

# COVID-19 Daily Update

June 26, 2020

## Summary

The United States has 2,446,706 confirmed COVID-19 cases and 124,749 reported related deaths. The White House coronavirus task force held a press conference for the first time in two months. Vice President Pence noted that the majority of new COVID-19 cases consist of individuals younger than 35 years old. CDC Director Redfield noted that COVID-19 in younger people “may not be highly associated with hospitalization and death” but warned that young people “act as a transmission connector for individuals that could in fact be at a higher risk.” In separate remarks, Dr. Fauci stated that the country’s current testing strategy is “not working” because it fails to identify spread among asymptomatic individuals. The task force is “seriously considering” pool testing populations for COVID-19, in which several samples are combined into one batch, or “pool,” and tested using one diagnostic test. Fauci noted that “casting a broad net” is the only way to find the “penetration of infected people in society.” CDC expanded the list of people at risk for severe COVID-19, including by expanding the list of underlying conditions that are associated with severe COVID-19.

Florida suspended on-premises alcohol consumption at bars, effective immediately. Bars in Florida can still sell food if they are licensed to do so, at 50% capacity. The city of Miami issued a new order on Thursday, June 25, requiring all residents to wear facial coverings in public. Texas reported a 79% increase in its weekly average of coronavirus cases on June 25, averaging 4,757 daily new cases. Texas closed all bars and ordered restaurants to reduce operating capacity to 50% from 75%, effective Friday, June 26. Texas Governor Abbott stated that “it is clear that the rise in cases is largely driven by certain types of activities, including Texans congregating in bars.” In Illinois, museums, zoos, and bowling alleys re-opened on Friday, June 26, along with indoor dining at restaurants. Governor Pritzker warned that any region could be moved “back to an earlier phase” if it experiences a surge. New Jersey Governor Murphy expressed his belief that schools in the state will hold in-person instruction in the fall.

Approximately 749, or 1.1% of the 67,642 tests conducted in New York on June 23 were positive for COVID-19. Five regions entered phase four of re-opening on Friday, June 26, including Central New York, Finger Lakes, Mohawk Valley, North Country, and Southern Tier. New York City is on track to enter phase three of re-opening on Monday, July 6. Mayor de Blasio expects an additional 50,000 residents to return to work in phase three, across the restaurant and personal industry. New York City has yet to decide whether public schools will re-open in September, but Mayor de Blasio noted that schools may operate on a staggered class schedule, with groups of students alternating between remote learning and in-person instruction.

## Presidential updates

- [White House Coronavirus Task Force Holds Press Conference](#), July 26
  - The White House coronavirus task force held a press conference for the first time in two months.
  - Vice President Pence noted that the majority of new COVID-19 cases are in individuals younger than 35. Pence described this trend as “good news,” because younger Americans are less likely to fall seriously ill.
  - Pence noted that “younger Americans have a particular responsibility to make sure that they’re not carrying the coronavirus into settings where they would expose the most vulnerable.”
  - Dr. Birx detailed rising positive test rates in states across the South, including Arizona, Florida, and Mississippi. Dr. Birx singled out Texas as a state where higher positive test rates indicated a more complicated kind of spread that could not be explained by higher rates of testing. Dr. Birx plans to visit virus hot spots next week for an “on the ground report.”
  - Dr. Fauci asked Americans to continue practicing social distancing and following other public health guidelines as “an individual responsibility to yourself” and as “a societal responsibility” to others.
  - Health Secretary Azar noted that the government is distributing two treatments across the country, including remdesivir, shown to modestly reduce time to recovery, and dexamethasone, a common steroid that has been shown to reduce deaths in some seriously ill patients.
- [Dr. Fauci Comments on Potential “Pool Testing” Strategy for COVID-19](#), July 26
  - In separate remarks, Dr. Fauci stated that the task force is “seriously considering” pool testing patients for COVID-19.
  - Dr. Fauci expressed that the country’s current testing strategy is “not working” because it is failing to identify spread among asymptomatic individuals and young people.
  - Pool testing involves combining several samples into one batch, or “pool,” and testing the pooled sample with one diagnostic test.
  - Pool testing allows a group of people to be tested at the same time, rather than using several separate diagnostic tests. If the test comes back negative, all individuals have been eliminated as a possible source of infection. If the test comes back positive, individuals are each tested separately.
  - Dr. Fauci stated that we need to “find the penetration of infected people in society... and the only way you know that is by casting a broad net.”
  - Earlier this week, Dr. Birx acknowledged that other nations have used successfully pool testing and suggested that such an approach could drastically expand our knowledge of how and where the virus is spreading.

## World Health Organization (WHO)

- [COVID-19 Situation Report – 158](#), June 25
  - ACT Accelerator, a public-private partnership that includes WHO, [announced](#) that it needs \$27.6 billion over the next year to accelerate the production of a vaccine. WHO stated that “if we spend billions now, we will avoid having to spend trillions later.”

- Europe continues to report close to 20,000 new COVID-19 cases and over 700 new deaths daily. Last week, Europe saw an increase in weekly cases for the first time in several months. WHO Europe [addressed](#) the role of technology and artificial intelligence to support contact tracing and provide public health updates.
- WHO [created](#) an inventory tool for health care facilities to assess biomedical equipment re-allocation, procurement, and planning for COVID-19 case management.
- WHO [declared](#) the end of the Ebola outbreak in the Democratic Republic of the Congo after nearly two years. WHO Africa is now building on the Ebola response to combat COVID-19.

## **U.S. Centers for Disease Control and Prevention (CDC)**

- [\*CDC Expands List of People at Risk for Severe COVID-19\*](#), June 25
  - CDC expanded the [list](#) of people at risk for severe COVID-19.
  - [Risk Related to Age](#): CDC removed the specific age threshold of 65 from its data page and instead warned that risk of severe COVID-19 increases steadily with age. Age is an independent risk factor for severe illness. Risk in older adults is also, in part, related to the increased likelihood that older adults have underlying medical conditions.
  - [Risk Related to Underlying Medical Conditions](#): CDC expanded the list of underlying medical conditions that increase the risk of severe COVID-19 to include: chronic kidney disease; chronic obstructive pulmonary disease (COPD); obesity; an immunocompromised state; type 2 diabetes; sickle cell disease; and serious heart conditions, such as heart failure, coronary artery disease, and cardiomyopathies. This update increases the number of people who fall into higher risk groups. An estimated 60% of American adults have at least one chronic medical condition. The more underlying medical conditions people have, the higher their risk.
  - [Conditions that Might Increase Risk](#): CDC expanded the list of other conditions that might increase a person's risk of severe illness, including asthma, high blood pressure, neurologic conditions such as dementia, cerebrovascular disease such as stroke, and pregnancy.
- [\*Characteristics of Women of Reproductive Age with Laboratory-Confirmed SARS-CoV-2 Infection by Pregnancy Status\*](#), June 26
  - A recent study, published by CDC as an early release, compared data from 326,335 pregnant and non-pregnant women with COVID-19.
  - Symptomatic pregnant and non-pregnant women with COVID-19 reported similar frequencies of cough (>50%) and shortness of breath (30%), but pregnant women less frequently reported headache, muscle aches, fever, chills, and diarrhea.
  - 31.5% of pregnant women were hospitalized, compared with 5.8% of non-pregnant women. Pregnant women were significantly more likely than non-pregnant women to be admitted to the intensive care unit and receive mechanical ventilation. Pregnant women, however, were not at greater risk for death from COVID-19.
  - Researchers concluded that “pregnant women should be made aware of their potential risk for severe illness from COVID-19.” The study recommends that pregnant women limit interactions with other people as much as possible, take precautions to prevent getting COVID-19 when interacting with others, and maintain at least a 30-day supply of medicines.

- [\*CDC Issues Updated COVID-19 Guidance\*](#), June 25
  - CDC updated [data](#) on COVID-19 in racial and ethnic minority groups. CDC noted that “long-standing systemic health and social inequities have put some members of racial and ethnic minority groups at increased risk of getting COVID-19 or experiencing severe illness, regardless of age.”
  - CDC published [suggestions](#) for operating youth and summer camps during the pandemic.
  - CDC issued [guidance](#) on preparing for hurricane season during the pandemic. CDC urged individuals “take more time than usual” to prepare emergency food, water, and medicine supplies. Evacuation kits should include hand sanitizer and two cloth face coverings per person.

### **New York State**

- [\*New York State COVID-19 Updates\*](#), June 25
  - New York reported 17 deaths and 270 COVID-19 patients in intensive care on Thursday, June 25. COVID-19 hospitalizations dropped below 1,000 for the first time since March 18.
  - Approximately 749, or 1.1% of the 67,642 tests conducted in New York on June 23 were positive for COVID-19.
  - Five regions entered phase four of re-opening on Friday, June 26, including Central New York, Finger Lakes, Mohawk Valley, North Country, and Southern Tier.
  - Phase four allows the following activities to resume: low-risk indoor and outdoor arts and entertainment; film and TV production; higher education; and professional sports without fans. State guidance on phase four is available [here](#).

### **New York City**

- [\*City Prepares for Phase Three of Re-Opening\*](#), June 25
  - New York City is on track to enter phase three of re-opening on Monday, July 6.
  - The City [announced](#) plans to re-open recreational amenities and outdoor courts in City parks, including soccer fields and basketball, tennis, volleyball, bocce, and handball courts.
  - Beginning on June 29, Health + Hospitals will [offer](#) free COVID-19 antibody tests at its 11 acute care facilities. Patients will receive test results within 24 hours through an electronic health records system. The City plans to open new COVID-19 testing sites through a partnership with Community Organized Relief Effort (CORE), with a focus on serving vulnerable communities in neighborhoods hardest hit by the virus.
  - NYC Health + Hospitals President Katz stated that “all New Yorkers should get a Covid-19 nasal swab test and an antibody test as this will be critical to providing patients and governments the essential information they need to help the local economies re-open.”
- [\*City Health Department Issues Phase Three Guidance\*](#), June 25
  - New York City Department of Health (NYCDOH) issued guidance for phase three of re-opening on [food services](#), [personal care services](#), and recommendations for [beach operators](#).

## **Other Related Updates**

- [\*Younger People Account for ‘Disturbing’ Number of Rising COVID-19 Cases\*](#), June 26
  - A growing percentage of new COVID-19 cases involve younger people, a trend that has alarmed public health officials and prompted renewed pleas for mask use and social distancing.
  - In Arizona, people ages 20 to 44 account for nearly half of all new cases. In Florida, the median age of residents testing positive for COVID-19 has dropped to 35, down from 65 in March. In Texas, young people now account for the majority of new cases in several urban centers. In King County, Washington, which includes Seattle, people in their 20s and 30s make up about 45% of new cases, up from 25% in March.
  - Experts attribute the trend to the re-opening of bars, restaurants, and offices in many states, and note that people in their 20s and 30s are more likely to go out socializing.
  - Miami Mayor Gimenez noted that many young people are still at high risk of severe COVID-19 if they have underlying conditions.
  - CDC Director Redfield noted that COVID-19 in younger people “may not be highly associated with hospitalization and death” but warned that young people “act as a transmission connector for individuals that could in fact be at a higher risk.”
- [\*Microwave-Generated Steam Decontamination of N95 Respirators Utilizing Universally Accessible Materials\*](#), June 25
  - A study, published in the American Society for Microbiology Journal, sought to identify a way to decontaminate, re-use, and thereby conserve N95 respirator stockpiles, without impairing respirator filtration or user fit.
  - Researchers devised a way to decontaminate N95 respirators using household supplies including glass containers, mesh from produce bags, a rubber band, and a microwave. The microwave-steaming method decontaminates respirators after one 3-minute treatment. The respirators maintained fit and function after 20 decontamination cycles. Metal within the masks did not spark during treatment.
  - Researchers concluded that “this method provides a valuable means of effective decontamination and reuse of N95 respirators by frontline providers facing urgent need.”
- [\*Article on Ensuring Uptake of Vaccines Against SARS-CoV-2\*](#), June 26
  - An article in the New England Journal of Medicine discussed how to ensure a high enough vaccination rate to achieve herd immunity, once a vaccine is developed for COVID-19.
  - The authors developed a policy strategy to ensure vaccine uptake, guided by U.S. experiences with vaccines for the 1976 “swine flu,” H1N1 influenza, smallpox, and human papillomavirus (HPV).
  - The authors suggest six substantive criteria that should be met before a state imposes mandatory COVID-19 vaccination: (1) COVID-19 is not adequately contained in the state; (2) the Advisory Committee on Immunization Practices has recommended vaccination for the groups for which a mandate is being considered; (3) there is a sufficient supply of the vaccine to cover mandated groups; (4) the state has created infrastructure to provide access to vaccination without financial or logistic barriers, compensation to workers who have adverse effects from a required vaccine, and real-

time surveillance of vaccine side effects; (5) available evidence about the safety and efficacy of the vaccine has been transparently communicated; and (6) voluntary uptake of the vaccine among high-priority groups has fallen short of the level required to prevent epidemic spread.

- [Department of Labor COVID-19 Updates](#), June 25
  - Department of Labor (DOL) issued [guidance](#) on paid sick leave and expanded family and medical leave under the Families First Coronavirus Response Act (FFCRA) based on the closure of summer camps, summer enrichment programs, or other summer programs.
  - DOL investigated two businesses, a San Francisco [grocery store](#) and a California Subway [franchisee](#), for failing to provide employees with paid sick leave for employees forced to stay at home to care for children whose school closed due to COVID-19.
  - Occupational Safety and Health Administration (OSHA) and CDC released [joint guidance](#) on COVID-19 for seafood processing industry workers in onshore facilities and aboard vessels offshore.
  
- [Ophthalmologist Indicted for Allegedly Defrauding Paycheck Protection Program](#), June 25
  - A New York ophthalmologist was indicted by Department of Justice (DOJ) for “fraudulently obtaining Government-guaranteed loans” under the Paycheck Protection Program.
  - The ophthalmologist circumvented the single-loan requirement by allegedly submitting two separate applications, with different business names, business identification numbers, and loan amounts, for the same underlying Practice, while disclaiming on each application that he owned any other business.
  - Due to these alleged misrepresentations, the ophthalmologist successfully obtained over \$630,000 in federal funds.
  - DOJ charged the ophthalmologist with six counts of fraud, following an investigation through Federal Bureau of Investigation, Department of Health and Human Services, Office of Inspector General, and Office of the Inspector General of the Small Business Administration.
  
- [FDA COVID-19 Update: Daily Roundup](#), June 25
  - FDA published an [article](#) on the Agency’s partnership with the European Union and its European Medicines Agency to promote the safety, effectiveness, and quality of medical products during the pandemic.
  - FDA updated its [list](#) of emergency use authorizations (EUAs) for ventilators and ventilator accessories to include the AustinP51, a portable emergency-use resuscitator designed to provide either continuous or intermittent support for patients requiring mechanical ventilation through volume control.

Other recent events covered in detail elsewhere:

- [Private Fund Sponsors: Return to Work Considerations](#), June 25
- [SEC Staff Supplements Its COVID-19 Disclosure Guidance](#), June 25
- [COVID-19 FAQs](#), June 23

Send questions to:

- [COVID-19-Implications@ropesgray.com](mailto:COVID-19-Implications@ropesgray.com)
- [COVID-19RecoveryPolicies@ropesgray.com](mailto:COVID-19RecoveryPolicies@ropesgray.com)