDA to discuss promise and potential of 3 antibody therapies authorized for Emergency Use
  - 25 locations currently participating in the Administration’s rollout of the 3 authorized antibody therapy treatments include 32% of the American population and include significant racial and ethnic diversity
- Testing Update
  - Federal Government will invest \$1.6 billion in three key areas (see more detailed information below in Testing section):
    - Supporting testing in schools and underserved populations
    - Increasing genomic sequencing
    - Manufacturing critical testing supplies

### **Vaccine Updates**

**Vaccination Progress Report:** The 7-day daily average of [1.7 million doses administered](#) compares to an average of 892,000 the week before President Biden took office. That’s almost double in just four weeks.

**Understanding Viral Vector COVID-19 Vaccines:** [Viral vector vaccines](#) are a type of vaccine likely to be among the COVID-19 vaccines authorized for use in the United States. Viral vector vaccines use a modified version of a different virus (the vector) to deliver important instructions to our cells. For COVID-19 viral vector vaccines, the vector (not the virus that causes COVID-19, but a different, harmless virus) will enter a cell in our body and then use the cell’s machinery to produce a harmless piece of the virus that causes COVID-19. This piece is known as a spike protein and it is only found on the surface of the virus that causes COVID-19.

**How COVID-19 Vaccines Get to You:** Vaccine manufacturers, the federal government, state, local, and territorial jurisdictions, and other partners are working to make [sure safe and effective vaccines are getting to you as quickly as possible](#). This page will help you understand the key steps in this important process and how CDC is tracking vaccine distribution, delivery, and administration throughout the United States.

**COVID-19 Vaccine FAQs:** CDC updated their answers to [commonly asked questions about COVID-19 vaccination](#). Get answers to frequently asked questions such as common side effects, when the vaccine will be available, and more.

**COVID-19 Vaccination for People Experiencing Homelessness FAQs:** CDC updated the [frequently asked questions about COVID-19 vaccination among people experiencing homelessness](#). These recent changes include: updated information about when COVID-19 vaccine will be available for people experiencing homelessness, updated information about the continued use of COVID-19 protection measures, and additional questions about communication strategies, vaccination appointments, data and documentation, and hepatitis A vaccine coadministration.

**Vaccine Considerations for People with Disabilities:** This webpage provides information for [people with disabilities or conditions that may increase their risk of getting and spreading COVID-19](#), and for their care providers. Vaccines are now available to help protect you from getting COVID-19. Disability alone does not put you at higher risk for getting COVID-19. You may be at higher risk because of where you live, such as a long-term care home. You may be at risk because you need to have close contact with care providers. You may also be at risk because you have difficulty wearing a mask, staying at least 6 feet away from other people, or washing your hands.

**FAQs on Funding Related to Immunization and Vaccines for Children Program COVID Cycle 3:** CDC updated their frequently asked questions on [immunization and vaccines for children program COVID cycle 3 supplemental funding](#).

### **Testing and Treatment**

**New Actions to Expand and Improve COVID-19 Testing:** As part of his National Strategy for the COVID-19 Response and Pandemic Preparedness, President Biden announced today a series of new actions [to expand COVID-19 testing](#). These actions include: [Expanding COVID-19 testing for schools and underserved populations](#) where HHS in partnership with DOD will make a \$650 million investment to expand testing opportunities for K-8 schools and underserved congregate settings, such as homeless shelters; [Increasing domestic manufacturing of testing supplies](#) by investing \$815 million to increase domestic manufacturing of testing supplies and raw materials that have created shortage issues, including filter pipette tips, nitrocellulose used in antigen point-of-care tests, and specific injected molded plastics needed to house testing reagents; and [Rapidly increasing virus genome sequencing](#) with CDC investing nearly \$200 million to identify, track, and mitigate emerging strains of SARS-CoV-2 through genome sequencing.

**NIH Funds Study to Evaluate Remdesivir for COVID-19 in Pregnancy:** A new study funded by the National Institutes of Health will evaluate [the effects of remdesivir in pregnant women](#) who have been prescribed the drug to treat COVID-19. The study, which will be conducted at 17 sites in the continental United States and Puerto Rico, aims to determine how pregnant women metabolize the drug and whether there are any potential side effects.

**Warning to Fraudulent Companies:** As part of the FDA's effort to protect consumers, the agency issued a warning letter to [Evolved Ayurvedic Discoveries, Inc./BioCBDPlus](#) for selling unapproved products, including unapproved products with fraudulent COVID-19 claims. The company sells cannabidiol (CBD) products, including "BioCBD+ Total Body Care," "BioCBD+ Topical Oil Muscle & Joint Support," and "BioCBD+ Peace Vape," and misleadingly represents the products can mitigate, prevent, treat, diagnose or cure COVID-19 in people. Consumers concerned about COVID-19 should consult with their health care provider.

**Testing Update:** As of today, 331 tests and sample collection devices are authorized by the FDA under emergency use authorizations (EUAs). These include 247 molecular tests and sample collection devices, 70 antibody tests and 14 antigen tests. There are 37 molecular authorizations that can be used with home-collected samples. There is one molecular prescription at-home test, one antigen prescription at-home test and one over-the-counter (OTC) at-home antigen test.

### **Variant Information**

**Global Variants Report:** CDC updated their page on [reports of global variant](#), which shows which countries have reported variants of SARS-CoV-2. CDC works with partners around the world to respond to the pandemic. As part of these efforts, CDC is working to expand the capacity to detect and respond to newly identified variants of the virus that causes COVID-19.

### **Information for Specific Populations**

**COVID-19 Resources for Substance Use Disorder:** CDC updated their list of [COVID-19 resources of organizations working with persons who use drugs or have substance use disorder](#). These resources include syringe services programs, FAQs, and much more.

**Protect Yourself While Using Transportation:** CDC updated their resources on [how to protect yourself while using transportation](#). These changes include: re-ordering of prevention measures under each section, added guidance about eating in public transportation situations, updated guidance about proper mask use, and other small changes for guidance consistency.

**Older Adults:** [Older adults](#) are at greater risk of requiring hospitalization or dying if they are diagnosed with COVID-19. As you get older, your risk of being hospitalized for COVID-19 increases.

**Global Clinical Mitigation:** [Clinical mitigation](#) encompasses strategies to ensure adequate provision of care for mildly to moderately ill COVID-19 patients, and delivery of other non-COVID-19 essential health services during the COVID-19 outbreak. Find information on home-based care, telehealth, and more.

**Large and Small Gatherings:** CDC updated their pages on [large gatherings](#) and [small gatherings](#). Gathering virtually or with the people you live with is the safest choice. If you do gather with people who don't live with you, gatherings and activities held outdoors are safer than indoor gatherings. The more steps you can take, the safer you will be at the gathering. No one measure is enough to prevent the spread of COVID-19.

### **Research**

**First Identified Cases for SARS-CoV-2 Variant B.1.1.7 in Minnesota:** CDC released a MMWR on the [first identified cases of SARS-CoV-2 variant B.1.1.7 in Minnesota from December 2020 to January 2021](#). The SARS-CoV-2 variant B.1.1.7 was identified in eight specimens from Minnesota residents, including six (19%) of the 31 specimens sequenced by MDH-PHL and two specimens sequenced through CDC's national SARS-CoV-2 surveillance system. The eight specimens were collected during December 18, 2020–January 11, 2021, from eight Minnesota residents in five counties in the Minneapolis–St. Paul

metropolitan area. The eight persons from whom the specimens were collected ranged in age from 15 to 41 years. Three persons had a history of international travel during the 14 days before illness onset, including two who traveled to West Africa and one who traveled to the Dominican. Three additional persons traveled to California in the 14 days before illness onset or specimen collection, including one who received a positive test result while in California and isolated there before returning to Minnesota. Five persons reported COVID-19–like symptoms and had illness onset dates during December 16, 2020–January 10, 2021; three were asymptomatic.

**Detection of B.1.351 SARS-CoV-2 Variant Strain:** CDC released and MMWR on the [detection of B.1.351 SARS-CoV-2 variant strain in Zambia](#). Detection of the B.1.351 variant coincided with a rapid rise in confirmed cases in Zambia. This detection establishes an epidemiologic linkage between COVID-19 outbreaks in Zambia and South Africa. Spread of the B.1.351 variant is of public health concern because of the potential for increased transmissibility and, thus, increases in cases, hospitalizations, and deaths. The B.1.351 variant might be associated with higher viral loads and contains another spike protein mutation that might hinder antibody binding, which could blunt naturally developed immunity or reduce vaccine efficacy.

**COVID-19 Case Forecast:** This week’s national ensemble predicts that the number of newly reported [COVID-19 cases](#) will likely decrease over the next 4 weeks, with 206,000 to 699,000 new cases likely reported in the week ending March 13, 2021. The state- and territory-level ensemble forecasts predict that over the next four weeks, the number of new reported cases per week will likely decrease in 41 jurisdictions, which are indicated in the forecast plots below. Trends in numbers of future reported cases are uncertain or predicted to remain stable in the other states and territories. View [previous case forecasts](#).

**COVID-19 Deaths Forecast:** This week’s national ensemble forecast predicts that the number of newly [reported COVID-19 deaths](#) will likely decrease over the next 4 weeks, with 8,400 to 18,500 new deaths likely reported in the week ending March 13, 2021. The national ensemble predicts that a total of 530,000 to 559,000 COVID-19 deaths will be reported by this date. The state- and territory-level ensemble forecasts predict that over the next 4 weeks, the number of newly reported deaths per week will likely decrease in 27 jurisdictions, which are indicated in the forecast plots below. Trends in numbers of future reported deaths are uncertain or predicted to remain stable in the other states and territories. View [previous death forecasts](#).

**Hospitalization Forecasts:** This week’s national ensemble predicts that over the next 4 weeks, the number of daily confirmed [COVID-19 hospital admissions](#) will likely decrease, with 2,300 to 7,300 new confirmed COVID-19 hospital admissions reported on March 15, 2021. The state- and territory-level ensemble forecasts predict that over the next 4 weeks, the number of daily confirmed COVID-19 hospital admissions will likely decrease in 46 jurisdictions, which are indicated in the forecast plots below. Trends in numbers of future reported hospital admissions are uncertain or predicted to remain stable in the other states and territories. View [previous hospitalization forecasts](#).

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