Provider Update

February 15, 2022

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NM DOH Mission

To ensure health equity, we work with our partners to promote health and well-being, and improve health outcomes for all people in New Mexico.

Goals

We expand equitable access to services for all New Mexicans

We ensure safety in New Mexico healthcare environments

We improve health status for all New Mexicans

We support each other by promoting an environment of mutual respect, trust, open communication, and needed resources for staff to serve New Mexicans and to grow and reach their professional goals

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COVID-19 Overview

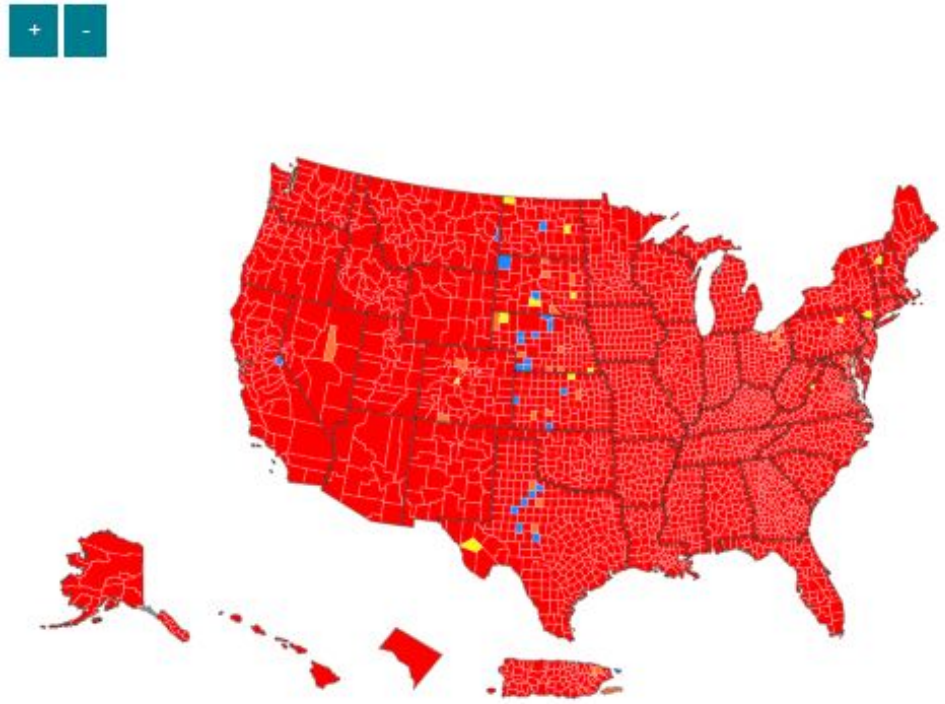
Timeline:

Phases open through 1C2. Friday 3.19.21
Self scheduling for 75+ started 3.29.21
Self scheduling for booster doses started Thursday 4.1.21
All phases opened Monday 4.5.21
Self scheduling for those 60+ started Thursday 4.8.21
Janssen pause 4.12.21
DOH posts event code online - on purpose! For MEGA event 4.16.21
Self scheduling for 40+ starts Monday 4.19.21
Janssen pause lifted 4.23.21
Homebound button implemented 4.23.21
Self Scheduling for 16+ starts Monday 4.26.21
Age categories change on the dashboard 4.30.21 (now tracking 65+)
Vaccine Event Request Form implemented 5.10.21
Pfizer EUA expanded to include children aged 12 – 15. approved by ACIP Wednesday 5.12.21
Pfizer EUA extends vaccine storage from 5 days to 31 days in the refrigerator 5.20.21
NM announces state-wide vaccine lottery Tuesday 6.1.21
100$ Incentive program for completed vaccine series Monday 6.14 – Thursday 6.17
NMAA allows vaccinated student athletes to compete without masks - Friday 6.17
60% fully vax declared Friday 6.18.21; reached 60% on dashboard Wednesday 6.23.21
Texas data added to NMSIIS Tuesday 6.29.21: 22,908 first doses, 12,104 second doses and 1,260 doses of J&J.
Dashboard changes to reporting 18+ and 12 – 17 in separate categories – Thursday 7.8.21
Second round of $100 incentive announced Thursday, 7.29.21 and starts Monday 8.2.21
“Additional Dose” of mRNA vaccine approved for immunocompromised individuals by CDC – Friday 8.13.21
FDA grants full approval to Pfizer – Monday 8.23.21
August Incentive ends 8.31.21; opt in period ends 9.10.21
FDA VRBPAC authorizes Pfizer boosters for 65+ and high risk – Friday 9.17.21
CDC recommends single Pfizer booster at 6 months for certain high-risk populations 9.23.21
Dashboard metric changed from “age at time of vax” to “age now” and federal data added to race/ethnicity metric- 10.8.21
VRBPAC recommends Moderna and J&J boosters 10.14 - 10.15.21
CDC authorizes Moderna, J&J and Mix&Match boosters 10.22.21
FDA authorizes pediatric Pfizer vaccine (for ages 5 – 11) on 10.29.21
ACIP/CDC recommends pediatric Pfizer on 11.2.21
Boosters open to all 18+ in NM Friday 11.12.21
FDA/ACIP approve boosters for all 18+ 11.19.21

Timeline (cont.)

12.8.21	The F.D.A. authorizes AstraZeneca's Evusheld for emergency use
12.9.21	Pfizer boosters approved for 16 - 17 year olds
12.22.21	The F.D.A. authorizes Pfizer's Paxlovid for emergency use
12.23.21	The F.D.A. authorizes Merck's Molnupiravir for emergency use
1.3.22	The F.D.A. authorizes Pfizer vaccine boosters for everyone 12 and older and expanded 3rd dose for immune compromised individuals to include 5 - 11 year olds
1.3.22	The F.D.A changes booster dose time frame for Pfizer to "at least 5 months from primary series completion".
1.7.22	NM DOH recommends halting BAM/ETE and REGEN-COV due to high proportion of Omicron
1.7.22	The F.D.A changes booster dose time frame for Moderna to "at least 5 months from primary series completion".
1.31.22	Moderna's SpikeVax FDA approved
2.4.22	Moderna's SpikeVax endorsed by ACIP and CDC
2.11.22	booster interval for immune compromised people changed to 3 months (and other changes)
2.11.22	Bebtelovimab approved (Eli Lilly) for 12+

COMMUNITY TRANSMISSION ACROSS THE USA



Community Transmission in US by County

	Total	Percent	% Change
High	3162	98.14%	-1.43%
Substantial	25	0.78%	0.68%
Moderate	8	0.25%	0.22%
Low	25	0.78%	0.5%

How is community transmission calculated?

CDC COVID Data Tracker

UNITED STATES LEVEL OF COMMUNITY TRANSMISSION	7 DAY CASE RATE PER 100,000	7 DAY PERCENT POSITIVITY
High	369.8	10.98%

CDC | Data as of: February 13, 2022 12:38 PM ET. Posted: February 13, 2022 2:23 PM ET

02/13/22

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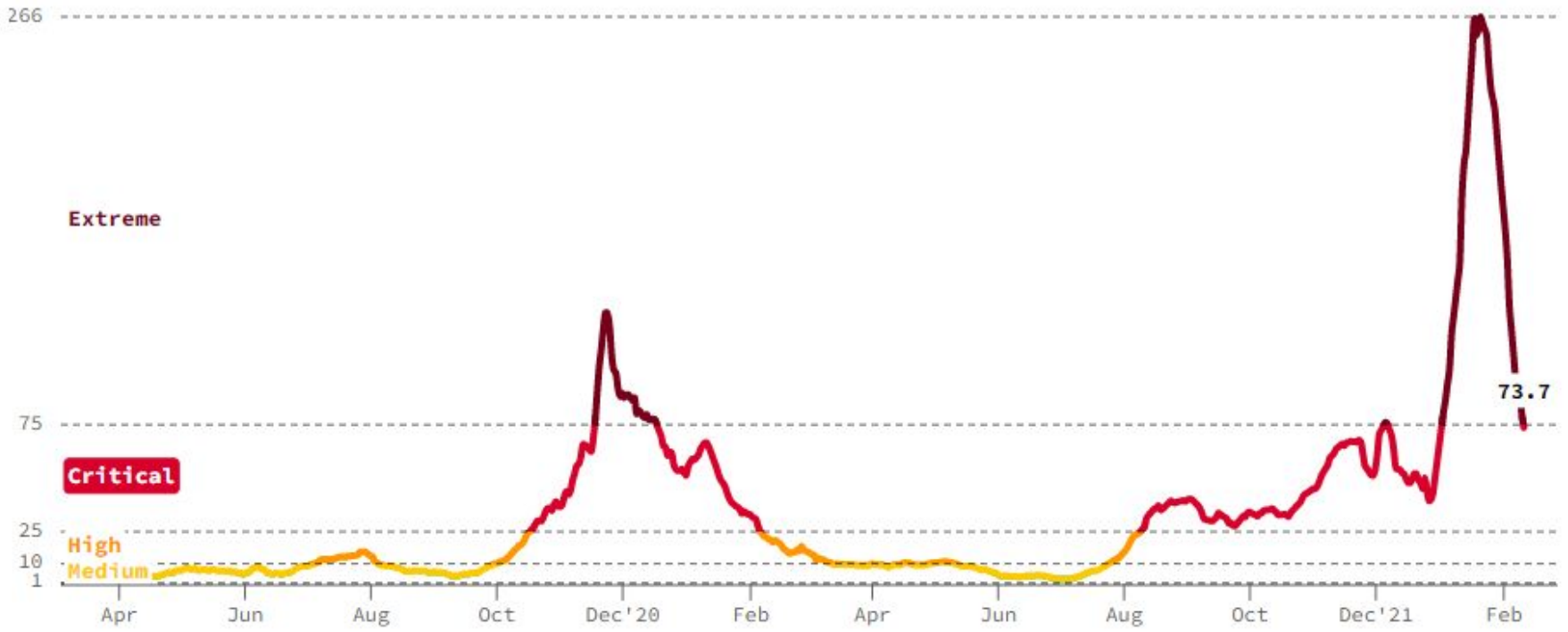
Cases

DAILY NEW CASES	INFECTION RATE	POSITIVE TEST RATE
• 73.7 PER 100K	• 0.65	• 28.5%



Over the last week, New Mexico has averaged 1,545 new confirmed cases per day (**73.7** for every 100,000 residents). About this data

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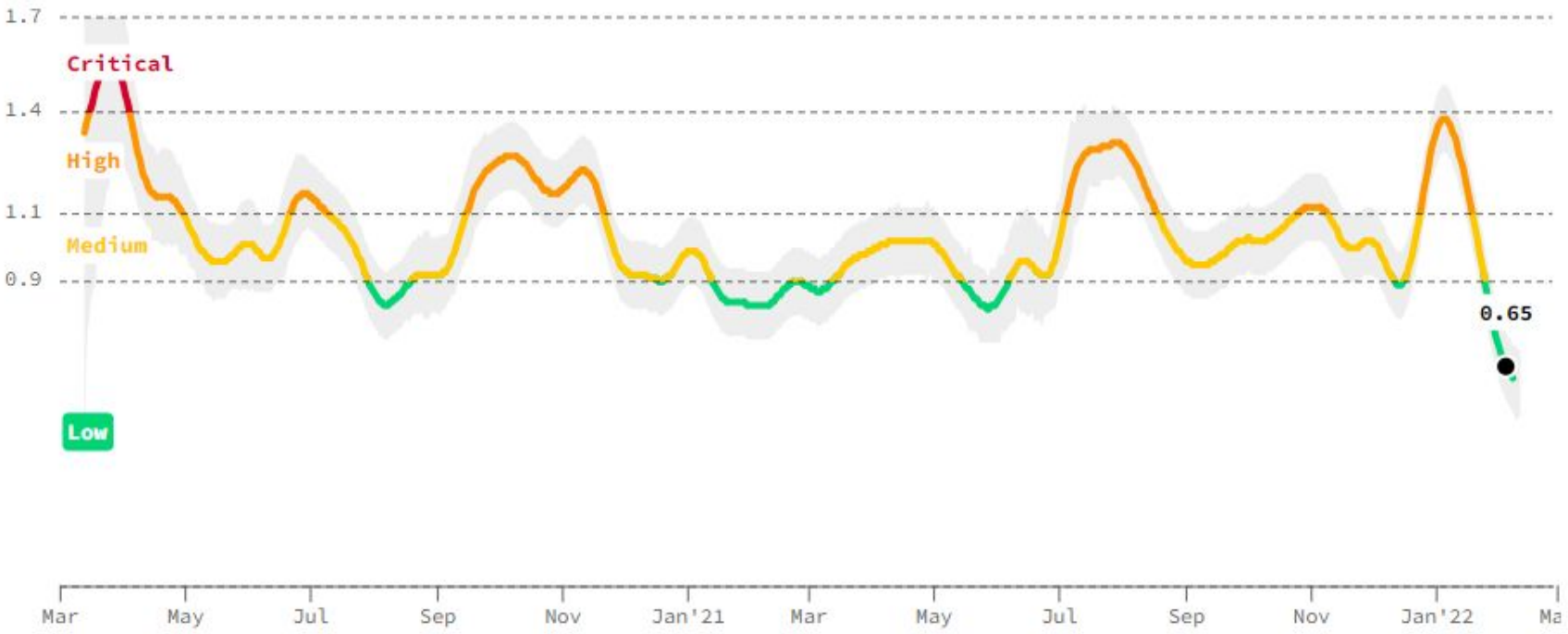
https://www.covidactnow.org/?s=21051026

Cases

DAILY NEW CASES
• 73.7 PER 100K

INFECTION RATE
• 0.65

POSITIVE TEST RATE
• 28.5%



On average, each person in New Mexico with COVID is infecting 0.65 other people. Because each person is infecting fewer than one other person, the total number of current cases in New Mexico is shrinking.

About this data

Share

https://www.covidactnow.org/?s=21051026

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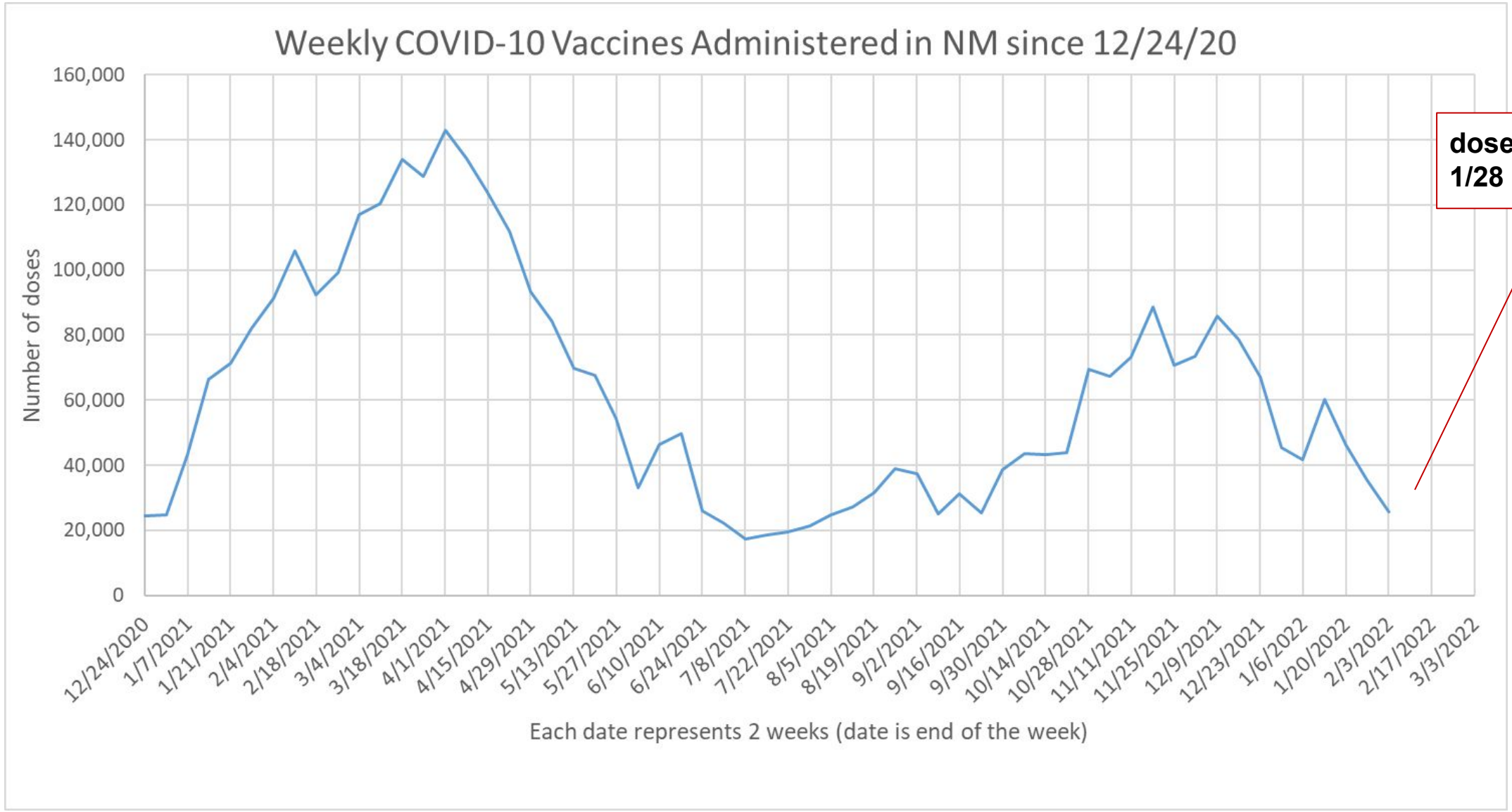

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NMSIIS and Tiberius data

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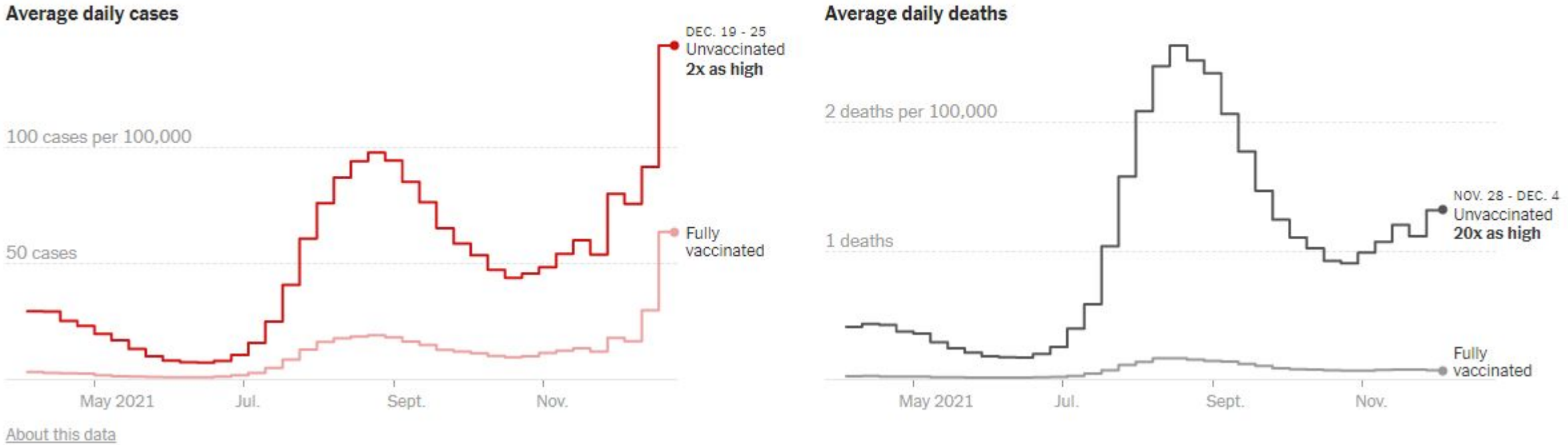
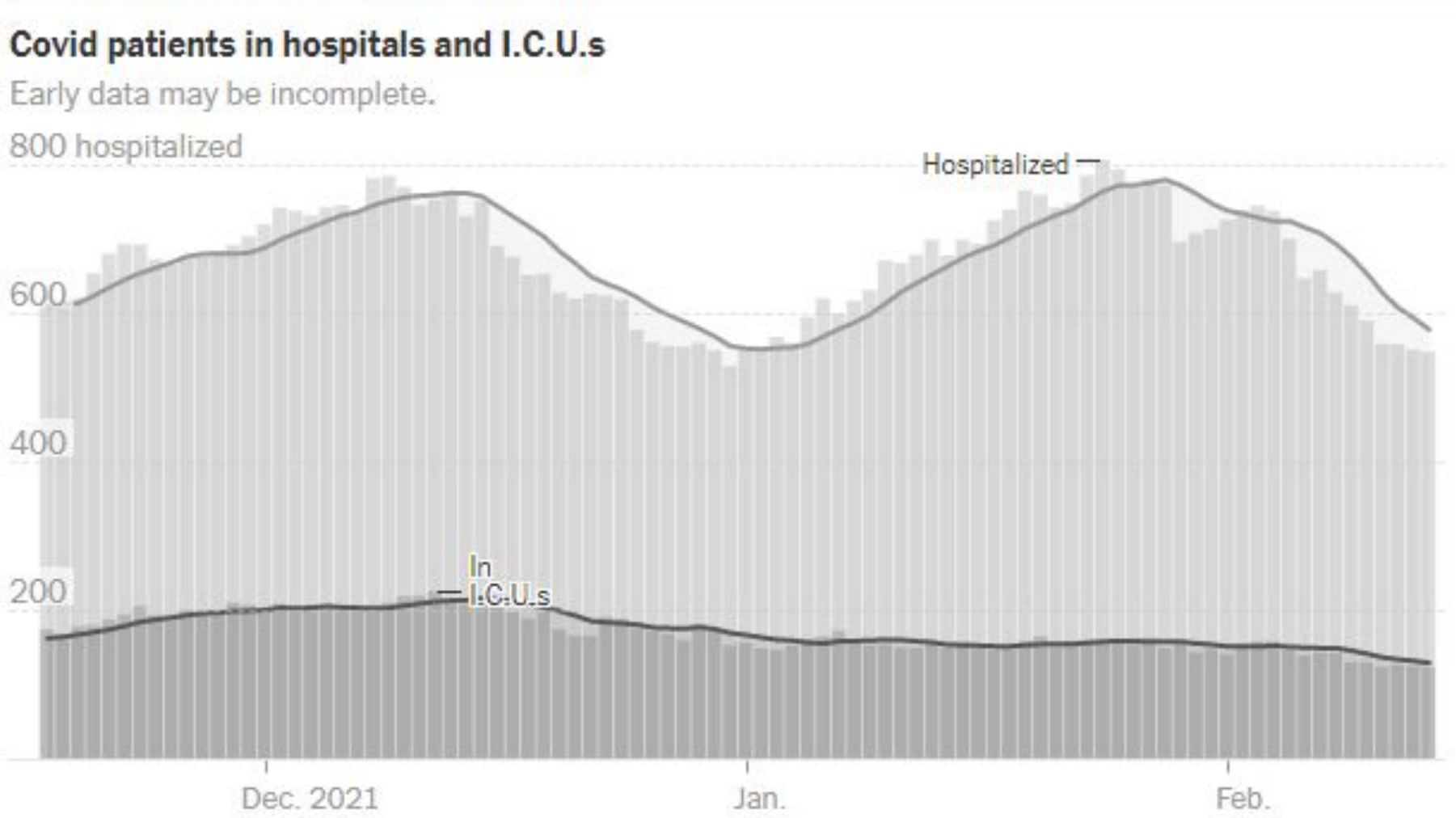
Rates for vaccinated and unvaccinated

Data from the Centers for Disease Control and Prevention shows that people who are unvaccinated are at a much greater risk than those who are fully vaccinated to die from Covid-19. These charts compare age-adjusted average daily case and death rates for vaccinated and unvaccinated people in the 26 states and two cities that provide this data.



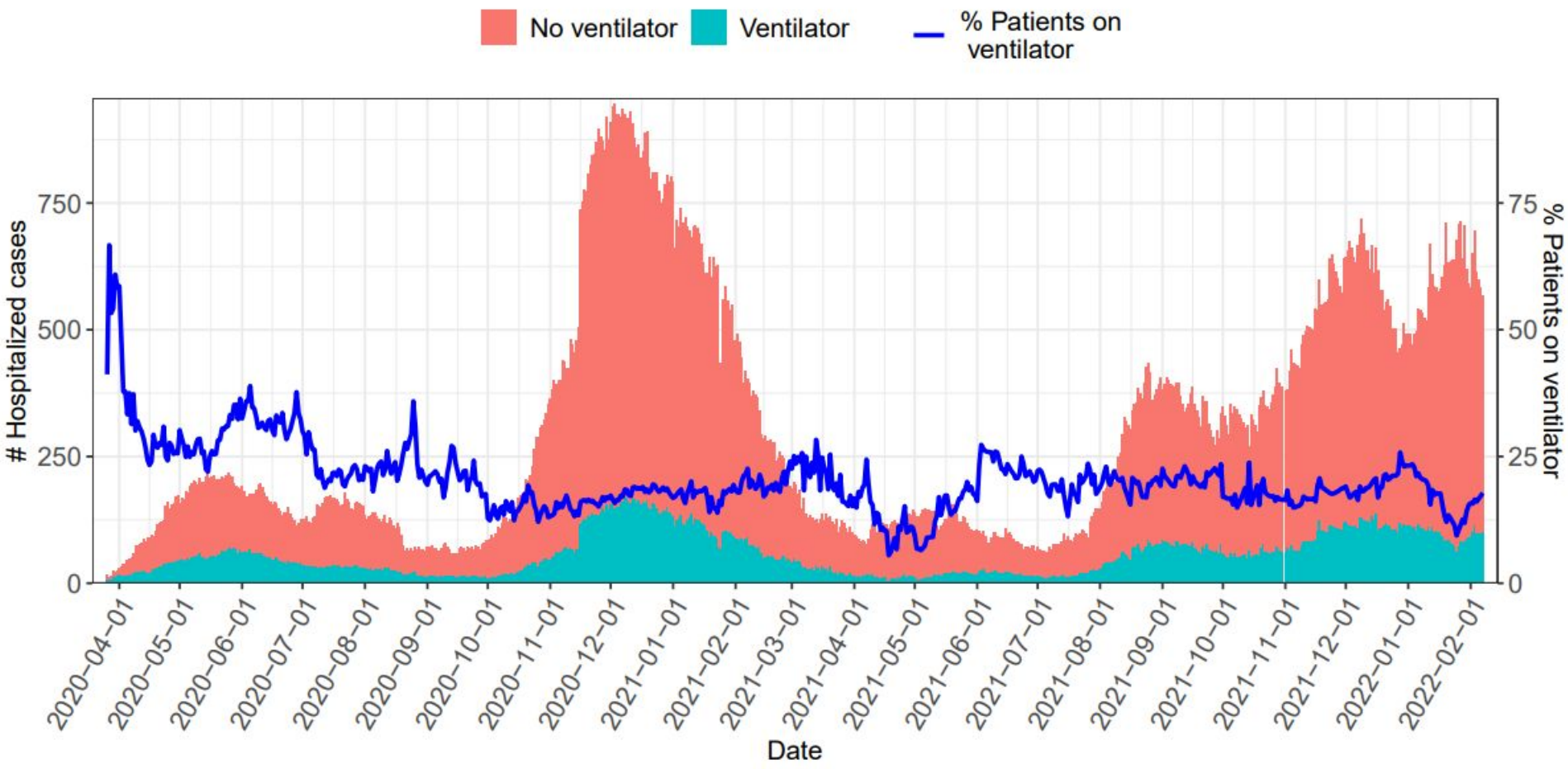
About this data

https://www.nytimes.com/interactive/2021/us/covid-cases.html



https://www.nytimes.com/interactive/2021/us/new-mexico-covid-cases.html

Daily number of reported hospitalized cases and percentage requiring ventilator

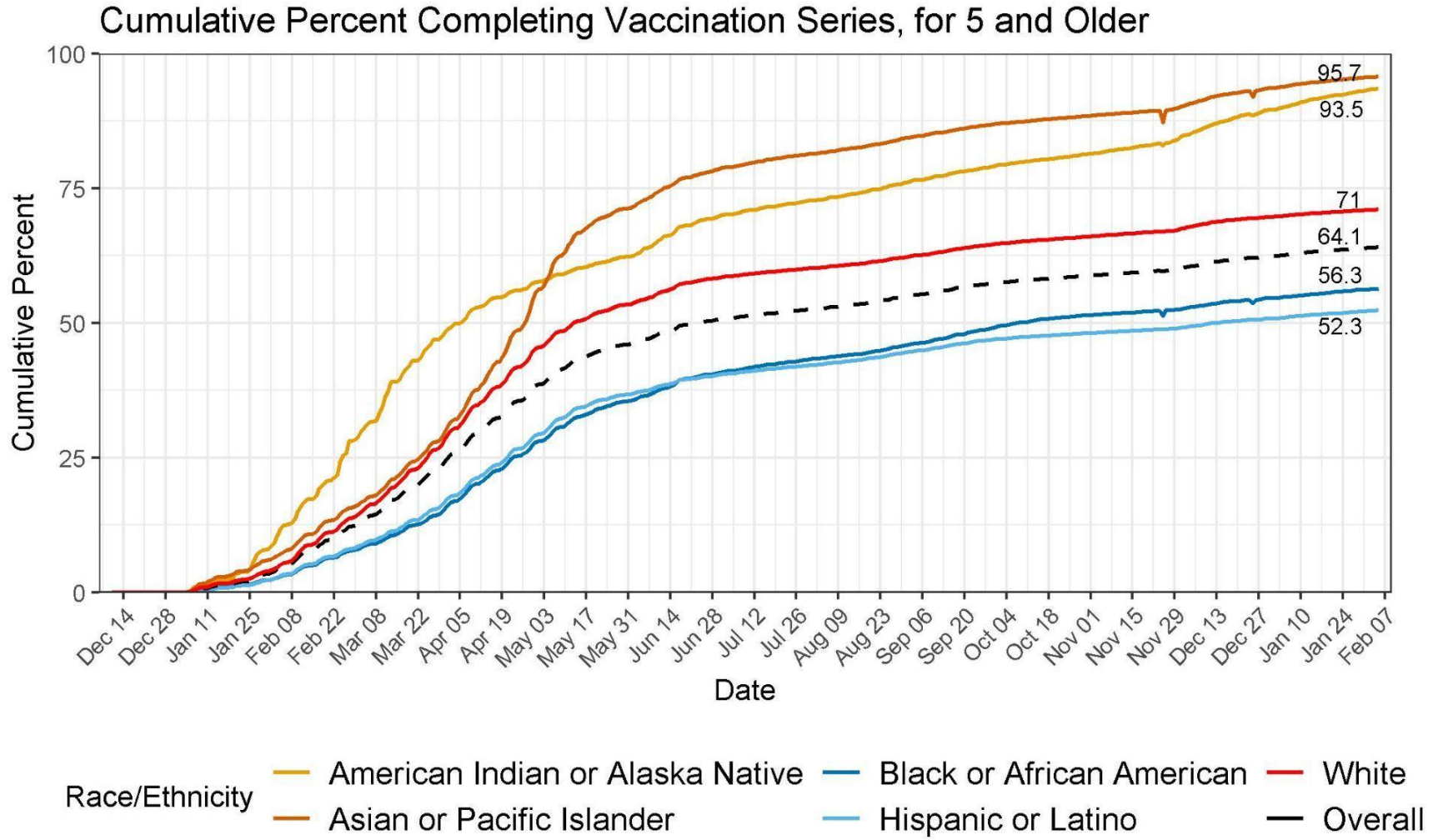


Note: Hospitalization numbers were lower than expected on January 25, 2021 due to several facilities not reporting.

The daily number of hospitalizations includes patients who are ICE detainees. For each day, the number of hospitalized patients is separated into those who are on ventilators (green bars) and those patients who are not on ventilators (red bars). The blue line indicates the percentage of daily hospitalized patients on ventilator each day.

COVID19_hospitalizations_02.07.22.pdf (nmhealth.org)

Continued gap for race/ethnicity for % completing vaccine series for 5 and older



Data are drawn from the New Mexico State Immunization Information System (NMSIIS) and Tiberius and include only residents of New Mexico. Last refresh on 2022-02-07

Vaccine Updates

Vaccine Updates for People who are Immune Compromised

1. Boosters for immune compromised people 12+ following mRNA primary series and 3rd dose can now be given at ***3 months*** after the 3rd dose (shortened from 5 months)
2. For immune compromised people 18+ who got a J&J primary, it is now recommended to get an mRNA 2nd dose at 28 days followed by a booster 2 months after the 2nd dose.
3. For those who already got a booster after J&J → there's a chart for this: Appendix B. Guidance for People who are Moderately or Severely Immunocompromised and Vaccinated with Janssen COVID-19 Vaccine

Vaccine for Immune compromised individuals:

4 Doses Total

mRNA Primary Series

↓ **28 days**

3rd primary dose (additional dose)

↓ **now 3 months**
(was 5 months)

Booster dose

Table 3: COVID-19 vaccination schedule for people with moderate or severe immunocompromise*

Primary vaccination	Age group	Number of primary vaccine doses	Number of booster doses	Interval between 1st and 2nd dose	Interval between 2nd and 3rd dose	Interval between 3rd and 4th dose
Pfizer-BioNTech	5–11 years	3	NA	3 weeks	≥4 weeks	N/A
Pfizer-BioNTech	≥12 years	3	1	3 weeks	≥4 weeks	≥3 months
Moderna	≥18 years	3	1	4 weeks	≥4 weeks	≥3 months
Janssen	≥18 years	1 Janssen, followed by 1 mRNA	1	4 weeks	≥2 months	N/A

Interim Clinical Considerations for Use of COVID-19 Vaccines | CDC

Appendix B. Guidance for People who are Moderately or Severely Immunocompromised and Vaccinated with Janssen COVID-19 Vaccine

COVID-19 Vaccination History	And	Then	Next Dose Due
1 dose	The dose was Janssen COVID-19 Vaccine	Administer a second dose (an additional mRNA vaccine) at least 28 days after the 1st dose. • Pfizer: 0.3mL, or • Moderna 0.5mL	Administer a booster dose at least 2 months after the 2nd dose.* • Pfizer: 0.3mL, or • Moderna 0.25mL, or • Janssen: 0.5mL (mRNA is preferred over Janssen)
2 doses	Both doses are Janssen COVID-19 Vaccine	Administer a third dose (additional mRNA vaccine) at least 2 months after the 2nd dose. • Pfizer: 0.3mL, or • Moderna 0.5mL	Vaccination series complete; no additional vaccinations needed.
	1 dose of Janssen COVID-19 Vaccine and 1 dose of an mRNA COVID-19 Vaccine (given as booster dose, i.e., Pfizer 0.3mL or Moderna 0.25mL)[+]	Administer a third dose (additional mRNA vaccine) at least 2 months after the 2nd dose. • Pfizer: 0.3mL, or • Moderna 0.5mL	Vaccination series complete; no additional vaccinations needed.
	1 dose of Janssen COVID-19 Vaccine and 1 dose of an mRNA COVID-19 Vaccine (given as additional dose, i.e., Pfizer 0.3mL or Moderna 0.5mL)[+]	Administer a booster dose of any COVID-19 vaccine 2 months after the 2nd dose. • Pfizer: 0.3mL, or • Moderna 0.25mL, or • Janssen: 0.5mL (mRNA is preferred over Janssen)	Vaccination series complete; no additional vaccinations needed.

*mRNA vaccines are preferred.

[+]When reviewing vaccination history, doses of the Moderna COVID-19 Vaccine received prior to February 7, 2022 should be considered to have been the booster dosage (0.25 mL; 50 mcg).

Updates for people vaccinated outside the USA

1. People 12+ who have had ***an incomplete series*** of a WHO approved but non-FDA authorize/approved vaccine can get age appropriate mRNA vaccine to complete the series (previously, only Pfizer) and then should get an age appropriate mRNA booster at 5 months.
2. People 12+ who have ***completed*** a WHO approved but non-FDA authorize/approved vaccine should get an age appropriate mRNA booster at 5 months.
3. Immune compromised people 12+ who have started vaccination with a WHO approved but non-FDA authorized/approved vaccine should get a 3rd dose of age appropriate mRNA and then a booster at 3 months.

Vaccination history	Recommended actions	Special situations
Received all recommended primary doses for that vaccine	• Do not repeat primary series • Administer mRNA booster dose at least 5 months after last primary series dose	People ages 12 years and older who are moderately or severely immunocompromised should also receive: • A single dose of an mRNA COVID-19 vaccine at least 28 days after receiving the last dose of the non-FDA-approved or -authorized primary series. • An mRNA booster dose at least 3 months after last primary series dose, for a total of four vaccine doses.
Received partial primary series for that vaccine	• Administer a single dose of an mRNA COVID-19 vaccine at least 28 days after receipt of their first dose to complete primary series • Administer mRNA booster dose at least 5 months after last primary series dose	People ages 12 years and older who are moderately or severely immunocompromised should also receive: • A single dose of an mRNA COVID-19 vaccine at least 28 days after the last dose of the primary series. • An mRNA booster dose, at least 3 months after last primary series dose, for a total of four vaccine doses.
Received a booster dose after completion of primary series	Do not repeat booster dose	

Interim Clinical Considerations for Use of COVID-19 Vaccines | CDC

and a few other updates . . .

1. COVID Vaccines can be given after passive antibody treatment without any waiting period (previous recommendations were to wait 90 days if mAB given for treatment and 30 days if given as post-exposure prophylaxis).
2. Stronger language to avoid additional doses of mRNA vaccine after COVID19 vaccine related myocarditis/pericarditis
3. Evusheld - recommended to administer 2 weeks after a COVID19 vaccine dose (per Evusheld EUA)

FAQ: When can I get vaccinated if I tested positive for COVID19?

CDC says:

- wait to be vaccinated until you have recovered from illness AND
- you have met the criteria for discontinuing isolation

    - there is no other required “waiting period”
    - at the beginning of the vaccine effort when vaccine was scarce, people who had had covid (and therefore had natural immunity) were asked to wait up to 90 days to get vaccinated. this hasn’t been a recommendation since vaccine supply improved

https://www.cdc.gov/coronavirus/2019-ncov/vaccines/faq.html?s_cid=10528:%2Bif%20%2Byou%20%2Bhad%20%2Bcovid%20%2Bdo%20%2Byou%20%2Bneed%20%2Bthe%20%2Bvaccine:sem.b:p:RG:GM:gen:PTN:FY21

Vaccines Updates as of 2/2022

- **Individuals ages 18+ can receive ANY COVID-19 vaccine and booster**
  - ✔ **Pfizer primary series + any brand* booster 5 months after primary**
  - ✔ **Moderna primary series + any brand* booster 5 months after primary series**
  - ✔ **J&J primary series + any brand* booster 2 months after primary dose**
  - ✔ **Mix and match primary and booster vaccine brands is ok**
- **Individuals ages 12-17 can receive only Pfizer primary and booster vaccines at 5 months after primary dose**
- **Individuals ages 5-11 can receive only Pfizer primary vaccine**
- **Individuals ages 5 -11 who are moderately or severely immunocompromised should get an additional shot after 28 days that matches the primary series (Three Doses total)**
- **Individuals ages 12+ who are moderately or severely immunocompromised **should get an additional dose (28 days after primary series) and a booster dose 3 months later (Four Doses Total)**

* Per CDC, Pfizer and Moderna m-RNA COVID-19 Vaccines preferred in most situations

**On a case-by-case basis, providers for moderately or severely immunocompromised patients may administer mRNA COVID-19 vaccines outside of the FDA and CDC dosing intervals based on clinical judgement when the benefits of vaccination are deemed to outweigh the potential and unknown risks for the recipient.

NOTE: Individuals who had received monoclonal antibodies may now receive COVID-19 vaccine without any delay (previous recommendations were to wait 90 days if monoclonal antibody was given for treatment and 30 days if monoclonal antibody was given as post-exposure prophylaxis).

Pfizer Maroon Cap - on hold

- Orders for the Maroon Cap vaccine placed in VTrckS have been canceled by the CDC.
- In addition, later this week, the VTrckS team will coordinate with Tiberius to reduce the thresholds to zero for this vaccine.
- Should the Maroon Cap vaccine become available again in the Spring, your canceled orders will remain in VTrckS for future reference.

Pfizer-BioNTech COVID-19 Vaccine Products

PRELIMINARY – SUBJECT TO CHANGE PENDING REGULATORY GUIDANCE AND AUTHORIZATION/
CDC DOCUMENT – SHARED FOR JURISDICTIONAL PLANNING PURPOSES ONLY

	Current Products		Future Product
Age Indications[a]	12 years and older	5 through 11 years	6 months through 4 years[d]
Vial Cap Color and Label with Color Border	GRAY 	ORANGE 	MAROON 
Preparation	Do Not Dilute	Dilute Before Use	Dilute Before Use
Amount of Diluent Needed per Vial[b]	Do Not Dilute	1.3 mL	2.2 mL
Dose Volume/Dose	0.3 mL/30 mcg	0.2 mL/10 mcg	0.2 mL/3 mcg
Doses per Vial	6 doses per vial	10 doses per vial (after dilution)	10 doses per vial (after dilution)
	Storage Conditions		
ULT Freezer (-90°C to -60°C)[c]	9 months	9 months	9 months
Freezer (-25°C to -15°C)	DO NOT STORE	DO NOT STORE	DO NOT STORE
Refrigerator (2°C to 8°C)	10 weeks	10 weeks	10 weeks
Room Temperature (8°C to 25°C)	12 hours prior to first puncture (including any thaw time)	12 hours prior to first puncture (including any thaw time)	12 hours prior to first puncture (including any thaw time)
After First Puncture (2°C to 25°C)	Discard after 12 hours	Discard after 12 hours	Discard after 12 hours

[a] Use the appropriate product based on the age of the recipient. [b] Diluent: Sterile 0.9% Sodium Chloride Injection, USP. Do not use bacteriostatic 0.9% Sodium Chloride Injection or any other diluent.
[c] Regardless of storage condition, vaccines should not be used after 9 months from the date of manufacture printed on the vial and cartons.
[d] The vaccine is currently under emergency use authorization review by the Food and Drug Administration (FDA) for children 6 months through 4 years old.

Updates from the Immunization Program

- **J&J supply** - CDC will sunset J&J vaccine in the foreseeable future. If you need doses or have doses, email us at covid.vaccines@state.nm.us. Providers using J&J will need to start transitioning to an mRNA vaccine option.
- **Expiration Dates** - Please double check and update **Gray cap** and **Orange cap** Pfizer expiration dates in NMSIIS. If you are storing your vaccine in the refrigerator please adjust and reflect the 10 week expiration date in NMSIIS.
- **Immunization Gateway -** Nevada, Kentucky, Oklahoma
- **covid.vaccines@state.nm.us**

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Therapeutics Update

[Information for Providers | NMDOH - Coronavirus Updates (nmhealth.org)]

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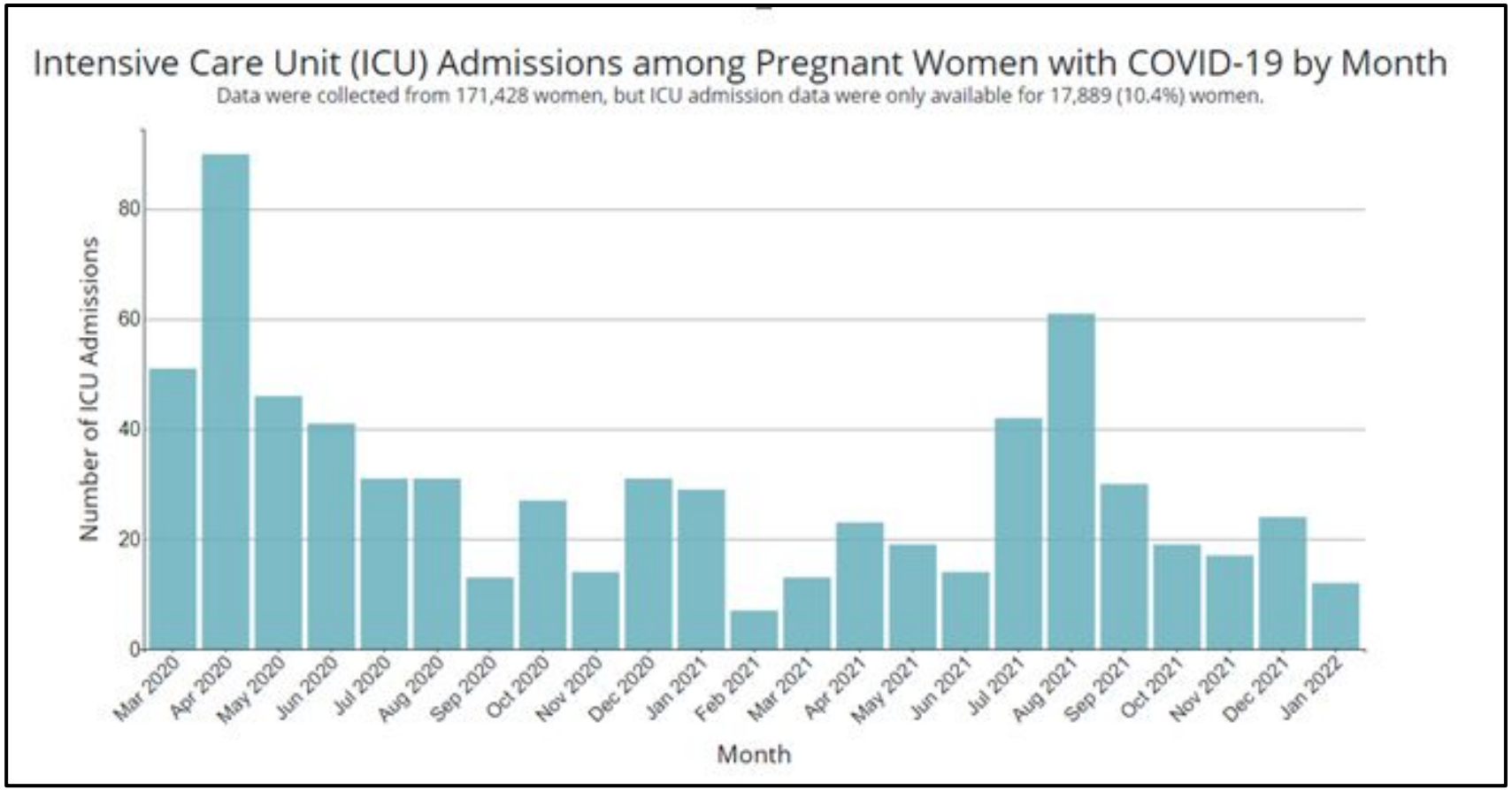
New COVID-19 Therapeutic: Bebtelovimab

- EUA granted 2/11/22
- Arriving in hospitals next week
- This is a monoclonal antibody
- Authorized for the treatment of mild-to-moderate COVID-19 disease for patients age 12+ and weighing ≥ 40kg.
- Bebtelovimab 175 mg IV given over a 30 second infusion. An hour observation period is required after infusion.

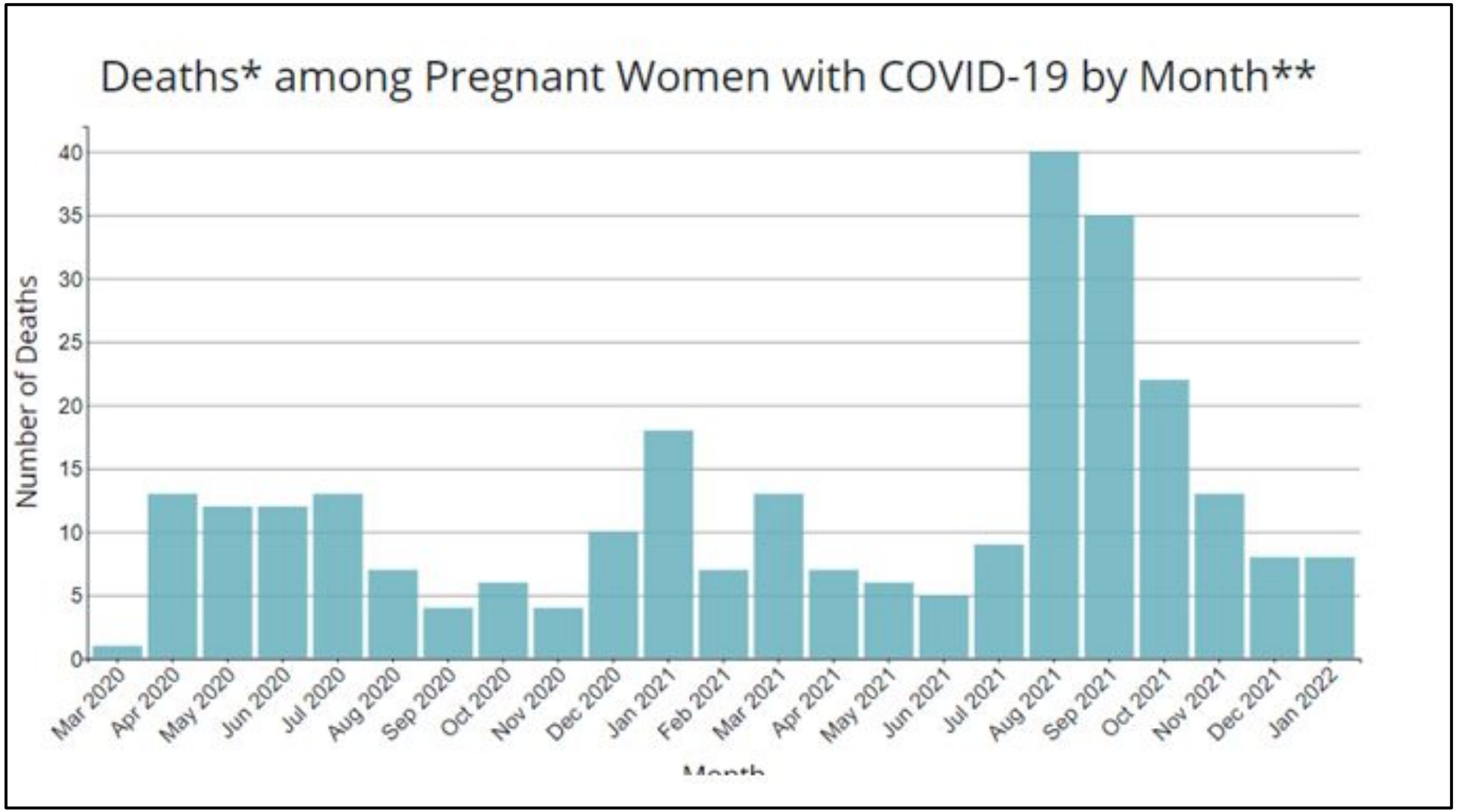
Bebtelovimab, cont.

- In BLAZE-4, Bebtelovimab has been shown to improve symptoms in patients with mild-to-moderate COVID-19.
- Additionally, a reduction in SARS-CoV-2 viral load on Day 5 was observed relative to placebo, though the clinical significance of this is not known.
- The clinical trials were not powered or designed to determine differences in clinical outcomes.
- According to the FDA, it is reasonable to believe that Bebtelovimab may be effective for the treatment of patients with mild-to-moderate COVID-19 to reduce the risk of progression to hospitalization or death.
- Bebtelovimab retains activity against currently circulating variants.

Refer pregnant women for vaccine and treatment



CDC COVID Data Tracker



CDC COVID Data Tracker

OMASS Triage Score:

No longer necessary due to more supply than demand
Those at high risk of COVID should get Tier 1 or 2 Medications

adapted from Mayo Clinic's published Monoclonal Antibody Screening Score (MASS)

RISK FACTOR	POINTS
Age 65 years and older	2
BMI 35 kg/m2 and higher	2
Diabetes mellitus	2
Chronic kidney disease	3
Cardiovascular disease in a patient 55 years and older	2
Chronic respiratory disease in a patient 55 years and older	3
Hypertension in a patient 55 years and older	1
Immunosuppressed and unlikely to have responded to vaccines (eg: CD20 inhibitors, BTK inhibitors, campath, recent CAR-T, organ transplant)	3
Pregnancy*,[7]	4
BIPOC (Black, Indigenous, People of Color) status[8]	1
Any other underlying medical condition associated with high risk for severe COVID-19 disease according to the CDC https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-care/underlyingconditions.html	1

*Molnupiravir is not recommended for use in pregnancy.

Therapeutic	Reduction In hospitalization & death	Route	Treatment Initiation from Symptom Onset	Preference
Paxlovid (Nirmatrelvir/Ritonavir) 300mg/100mg po BID x 5 days	88%	Oral	Within 5 days	**1st Tier**
Remdesivir	87%	IV	Within 7 days	**1st Tier**
Sotrovimab	85%	IV	Within 10 days	**2nd Tier** Reserve use for those whom: Tier 1 medication contraindicated/unavailable
Molnupiravir 200mg 4 tabs po BID x 5 days	30%	Oral	Within 5 days	**3rd Tier** Utilize when other treatment options are contraindicated or unavailable
Bebtelovimab	Clinical trial not powered or designed to determine difference in clinical outcomes	IV	Within 7 days	**3rd Tier** Utilize when other treatment options are contraindicated or unavailable

COVID-19 TREATMENTS

ORAL MEDICINES

PAXLOVID

WHO SHOULD USE IT:
People ages 12 or older, who are covid positive, who are not hospitalized, and who are at high risk for getting very sick.

HOW TO USE IT:
People using Paxlovid will need to take 3 pills, twice a day, for 5 days.

BENEFITS:
Paxlovid reduces the chance of hospitalization and death from COVID by 88% and can be taken at home.

MOLNUPIRAVIR

WHO SHOULD USE IT:
People ages 18 or older, who are covid positive, who are not hospitalized, and who are at high risk for getting very sick.

HOW TO USE IT:
People using Molnupiravir will need to take 4 pills, twice a day, for 5 days.

BENEFITS:
Molnupiravir reduces the chance of hospitalization and death from COVID by 30% and can be taken at home.

IV MEDICATIONS

REMDESIVIR

WHO SHOULD USE IT:
People ages 12 or older who are hospitalized with covid or not hospitalized but who are at high risk for getting very sick from covid.

HOW TO USE IT:
People using Remdesivir will need to get 1-2 hour infusions for 3 days. These infusions will be in a clinical setting such as a hospital.

BENEFITS:
Remdesivir reduces the chance of hospitalization and death from COVID by 87%.

SOTROVIMAB

WHO SHOULD USE IT:
People ages 12 or older, who are covid positive, who are not hospitalized, and who are at high risk for getting very sick.

HOW TO USE IT:
People using Sotrovimab will need to get a 30 minute infusion for 1 day. These infusions will be in a clinical setting such as a hospital.

BENEFITS:
Sotrovimab reduces the chance of hospitalization and death from COVID by 85%.

All COVID-19 treatments require a referral from a medical provider. If you do not have a medical provider, call the coronavirus hotline at: 1-855-600-3453

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TRATAMIENTOS COVID-19

MEDICAMENTOS ORALES

PAXLOVID

QUIÉN DEBE USARLO:
Personas mayores de 12 años, que son positivas al COVID, que no están hospitalizadas y que tienen un alto riesgo de enfermar gravemente.

CÓMO SE UTILIZA:
Las personas que tomen Paxlovid tendrán que tomar 3 pastillas dos veces al día, durante 5 días.

BENEFICIOS:
Paxlovid reduce la posibilidad de hospitalización y muerte por COVID en un 88% y puede tomarse en casa.

MOLNUPIRAVIR

QUIÉN DEBE USARLO:
Personas de 18 años o más, que son positivas al COVID, que no están hospitalizadas y que tienen un alto riesgo de enfermar gravemente.

CÓMO SE UTILIZA:
Las personas que tomen Molnupiravir tendrán que tomar 4 pastillas, dos veces al día, por 5 días.

BENEFICIOS:
Molnupiravir reduce la posibilidad de hospitalización y muerte por COVID en un 30% y puede tomarse en casa.

MEDICAMENTOS INTRAVENOSOS

REMDESIVIR

QUIÉN DEBE USARLO:
Personas de 12 años o más que estén hospitalizadas con COVID o que no estén hospitalizadas pero que tengan un alto riesgo de enfermar mucho por COVID.

CÓMO SE UTILIZA:
Las personas que utilicen Remdesivir deberán recibir infusiones de 1 a 2 horas durante 3 días. Estas infusiones se realizarán en un entorno clínico, como un hospital.

BENEFICIOS:
Remdesivir reduce la posibilidad de hospitalización y muerte por COVID en un 87%.

SOTROVIMAB

QUIÉN DEBE USARLO:
Personas mayores de 12 años, que son positivas al COVID, que no están hospitalizadas y que tienen un alto riesgo de enfermar gravemente.

CÓMO SE UTILIZA:
Las personas que utilicen Sotrovimab deberán recibir una infusión de 30 minutos cada día. Estas infusiones se realizarán en un entorno clínico, como un hospital.

BENEFICIOS:
Sotrovimab reduce la posibilidad de hospitalización y muerte por COVID en un 85%.

Todos los tratamientos de COVID-19 requieren la remisión de un proveedor médico. Si no tiene un proveedor de servicios médicos, llame a la línea de atención de coronavirus al: 1-855-600-3453

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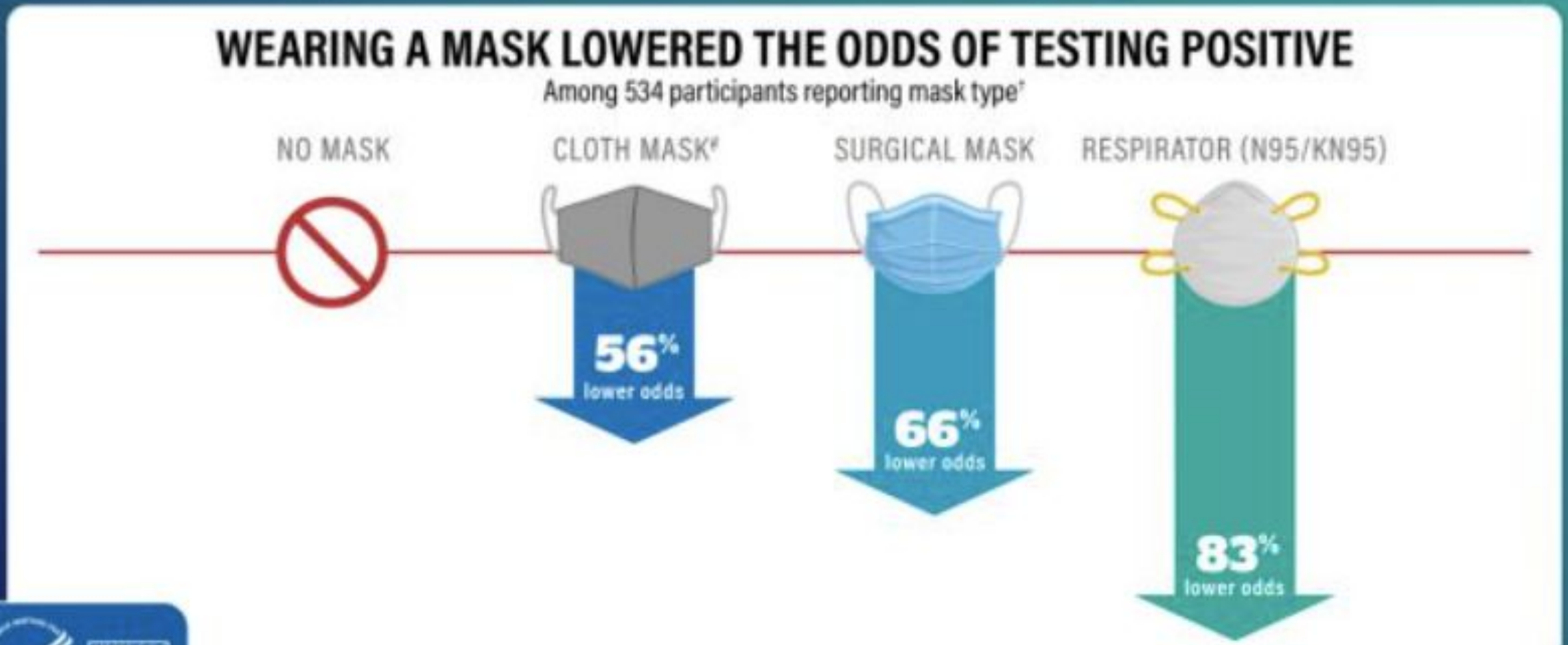
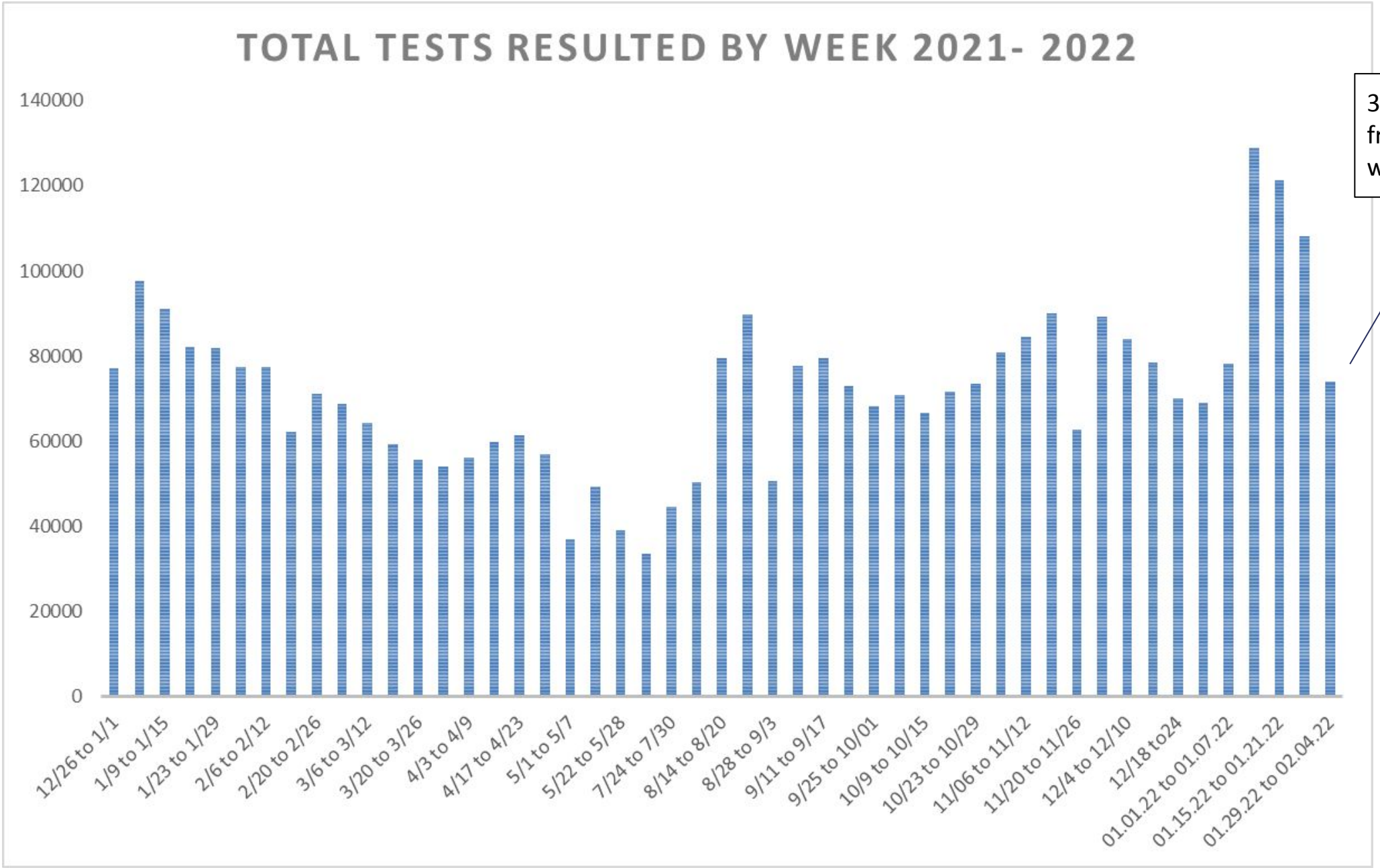
Mask wearing update

People who reported always wearing a mask in indoor public settings were less likely to test positive for COVID-19 than people who didn't*

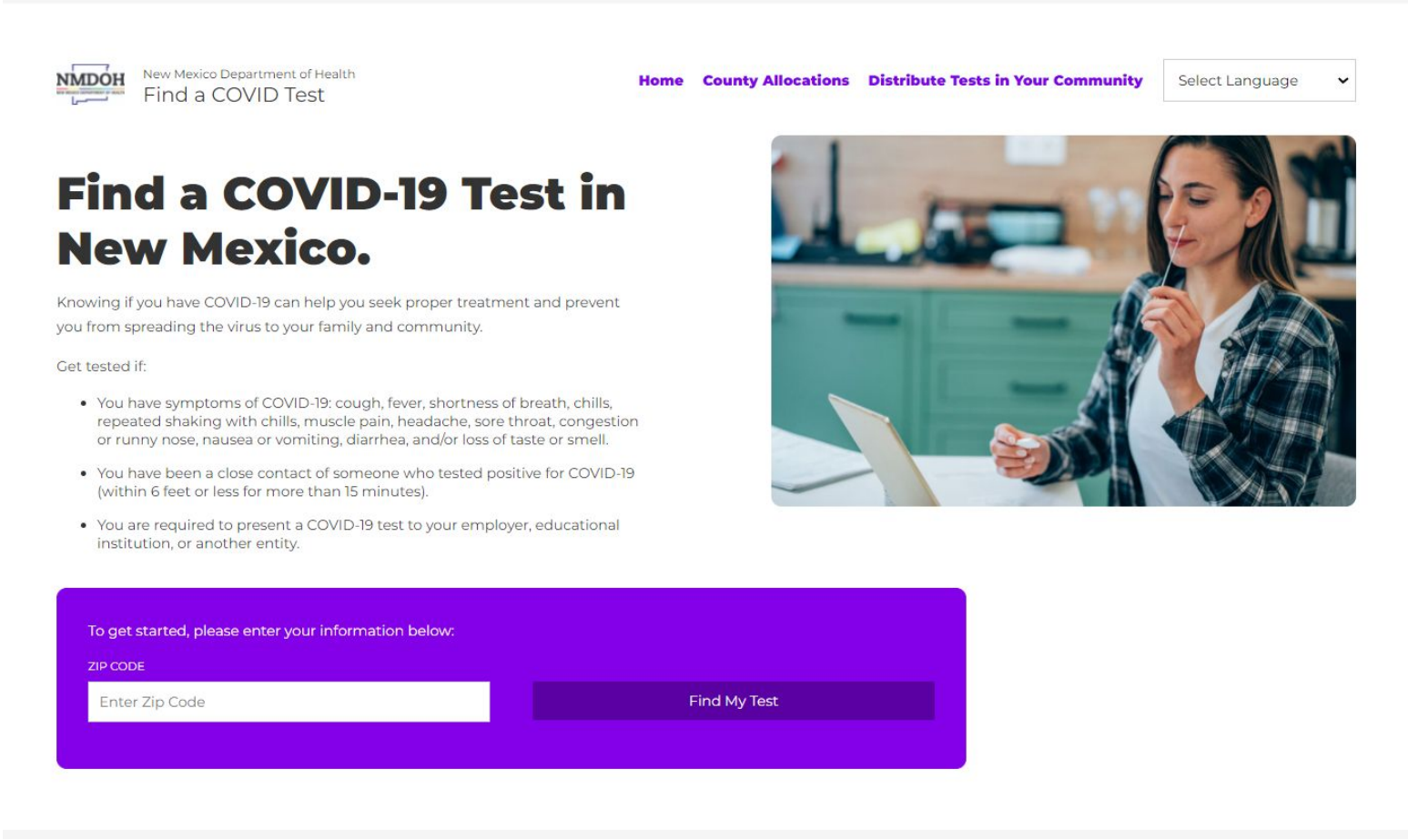


Testing Updates



31% decrease from previous week

FindaTestNM.org



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Investing for tomorrow, delivering today.

OPTIONAL REPORTING OF HOME TESTING

https://covid-positive-home-test.doh.nm.gov/

1190 S. St. Francis Drive • Santa Fe, NM 87505 • Phone: 505-827-2613 • Fax: 505-827-2530 • nmhealth.org

Help stop the spread of COVID: Sign up for nmnotify.org

1. **Enable the app** on your smart phone: apple phone and google play
2. **Contact Exposures:** Once registered, you will receive text notifications if you have come into contact with someone who is positive for COVID.
3. **Report your positives**: If you are positive for COVID you can report your positivity on the app, and people you have come into close contact with will be notified they may have come into contact with an individual who is positive.

DOH Contact Information for Providers

CONTACT INFO	DESCRIPTION
COVID.Vaccines@state.nm.us	COVID-19 Vaccine Record requests; Provider COVID-19 Vaccine Order status; NMSIIS assistance.
COVID.Therapeutics@state.nm.us	Provider questions regarding COVID oral therapeutics (Molnupiravir and Paxlovid); COVID PrEP (Evusheld); mAB; or Remdesivir
COVIDData.compliant@state.nm.us	COVID-19 vaccine storage and handling questions, temperature log and onboarding Vaccine Plan submissions.
COVID.testing-doh@state.nm.us	For Provider questions on testing and test supplies

DOH Contact Information for Patients

CONTACT INFO	DESCRIPTION
COVID-19 Hotline: 1-855-600-3453	Users who have questions or would like support with vaccine registration and testing
ALTSD assistance: 1-800-432-2080	For seniors and those with disabilities who need support with vaccine registration and scheduling.
1-833-551-0518	For non-health related COVID-19 questions

THANK YOU for all that you do!