

BRIEF19

A daily review of covid-19 research and policy.

POLICY BRIEFING

CDC changes mask guidelines for the vaccinated. What can you do? Everything.

The US Centers for Disease Control and Prevention has announced that fully vaccinated individuals without major health risks such as substantially compromised immune systems can stop wearing masks both outdoors and indoors

A new [infographic](#) makes it all pretty clear. If you are vaccinated, you can do basically anything you could do before the covid-19 pandemic. For unvaccinated people, a three-color scheme remains in effect. The safest activities (“green”) include outdoor exercise and small outdoor gatherings where everyone else is vaccinated. Less safe (“yellow”) activities include dining outdoors with friends from multiple households. The least safe (“red”) includes attending a crowded outdoor event like a parade, live performance, or a sports event. For yellow and red-labeled activities, masks and 6 feet of distance remain recommended. All indoor activities with others remain yellow and red designations for the unvaccinated. Meanwhile all indoor activities for vaccinated persons are green, including singing in a chorus, attending movie theaters, and indoor dining.

These recommendations will certainly lead to increased infections. But the CDC’s read of the data is that vaccinated people won’t be hospitalized or die from these infections. Also, while there is no clinical evidence of this yet, more reports have come out showing that vaccinated persons who have become infected with SARS-CoV-2, are harboring very low amounts of viral genetic material in their noses, implying that contagion among breakthrough cases is unlikely.

Barring variants and assuming vaccinations continue to rise, the covid-19 pandemic in the United States may be coming to end soon. [14 May 2021](#).

—Jeremy Samuel Faust, MD MS

Herd immunity seen as less likely. US seeks more modest goals for pandemic management.

Slowing vaccine rates have been a growing concern in the United States, as the combination of an [effective](#) vaccination distribution campaign, difficulty reaching unvaccinated populations, and outright [resistance](#) have left supply outpacing demand for the first time. In the early stages of the vaccine rollout, the desired goal was reaching “herd immunity.” In other words, the percentage of vaccinated population (or those with strong antibodies from prior infections) that would leave the virus without a sufficient number of new hosts who could spread the virus to the remaining unvaccinated citizens. But now, given the slowed rates in dose delivery, many experts are starting to [expect](#) SARS-CoV-2 to become a recurrent, though hopefully manageable disease.

The degree of global vaccination, continued preventive strategies and the virus’ underlying mutability will all contribute to future planning for a post-pandemic world. While herd immunity has provided a national goal, viral transmission is local, and widely disparate rates of immunization will play a large role in whether a herd immunity-like effect will be achievable. Other factors, like the interconnectedness or seclusion of different populations will have an impact too. Further, some new variants have been found to be more [transmissible](#) and other emerging variants may be less vulnerable to our vaccine-induced antibodies. If such variants appear widely, higher immunity targets will be needed to provide herd-like protection.

With such uncertainty, health leaders have started planning for scenarios involving a prolonged coronavirus presence. Current efforts, like the focusing of vaccination on the most vulnerable and continuing to combat vaccine hesitancy, have led to a significant decline in hospitalizations and deaths and will likely remain a mainstay of future directives. New booster shots may also eventually be needed to address developing variants.

But the nightmare situation, and the reason why vaccination will remain a cornerstone of prevention, is the potential for the virus to evolve beyond vaccine coverage, resulting in a renewed

pandemic. Avoiding this outcome is the goal. A continued push for rapid and widespread vaccine acceptance is the best strategy we have. *Various*. [10 May 2021](#). —*Brief19 Policy Team*

Renewed push for healthcare provider litigation protection during the pandemic.

One of the unfortunate realities of American society is the propensity for frivolous lawsuits, and it seems a global pandemic was not enough to stop the ever-rising tide of litigation. Last year, in recognition of the extreme conditions facing the healthcare system when the covid-19 pandemic erupted, in regards to limitations in both understanding of the disease and supplies available for treatment, a bipartisan group of representatives [proposed](#) the Coronavirus Provider Protection Act. This bill sought to create safe harbors for lapses in care that occurred during the declared national emergency up until sixty days after its termination. Importantly these lapses applied to situations determined to be due to a lack of adequate resources, inadequate testing ability, workforce shortages or as a result of following established infection control guidelines that would otherwise be considered deviations from the standard of care. Unfortunately, the legislation [never](#) made it out of the House of Representatives.

But with a new Congress comes new opportunities. Representative Luis Correa (D-CA) has [introduced](#) H.R. 3021, the next iteration of the same bill, which has continued to enjoy bipartisan support. During the last cycle, conflict arose between trial lawyers and medical interest groups, so there is still a long way to go before these protections can become a reality. Nevertheless, it is reassuring that the need for such protections remains recognized and is deemed to be important enough for renewed consideration. *Various*. [12 May 2021](#). —*Brief19 Policy Team*

Unemployment benefit restrictions return as many states struggle to fill open jobs.

Following last week's surprisingly disappointing unemployment numbers, several states have taken [steps](#) to reimpose limitations on unemployment benefits that were temporarily removed due to the coronavirus pandemic. Only a few states have announced that they will stop receiving federal aid to provide \$300 in supplemental income weekly to those enrolled in unemployment benefit programs, but many others have already begun requiring beneficiaries to be actively searching for work to receive the benefits. Although details and timing of these changes are varied, they are happening in both red and blue states.

Critics of the recent moves argue that a myriad of problems exposed by the pandemic remain, resulting in fewer workers seeking the jobs that are available. One example they point to is the large number of women who are still responsible for childcare. Many of the high skill positions which were eliminated by the economic downturn still have not returned, leaving those workers torn between waiting for their old careers to come back or accepting new jobs, often with significantly lower wages. Furthermore, employers and staffing companies are concerned that they may not be able to fill a large number of seasonal positions including those at hotels and restaurants before the summer months. *The Associated Press*. [11 May 2021](#). —*Jordan M. Warchol, MD, MPH*

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Brief19 is a daily executive summary of covid-19-related medical research, news, and public policy. It was founded and created by frontline emergency medicine physicians with expertise in medical research critique, health policy, and public policy.