



May 1, 2020

COVID-19 Strategic Testing Plan for Oregon

Testing at the Oregon State Public Health Laboratory

Testing is a vital part of Oregon's strategy to contain the spread of COVID-19, protect Oregonians from the virus, preserve hospital capacity and reopen our state's economy. The Oregon Health Authority (OHA) has worked to expand testing capacity in our state, provide guidance to clinicians and prioritize limited testing resources for Oregonians who are most at-risk.

In recent weeks COVID-19 testing has increased to more than 9,000 tests per week in Oregon, with a cumulative total of more than 56,000 tests performed (as of April 28, 2020). The percentage of positive tests has declined from 9 percent at the outset of the pandemic to 4.8 percent, which is lower than most states and indicates that the state's testing guidelines for clinicians have appropriately reflected COVID-19 cases in the state.

Testing availability has increased due to several factors:

1. Fewer individuals are presenting with COVID-19 symptoms due to the Governor's stay-at-home order;
2. More hospitals and commercial laboratories are performing COVID-19 testing;
3. The Oregon State Public Health Laboratory (OSPHL) is adding groups of people it can test for COVID-19;
4. There are more types of testing available for COVID-19.

Oregon's plan to expand and deploy COVID-19 testing to reopen Oregon

Modeling suggests that physical distancing has prevented more than 70,000 COVID-19 infections in Oregon and 1,500 hospitalizations. As we move forward to safely reopen Oregon in phases, testing will be a cornerstone of the state's effort to suppress and mitigate COVID-19 in our state. Oregon health officials want to expand testing across the state to:

- Support contact tracing to contain the spread of the virus and prevent new infections.
- Track the movement of the virus in the state and identify hotspots of infection, so the state and local officials can assess the need for additional interventions to suppress and mitigate the spread of COVID-19.
- Intervene to interrupt severe COVID-19 outbreaks of the virus in high-risk groups, like people who live in group care settings (e.g. long-term care facilities).

This document presents the goals of Oregon’s testing strategy and the steps we will take now to do more and more COVID-19 tests in Oregon.

Goal #1: Test more people living in Oregon for COVID-19 based on new testing guidelines.

On May 1, the Oregon Health Authority (OHA) changed its [clinical testing guidelines](#) for medical providers so more people with symptoms can be tested. It is recommended that Medical providers test for COVID-19 in people *with symptoms consistent with COVID-19* with a priority on testing people in the following groups:

- **Workers who provide direct care or service** including those who provide service in more than one group facility or who take care of patients in homes (e.g. hospice care workers, physical or occupational therapists, in-home personal care workers)
- **Residents, staff, children, or other people in a care facility or group living setting** (e.g., healthcare facility, residential care facility, school, migrant or seasonal farm worker camp, child care, or corrections).
- **Essential front-line service workers who have regular contact with large numbers of people** (e.g., those working in grocery stores, pharmacies, food service, transportation, delivery, and other critical infrastructure services)
- **Patients 60 years of age or older**
- **Patients with underlying medical conditions**, including, but not limited to hypertension, diabetes, cardiovascular disease, lung disease, and immunocompromising conditions
- **People who identify** as Black, African American, Latino, Latina, Latinx, Hispanic, American Indian/Alaska Native, Pacific Islander or as having a disability; data shows us that people in these communities are at higher risk for COVID-19 and related health problems because of longstanding social and health inequities.
- **People from linguistically diverse populations** due to longstanding social and health inequities
- **Pregnant women**
- **Patients whose condition requires hospitalization**
- **Patients who had contact with a suspect or lab-confirmed COVID-19 patient** within 14 days of their symptom onset

Symptoms consistent with COVID-19 are:

Cough **or** shortness of breath **or** difficulty breathing
or

At least two of the following symptoms: fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell

The [clinical testing guidelines](#) also allow more testing for people *without symptoms* who live in or are employees, children, or other people in a care facility or group living setting (e.g. healthcare facility, residential care facility, school, child care, or corrections); such people may be considered for testing when clinical laboratories have sufficient testing capacity.

Public health workers called contact tracers will help people who have symptoms and have been in close contact with someone who has tested positive for COVID-19 get tested if they need.

Also, the Oregon State Public Health Laboratory (OSPHL) will now process tests for people in the following groups:

- All people who live in or are employees, children, or other people in a care facility or group living setting (e.g. healthcare facility, residential care facility, school, childcare, or corrections). Before these new testing guidelines, only 1–5 people in a facility could be tested. As tests are available, people *without symptoms* in this group may also be tested. Knowing test results from people in these group settings could help us better study COVID-19 and understand how the virus moves from person-to-person in high-risk groups and makes them ill.
- Workers with symptoms who provide direct care or service in more than one group facilities or who take care of people in homes (e.g. hospice care workers, physical or occupational therapists, in-home personal care workers).

GOAL #2: Use all available resources in Oregon so that more people are tested for COVID-19.

We will make sure to find and use all resources that Oregon has available for testing by taking the following actions:

- Find and set-up a way to keep a supply of tests that meet Oregon’s need for COVID-19 now and in the future.
- Test people for COVID-19 who need it and make sure they receive test results in 48-72 hours.
- Support all regions of the state to be able to do COVID-19 testing, especially regions of the state that are not able to meet the demand for testing in their community now.

In order to take the actions listed above throughout Oregon, we will:

- Create and support delivery services (couriers) to get tests to the laboratory for all regions of the state that need this help with testing;
- Work with commercial laboratories and with large health systems for more testing; and
- Support more testing in regions in Oregon that need the most help, including rural and frontier areas of the state. More support for testing will happen using these types of tests: Cepheid, Abbott ID NOW and BioFire COVID-19.

Number of tests needed

Oregon Health Authority estimates that 15,000 COVID-19 tests are needed statewide per week at this time. This includes the number of tests we need for testing people in Oregon communities or cases (12,250 tests per week). We also need tests (2,500 tests per week) in clinical and group care settings and to follow COVID-19 outbreaks and study the movement of the disease.

We know how many tests are needed because:

- As we study the virus using modeling projections, we know that Oregon could have about 2,800 people with the virus currently, including unknown and untested people (cases).
- The modeling projections assume that people are infectious for eight days. If we assume a steady number of people with the virus (cases) per day, then that is 350 new people with the virus (cases) in Oregon per day.
- As new people test positive for COVID-19, public health workers will conduct contact tracing. Contact tracing means finding, tracking and helping all the people who come into contact with someone who has tested positive for COVID-19 get tested if they need and learn how to isolate and quarantine to stop the spread of the virus.
- Using a high estimate that five of the identified contacts will have symptoms or will fall into another risk category that would indicate the need for immediate testing would require 1,750 tests per day, or 12,250 tests per week, for a rate of 29 per 10,000 Oregonians.

The number of needed weekly tests will increase as community mitigation measures are eased and more people are identified as contacts of cases with symptoms consistent with COVID-19.

Oregon Health Authority (OHA) will work with local and tribal public health on aggressive identification of people with the disease (cases) and people exposed to those testing positive (contacts) plus support for isolation and quarantine of people as needed. These actions should keep the spread of the virus down (with a goal of keeping the viral reproduction number $R_0 < 1$) and “bend the curve” in Oregon.

Testing supplies

Supplies that the State of Oregon has received from the federal government, Department of Health and Human Services or from other sources will be given to Oregon counties. Testing (specimen collection) supplies will be given and delivered to counties using the same framework as PPE (personal protective equipment) distribution. A portion of testing and PPE supplies will be kept in state reserves for state missions (e.g., outbreaks in state facilities). Any additional Cepheid, Abbott ID NOW and BioFire (starting in June 2020) tests that the state is able to obtain will be given to laboratories with testing instruments already in-house. OHA will prioritize counties with the lowest testing rates, highest case numbers without testing available in their counties, or counties that have other barriers to testing in a timely manner.

Collecting a test sample (specimen collection)

The following individuals will do specimen collection:

- Any clinical provider
- Local public health authorities, including active surveillance response staff
- All Federally Qualified Health Centers (FQHCs)
- Emergency Medical Services
- Self-collection when needed, such as for outbreak investigations and group care facilities

Testing strategy by COVID-19 region

For each COVID-19 region below, note that current weekly testing rates below are averaged over the most recent four weeks with complete reporting as of April 23, 2020, and the laboratories listed as currently testing are as of April 24, 2020, with new laboratories bringing on COVID-19 testing every week in Oregon. More laboratories have been identified that could begin COVID-19 testing when they are able to receive needed testing supplies.

Region 1: Clatsop, Columbia, Tillamook, Washington, Multnomah, Clackamas

- Current average weekly testing rate: 22.5 tests per 10,000 people
- Laboratories currently testing: Kaiser, Providence, Legacy, OHSU; Portland VA Medical Center, Adventist and GoHealth (Abbott ID NOW)
- Region-specific considerations include ensuring testing supplies are maintained with increased volume demand.

Region 2: Yamhill, Polk, Lincoln, Benton, Marion, Linn

- Current average weekly testing rate: 18.8 tests per 10,000 people
- Laboratories currently testing: Providence, Legacy, WVT Laboratory
- Region can send tests that cannot be run locally to other health systems and commercial laboratories as needed. Priorities for the region will include developing additional testing capacity within health systems.

Region 3: Lane, Douglas, Coos, Curry

- Current average weekly testing rate: 10.4 tests per 10,000 people
- Laboratories currently testing: McKenzie-Willamette, Curry General (Abbott ID NOW)
- Region can send tests that cannot be run locally to other health systems and commercial laboratories. Priorities include developing additional testing capacity within health systems and supporting the use of point-of-care instruments in geographically isolated areas.

Region 5: Jackson, Josephine

- Current average weekly testing rate: 30.4 tests per 10,000 people
- Laboratories currently testing: Asante, Providence
- Region likely has sufficient capacity to manage its own testing.

Region 6: Hood River, Wasco, Sherman, Gilliam

- Current average testing rate: 30.8 tests per 10,000 people
- Laboratories currently testing: Providence
- Region likely has sufficient capacity to manage its own testing. Priorities include supporting the use of point-of-care instruments in geographically isolated areas.

Region 7: Jefferson, Deschutes, Crook, Wheeler, Grant, Klamath, Lake, Harney

- Current average weekly testing rate: 21.2 tests per 10,000 people
- Laboratories currently testing: St. Charles, Lake District Health (Abbott ID NOW)

- Region likely has sufficient capacity to manage its own testing in most areas. Priorities include developing additional testing capacity within health systems and supporting the use of point-of-care instruments in geographically isolated areas.

Region 9: Morrow, Umatilla, Union, Wallowa, Baker, Malheur

- Current average weekly testing rate: 11.9 tests per 10,000 people
- Laboratories currently testing: Interpath, Pioneer Memorial (Abbott ID NOW)
- Region can send tests that cannot be run locally to other health systems and commercial laboratories, and can be better supported with point-of-care instruments.

In addition to the regional strategies listed above, the State of Oregon will explore the development of mobile testing sites to bring testing services into worksites and other settings where a number of individuals may be in closer contact and thus at higher risk for COVID-19.

Additional testing at health system laboratories

The State of Oregon will assess existing hospital-to-hospital relationships within each COVID-19 region to build on existing agreements already in place for patient care. The State of Oregon will also work with hospitals to develop additional courier relationships between hospitals for COVID-19 laboratory testing if needed. Lastly, the Oregon Health Authority currently has contracts for surge testing with LabCorp and Quest and can utilize these contracts for testing people without symptoms and other testing as needed.

The new testing workflow will include the following steps:

- a) Clinics, hospitals, emergency medical services, long-term care facilities and other group care settings that do not already have reliable laboratory testing arrangements will collect specimens.
- b) Medical providers will continue to identify which specimens meet current criteria for testing at the Oregon State Public Health Laboratory (OSPHL) (e.g., staff at a long-term care facility) versus those that can be tested at any available laboratory (e.g., a mildly symptomatic person not requiring inpatient care).
- c) Daily courier services will pick up specimens at the clinic, hospital, emergency medical service provider, long-term care facility or other group care setting.
- d) Daily courier services will deliver OSPHL specimens to OSPHL for testing.
- e) Daily courier services will deliver specimens for testing at other laboratories to those laboratories directly.
- f) Testing capacity will be monitored through a daily dashboard and reported to OHA leadership so resources and actions can be revised quickly as needed.

Surveillance testing to study COVID-19

OSPHL will test up to 200 surveillance specimens from ILINet statewide per week; 100 will be from patients presenting with influenza-like illness (ILI) or COVID-19-like illness (CLI) and 100 specimens will be from asymptomatic patients presenting for other healthcare needs. Specimens will come from 14 facilities across the state with geographic representation. OSPHL surveillance testing allows for this work to build upon existing surveillance capacity.

Testing to study the spread of COVID-19 will be supported by plan explained above.

After initial launch, Oregon Health Authority will determine whether additional surveillance testing is needed, and if so, will explore the use of commercial laboratory contracts to perform additional testing.

You can get this document free of charge in other languages, large print, braille or a format you prefer. Contact Mavel Morales at 1-844-882-7889, 711 TTY or OHA.ADAModifications@dhsoha.state.or.us.