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Colorado's Innovative Response Delivering Results

Two years ago, Colorado had its first case of the COVID-19 pandemic. Since then, the Polis administration, in partnership with local and federal governments, has responded to this pandemic by quickly scaling up free testing sites, distributing vaccines, ensuring health care systems have the personal protective equipment and resources they need, deploying resources to congregate settings, and protecting hospital capacity. In the beginning, the world knew very little about this virus and had no effective vaccines, and even lacked basic equipment like ventilators and medical grade masks.

Throughout the pandemic, Coloradans saved countless lives by committing to getting tested, getting vaccinated, and staying home when they were sick. Our health care workers and caretakers have accomplished heroic acts to save their fellow Coloradans. Colorado has taken an all state approach to forge partnerships between the state, health care providers, local public health, non profit organizations, schools, and community groups to build an aggressive yet balanced response that focused on both saving lives while caring for the social, mental, and economic well being of all Coloradans. Compared to other states, Colorado ranks 10th lowest for deaths per 100,000 and 14th lowest for cases per 100,000 over the course of the pandemic. Our economy was open longer and is rebuilding faster. Our schools have been open more than most states, minimizing learning loss and impacts on our students.



10th lowest for deaths per 100,000



More than 18 million test results



81% of eligible Coloradans have been vaccinated with at least one dose



2.5 million at-home tests



91% of Coloradans are immune to omicron infection and severe disease



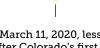
56 million masks to schools



16th in the country for fully vaccinating kids ages 5-17



4 million medical-grade masks to Coloradans The state has provided large scale, free testing and distributed personal protective equipment across Colorado:



On March 11, 2020, less than a week after Colorado's first confirmed COVID-19 case, the state set up a community testing site at CDPHE's Lab Services Building in Lowry, one of the first drive-thru testing sites in the country. The state now has more than 150 free community testing sites and the state has the capacity to process nearly 50,000 tests daily alone.

The state has distributed more than two million rapid tests to Colorado residents via the Rapid At-Home Testing Program, and the federal government used Colorado's program as a model on the national level. And, this week the state has distributed another 500,000 through community distribution sites.

Through the School Mask Program, Colorado distributed a combined total of nearly 57 million surgical masks, KN95 masks, and child-sized masks to staff and students in schools across the state. Colorado has distributed more than four million medical-grade masks to communities across Colorado through the Free Mask Program.

Colorado has used advanced science and data to detect new variants and monitor the virus in Colorado.



In December of 2020, Colorado's state lab became the first lab in the country to identify a variant of concern in clinical samples (B.1.1.7, or Alpha).



In December of 2021, the state laboratory detected its first case of omicron variant in Colorado. Colorado became the third state in the country to detect omicron variant.



While still maintaining capacity to investigate other pathogens and implement disease control measures, state epidemiologists have processed more than 18 million laboratory reports, and identified, investigated, and analyzed more than 8,000 COVID-19 outbreaks.



From the beginning of the pandemic, Colorado established a strong partnership with the Colorado School of Public Health (CSPH) to draw on the expertise of Colorado's leading public health scientists. Through the partnership, CSPH provided policy-makers and the general public with mathematical modeling and forecasting data to provide key insights on how the pandemic was impacting Colorado and support response strategies.

Colorado also leads the way on vaccination – more than 81% of Coloradans are vaccinated with at least one dose and the state ranks 10th among states in third dose uptake. Colorado enlisted the logistical expertise of the Colorado National Guard to efficiently distribute vaccines rapidly, yet equitably, across the state. Colorado equally benefited from the hard work of trusted health care providers, our hospitals, federally qualified health centers, and pharmacies to ensure access to the doctor approved vaccine. Colorado has prioritized removing barriers to vaccination, making sure that every Coloradan has access to free vaccines without having to show identification, insurance or proof of medical history. The Champions for Vaccine Equity Initiative — a unique initiative that connected health care professionals, promotoras, and crisis counselors with communities of color — worked to meet people where they are and empower them to make the best decisions for themselves and their families with accurate information. The work continues, as the state is committed to making sure every Coloradan can stay up to date on their vaccines to keep protecting themselves and their communities. Long after the emergency pandemic response is scaled back, we will continue our commitment to providing historically underserved communities and vulnerable populations with science-based information and ensuring access to the safe and effective vaccine. Colorado has prioritized pediatric vaccinations and ranks 16th out of 50 states for percent of Age 5-17 Fully Vaccinated and we stand ready and urge the FDA to approve the vaccine for 0-4 years.

Our Roadmap to Moving Forward

Thanks to the efforts of Coloradans, we are in a very different place now than we were in March of 2020. We have wide availability of the safe and effective vaccine which reduces the risk of death 96% among the triple-vaccinated and 85% among the double-vaccinated. We have several highly effective therapies to treat COVID-19 and health care providers are much more well-versed in caring for those who test positive for COVID-19, especially those with severe disease. Coloradans have reached high levels of immunity through both vaccination and infection, and the predominant variant of COVID-19 right now is significantly less severe than previous variants. The confluence of these factors has put us into more of an endemic state - this means that the virus is present, but not disruptive in the way a once-in-ageneration pandemic is.

If you are vaccinated — especially if you are up to date with all three doses — and if your household is fully vaccinated, then you should feel comfortable to now proceed with life as normal. If you get sick, you need to <u>isolate</u> and call your doctor for testing and treatment options. If you are unvaccinated, you continue to remain at high risk for severe outcomes such as hospitalization and even death from a COVID-19 infection, and we urge you to get the doctor-approved vaccine. If you are part of a vulnerable population, please proactively talk to your health care provider about protecting yourself, potential fourth vaccine doses, preventive treatments that are now available, and your plan for receiving treatment if you contract the virus. The administration continues to urge the FDA to approve the safe and effective vaccine for people of all ages.

If a new, more severe variant appears, or large scale immunity wanes, the virus could resurge and we may need to move back into a pandemic response mode. If and when that happens we need to be better prepared and fix the challenges that exist in the current systems in order to minimize the impact on Coloradans, especially for Coloradans that have done their part by getting vaccinated. The lull in disease spread that is currently predicted for the next several months hopefully gives us the time to be better prepared and ensure readiness of our healthcare system and public health response. We know this virus can and expect it will change — it could change to be even less severe or more severe and send us into an epidemic state or even back into an emergency response state with little notice. That's why it's imperative as we transition from the pandemic response into a new chapter where we can use more routine disease control tactics, we not only remain ready if and when something changes, but we build stronger and more resilient systems.

As the pandemic phase of this response recedes into a more endemic response, we must now capture the hard lessons learned and codify the ways to be better prepared for if COVID 19 resurges or a new catopheric event were to emerge. And our healthcare, emergency response and public health systems must remain in a state of readiness to respond and surge when needed.





Our road map includes four main lines of effort:



Establishing Hospital Readiness Standards, Surge Planning, and Normalizing COVID Patient Care in Traditional Medical Setting:

Ensuring healthcare systems are prepared for future response efforts and normalizing COVID-19 treatment and prevention back into traditional health care settings.



Ensuring Public Health Readiness and Surge Capacity:

Building on lessons learned so the public health and emergency management fields can expand and contract for disease control and other emergency needs.



Investing in Health Care Workforce Stabilization and Expansion:

Stabilizing the current workforce and building and maintaining a sustainable health care workforce for the future.



Engaging Federal Government in National Endemic Response, Pandemic Readiness, and Needed Reforms:

Striving for a national plan for pandemic readiness and response, and investing in the public health system, including an updated and interoperable national surveillance system, and flexible, non-categorical funding to allow flexibility and increase the public health workforce.



Establishing Hospital Readiness Standards, Surge Planning, and Normalizing COVID Patient Care in Traditional Medical Settings

Colorado's Northstar has always been to prevent our hospital systems from breaching capacity, so that any Coloradan, whether they have a heart attack, are involved in a car accident, or are ill from a COVID-19 infection, has access to hospital care when they need it. The severe economic restrictions in the spring of 2020, when states were forced to issue stay-at-home orders, were driven by a lack of national preparedness including a lack of PPE, testing supplies and technology, large-scale public health capacity, and access to staffed hospital beds and critical life saving medical supplies such as ventilators. These restrictions were, at the time, the only option to save lives, but had long-term consequences for our residents' health, education, and welfare. Leaders had to choose between bad and catastrophic outcomes of mass casualties or social and economic hardship. We strive to never have to institute similar restrictions moving forward, and yet neither the federal government nor state government has yet passed laws and regulations to ensure the readiness that would prevent that from happening again. Now is the time to institute a standard of readiness that all hospitals must maintain to prevent our economy and all of society from suffering that impact in the future. Readiness means maintaining the hospital capacity we have by ensuring adequate hospital staffing at all times. Colorado hospitals headed into the fall Delta wave with 500-600 less staffed hospital beds than previous waves leaving little margin to absorb a spike of patients. We must have transparency into capacity and protect against and prevent diminished capacity and maintain enough bed and staffing capacity as well as critical supplies to manage a surge in utilization. Colorado has 1.9 hospital beds per 1,000 residents, putting us on the lower end of the spectrum for hospital capacity as the national average is 2.4 hospital beds per 1,000 and states with the highest hospital bed capacity have more than four beds per 1,000 people. Colorado is not in a position to allow our hospital capacity to drift downwards. We need oversight measures in order to ensure that we are prepared.

It's also time to normalize the treatment of COVID-19 back into the healthcare system like every other disease and condition, which means transitioning many emergency response functions including diagnostic testing, distribution of therapeutics and routine vaccinations to traditional healthcare provider settings. Normalizing testing and connecting patients who test positive with access to therapeutics in the traditional medical system will drive better patient outcomes and lower hospital utilization. For the last 23 months, the State of Colorado and our 54 local public health agencies have borne the burden of many emergency response efforts that in non-pandemic times would be the normal work streams of the traditional healthcare system, such as diagnostic testing, the administration of therapeutic treatments, and vaccination campaigns.

Hospitals exist in a healthcare ecosystem, with patients flowing in and out of facilities based partly on the care available to them in the community. During the pandemic, patients filled emergency rooms seeking tests and COVID therapies. Patients ready for transfer out of the hospital to skilled nursing facilities (SNF) remained in the hospital due in large part to staffing shortages in step-down settings. We need a systems approach to readiness to maximize resources during times of stress including severe flu seasons or a resurgence of COVID. This means ensuring people can move back into nursing facilities or that we can transfer patients between hospitals when necessary. Work to improve hospital readiness therefore includes work to increase step-down options for patients to assure an efficient movement of patients to the right care setting at the right time.

- » Ensuring critical supplies and PPE, move from just-in-time ordering to adequate supply-on-hand.
- » Maintaining and communicating appropriate use of emergency room services by providing COVID testing and therapy in other settings.
- » Maintaining hospital bed and staffing capacity and surge readiness activation plans.
- » Improving hospital throughput by assuring access to adequate skilled nursing facility beds, ensuring we have adequate treatments options for behavioral health, building hospital at home capacity and moving patients as needed to community based settings.
- » Cross training of health care workers for emergency response.
- » All outpatient, hospital owned, health care providers to engage in delivering covid vaccinations.
- » Work with all appropriate health care providers such as primary care physicians, community health clinics, hospitals, and pharmacies — to provide diagnostic testing and prescribe COVID therapeutics to relieve pressure on our emergency healthcare systems and drive better health outcomes.



Read our detailed plan on <u>Establishing Hospital Readiness Standards</u>, <u>Surge Planning</u>, <u>and Normalizing COVID Patient Care in Traditional Medical Settings</u>.







Ensuring Public Health Readiness and Surge Capacity

The public health field has scaled disease control measures to an unprecedented level during the COVID-19 pandemic – testing thousands of Coloradans a day at hundreds of community testing sites, vaccinating more than 86% of adults in partnership with our health care providers in a little over a year, conducting thousands of outbreak investigations, having hundreds of thousands of contact tracing conversations, communicating public health protocols to keep individuals and families safe, developing industrial hygiene best practices, and standing up serial testing in congregate settings across the state. To accomplish this, Colorado's unified command structure upgraded and in some cases developed technology, created new and more efficient systems, and hired thousands of new public health employees to sustain an unprecedented emergency response for nearly two years. The public health field has not previously had this large of a presence or created this much new and effective infrastructure, and continues to lack appropriate long-term and flexible (non-categorical) funding to allow it to maintain the best available technology and surge capacity of public health workers for when increased efforts are needed.

The State's Division of Homeland Security and Emergency Management has been a key partner in the response, managing the addition of new hospital beds, deploying the National Guard to critical missions, deploying staffing contracts to stabilize hospitals and long-term care facilities, distributing millions of medical grade masks, and developing a modernized and sustainable approach to maintaining the state's stockpile of critical supplies. The public health and emergency management fields continue to need ongoing funding for sustaining this readiness capacity. Just as the tragedy of 9/11 ushered in a new era of federal funding for sustained local anti terrrorism and response capabilities, the COVID-19 pandemic must also usher in a new level of federal commitment for states to build and sustain the ability to prepare and respond.

Public health endemic response and surge readiness will require the ability to move between routine disease control model to pandemic response in these key workstreams:

- » Updating disease investigation and disease surveillance systems (including early warning surveillance of wastewater).
- » Continue outbreak prevention and response activities in high risk settings.
- » Continue our vaccination efforts for hard to reach communities.
- » Continue our efforts to protect the most vulnerable.
- » Support efforts for indoor air quality improvements in schools and public spaces.
- » Continue to modernize and seek efficiencies through technology updates and connectivity for our public health and health systems.
- » Be prepared to surge containment efforts for mass testing and contact tracing if and when pandemic response is needed.
- » Be prepared for surge vaccination campaign to augment the medical system if needed.
- » Seek additional and stable resources for the state's emergency management system.
- » Modernize and maintain the State Stockpile: including PPE, testing, and other critical supplies for emergency response.



Read our detailed plan on Ensuring Public Health Readiness and Surge Capacity.

Investing in Health Care Workforce Stabilization and Expansion

All Coloradans owe a huge debt of gratitude to our health care and caretaker workforce who have, despite great hardship, taken care of us in our darkest hours and saved thousands of lives. At the beginning of the pandemic, we took to the streets to cheer and howl in gratitude nightly and donated meals to tired hospital staff, as the virus recedes our gratitude and appreciation should not. Colorado must address our health care workforce challenges through retention and recruitment efforts, and expanding the pipeline to good paying health care careers. Colorado needs to retain and add significantly more new health care professionals, especially nurses at every level over the next four years to ensure all Coloradans have the care they need now and into the future. This hard work is the responsibility of both the public and private sector. As Coloradans need hospitals to move more aggressively to improve the wages and work conditions that result in retention challenges, the state needs to make critical investments to attract health care professionals to Colorado and create more career pathways to good paying health care jobs and our federal payers such as Medicaid must increase reimbursements to adjust a changed labor market.

Based on projected demand through research data, the increase in our aging population and current job posting data, Colorado needs to take aggressive actions to meet the delta of demand and available workforce. To meet this challenge, we will need partnerships with our health care providers, institutions of higher education and a multi-faceted approach to addressing the state's current and projected health care worker shortages which are particularly significant for various levels of licensed nursing staff.

- » Support providers to do more to retain their frontline workforce through increases to wages and improve work conditions.
- » Invest in attracting new, additional health care workers to Colorado.
- » Break down barriers to entering the health care profession in credentialing and licensing.
- » Facilitate mid career change to health care.
- » Build career pipelines and relationships between providers and institutions of higher education.
- » Expand on-the-job training such as apprenticeship for healthcare.
- » Provide opportunities for more health care professionals to work at the top of their skills.
- » Reinforce training capacity to ensure adequate options for health care jobs.
- » Greater National Guard Capacity in healthcare for emergency needs.



Read our detailed plan on Investing in Health Care Workforce Stabilization and Expansion.



Engaging the Federal Government in National Endemic Response, Pandemic Readiness, and Needed Reforms

We can take action on many of the challenges we face as a state, to manage COVID-19 in an endemic state while being better prepared for the need to surge back into pandemic response if needed, but we can't solve all the existing challenges without federal action. There are many lessons learned from the last 23 months and many things that could and should be done differently if we need to manage a pandemic again. For example, we can pass hospital readiness standards at the state level, but we need federal legislation to ensure our whole country fares better the next time. No state can act alone to stop the price gouging from staffing agencies without putting their state at a disadvantage. The ability of individual states to move between responding to an endemic and surging to a pandemic response is eased when all 50 states are ready. And, we must minimize the need for states to compete for scarce resources. We need ongoing support to keep supply chains stable for critical supplies. This is why we are engaging our federal partners to ask for key legislation to fix our national lack of preparedness and ensure states and local governments, and congregate settings have sustained resources to address the unknown.

Finally, the secondary impacts of COVID-19 will be with us for years to come just as the virus itself will be. We are grateful for President Biden's leadership and Congressional action in passing the American Rescue Plan Act, giving Colorado the resources we need to tackle issues made much more severe by the pandemic such as public safety, affordable housing, investments in workforce, and investments in transforming our behavioral and mental health systems. We are grateful to the Biden administration for not only giving the state unprecedented support in 100% reimbursement for our response, but also championing states having the resources to address these secondary crises.

- » Prevent price gouging, especially for staffing agencies.
- » Create uniform standards and funding for surveillance testing in congregate settings such as prisons, homeless shelters, and long term care facilities and allocate dedicated resources.
- » Increase federal Medicaid match to help with workforce strains, and increase wages for care takers.
- » Support national workforce expansion through greater flexibility for individuals to work at the top of their scope of practice.
- » Expansion of compacts for healthcare professionals, such as CNAs and behavioral health providers.
- Funding for on-the-job training in the healthcare industry to expand apprenticeship and healthcare educators who train in the workplace, such as nurse preceptors.
- » Establish an enforceable national hospital readiness standard.
- » Support ongoing supply chain solutions for testing and other critical supplies.
- » Provide ongoing resources for state and local public health for surge capacity and public health infrastructure.
- » Address inequities by supporting our safety net system to ensure that those who serve underserved populations and the uninsured have necessary resources.

- » Remove barriers and streamline fiscal processes so that small community-based organizations, community health centers, and safety-net clinics can apply for federal grant funds.
- » Invest in research about and support for long-COVID.
- » Require ERISA plans to pay for ambulance transportation related to hospital shortages in a national, state or local public health emergency.
- » Support the development of skilled nursing and long term care payment structures that incentivize innovations in models of care that will effectively meet increasingly complex medical and behavioral health needs.



Read our detailed plan for <u>Engaging the Federal Government in National Endemic Response</u>, <u>Pandemic Readiness</u>, and <u>Needed Reforms</u>.





Conclusion

Two years ago, Colorado had its first confirmed case of COVID-19. Over the past two years, more than 12,000 Coloradans have died after contracting the COVID-19 virus. This is a tremendous loss, and we honor and mourn the lives of all those who have passed since the pandemic began. We are grateful to Coloradans who are vaccinated, those who wore masks and stayed home when needed, and for all Coloradans who supported their communities through this crisis. While the pandemic has been difficult worldwide, the Colorado response story is one of resilience, innovation, problem-solving, and agility. Now, Colorado is ready to move into a new chapter: one where if vaccinated, Coloradans can live life normally. The State will be ready to surge our response should COVID-19 require it, and we are dedicated to advocating for an increased level of private sector, state and federal readiness. This roadmap to moving forward outlines the steps Colorado believes are necessary to maintain a level of preparedness and agility in order to keep Coloradans safe and healthy – no matter if it is for the next wave of this pandemic or an unknown pandemic in the future.





