

From: [Huls, JoAnne](#)
To: [Khaldun, Joneigh \(DHHS\)](#)
Cc: [Foster, Tricia](#); [Gordon, Robert \(DHHS\)](#); [Totten, Mark](#)
Subject: Re: Very rough estimates on cases and hospitalizations
Date: Saturday, March 21, 2020 9:33:32 PM

Thanks

We have had a lot of offers of help (free!) to help with tracing if we are interested in exploring ways to do that outside of the traditional systems. Just like with every other focused group we have, partnering with outside state government resources only increases our bandwidth and allows for expanded boots on the ground to tackle this — at our direction. I'll check in with budget on the expanded tracing persons you mentioned. Which line has tracing — persons, places or products? Let's get them working on tracing ASAP. Working with public health folks by county, but increasing the bandwidth ten fold. There's no reason to do this in a small way. Let me know what group has this. you give us the policy direction on what should happen, and the organized groups will implement.

The other states we have been talking to are shooting for tens of thousands of tests a day — so I'm interested to see our numbers. I'm assuming that you and Mark will be talking more about this in the coming days for how we want it to look in the short term (next week — vs. 5 months from now). We will continue to use our product team (which should be a joint and single operation of CHECC and SEOC) to gather everything we can for tests, where to interject more drive thru, how to do at home, all things tests. You tell us where to test, and we'll figure out how to get them there.

This, and the response from Robert, indicates a conversation is best tomorrow. I'm happy to help arrange if you want to shoot availability to me.

Thanks

From: Khaldun, Joneigh (DHHS) <KhaldunJ@michigan.gov>
Sent: Saturday, March 21, 2020 9:04 PM
To: Huls, JoAnne
Cc: Foster, Tricia; Gordon, Robert (DHHS); Totten, Mark
Subject: Re: Very rough estimates on cases and hospitalizations

Thanks JoAnne. The places and personnel workgroups as we speak are modeling off of this information, Tricia I'm copying you as the point on products.

We've revved up our lab capacity significantly and expect to have at least 10 labs testing in the next week. That will get us to at least 2,000 tests a day(likely more like 3,000) up from 100 last week. Ive asked my team for addresses/maps for all testing sites(some are just popping up on their own but we are trying actively to compile that info in one place) Part of the testing is the supply chain question of nasal swabs- which the SEOC should be actively

addressing.

Expansive testing, of the people most likely to be positive, will then guide the tracing and give us a better handle on targeted protective measures. There is a draft guidance that Mark has that specifies more on testing and reporting that I'm hoping can also go out as a declaration under Robert's authority, ASAP. I already sent out letter guidance to all healthcare providers re how they should be testing to maximize yield.

The local health departments do the tracing. I submitted in my initial budget request to SBO additional staff for locals to do this- any guidance on where this landed would be helpful.

Thanks
Joneigh

On Mar 21, 2020, at 8:46 PM, Huls, JoAnne <HulsJ1@michigan.gov> wrote:

Thank you Dr J,

Sobering. I'm assuming we are taking this information and pushing it into the Places, Products and Personnel groups so that they will be able to plan actively for this given the timeline suggested here.

I'd like to make sure that we have clear direction and expectation on next steps. If this group needs to talk again in the morning regarding structure please let me know. I'm happy to facilitate that call if necessary. I know work groups are active, but there still seems to be two lines here that need to get collapsed into one aggressive plan housed in the SEOC.

Your policy of aggressive social distancing is being captured by the Governor's EO in the coming day(s). Other policy guidance on testing and tracing would be helpful. I'm wondering if you have a sense of our current testing scenario, and what we need to move to, and how else we can actively and aggressively do more tracing?

Thanks
JoAnne

From: Khaldun, Joneigh (DHHS) <KhaldunJ@michigan.gov>

Sent: Saturday, March 21, 2020 7:31:56 PM

To: Huls, JoAnne <HulsJ1@michigan.gov>; Foster, Tricia <FosterT13@michigan.gov>; Gordon, Robert (DHHS) <GordonR3@michigan.gov>; Totten, Mark <TottenM1@michigan.gov>

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Hello,

Dr Sarah Lyon Callo drafted some rough estimates, based on what's occurring in Italy and projections for infectivity of the virus that causes COVID-19.

Based on some broad assumptions (worst case but possible scenario), we believe there will be about 6.9 million people in Michigan who become infected across all ages (70% of population), 1 million of those will need hospitalization, and 435,000 of those will require an ICU stay. A subset of the ICU cases will unfortunately die, but I do not have that estimate at this time.

This is estimated to occur over the next 2-4 weeks, and social distancing measures will bring this down regarding the acuity of the patients and the speed with which it spreads. My recommendation is the most aggressive public health action we can take at this time.

Joneigh S. Khaldun, MD, MPH, FACEP
Chief Medical Executive
Chief Deputy Director for Health
Michigan Department of Health and Human Services
Office: 517-284-4730
khaldunj@michigan.gov

From: [Huls, JoAnne](#)
To: [Gordon, Robert \(DHHS\)](#); [Khaldun, Joneigh \(DHHS\)](#); [Foster, Tricia](#); [Totten, Mark](#)
Subject: Re: Very rough estimates on cases and hospitalizations
Date: Saturday, March 21, 2020 9:24:19 PM

Ok. I'm happy to arrange a conversation. Some people "think" in spread sheet, others in power point, others with "accountability charts". Whatever works, as long as it gets us to clarity on who is doing what.

From: Gordon, Robert (DHHS) <GordonR3@michigan.gov>
Sent: Saturday, March 21, 2020 9:01 PM
To: Huls, JoAnne; Khaldun, Joneigh (DHHS); Foster, Tricia; Totten, Mark
Subject: RE: Very rough estimates on cases and hospitalizations

Thanks for the questions. I will leave Dr. J to reply regarding other policy guidance and testing.

On roles and responsibilities, the three groups and our improved internal protocols have helped, but there could still be greater clarity between SEOC and DHHS and at the name level regarding accountabilities. Attached is a spreadsheet that Jonathan put together and shared with Dr. J, Elizabeth, and me. I think it would be clarifying for a group of us to sit down and complete it. But there may be other good approaches as well.

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Subject: Re: Very rough estimates on cases and hospitalizations
Date: Saturday, March 21, 2020 8:46:04 PM

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Subject: RE: Very rough estimates on cases and hospitalizations
Date: Saturday, March 21, 2020 8:59:28 PM
Attachments: [COVID 19 SOM Roles and Responsibilities v2.xlsx](#)

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