

ROY COOPER • Governor

KODY H. KINSLEY • Secretary

MARK BENTON • Deputy Secretary for Health

SUSAN KANSAGRA • Assistant Secretary for Public Health

Division of Public Health

May 4, 2023

To: North Carolina Healthcare Providers and Laboratories

From: Zack Moore, MD, MPH, State Epidemiologist

Scott Shone, PhD, HCLD(ABB), Director, State Laboratory of Public Health

Re: Reporting of novel coronavirus and COVID-19 infections and deaths

This memo serves to notify providers and laboratories of changes in requirements for reporting cases and deaths of COVID-19 related to the end of the federal Public Health Emergency.

For Laboratories

The legal requirement for laboratories to report positive and negative diagnostic test results for COVID-19 to the North Carolina Division of Public Health will end with the expiration of the federal COVID-19 Public Health Emergency declaration at 11:59pm on May 11th. NC DHHS encourages facilities that have instituted automated reporting to continue to send results. These results will be used for continuing case outreach and linkage to resources and for other public health purposes. Both positive and negative results will continue to be accepted and processed through electronic reporting methods, but only positive results will be imported into our system.

Please reach out to ELR.SupportServices@dhhs.nc.gov with questions or for more information on onboarding for electronic reporting for all communicable diseases for which your facility does testing.

For Physicians

Physicians are required to report novel coronavirus infections and deaths to public health per North Carolina Administrative Code (Rule 10A NCAC 41A .0101). In order to align the end of legal reporting requirements for physicians with those for laboratories, NC DHHS has determined that SARS-CoV-2 will no longer be considered a novel coronavirus for the purpose of public health reporting after the end of the federal Public Health Emergency. This means that physicians will no longer be required to report COVID-19 cases or deaths to state or local public health authorities beginning May 12, 2023. NC DHHS encourages physicians and other clinicians to continue to report outbreaks, clusters, or unusual cases that might require public health investigation or intervention, similar to reporting of outbreaks of other non-reportable conditions such as influenza. NC DHHS also encourages hospital systems and other facilities that have begun working towards sending electronic case reports (eCR) to continue this work; NC DHHS will continue to accept and process these electronic reports for COVID-19 as well as expand support to additional conditions.

Please monitor the CDC website for changes to guidance on isolation, quarantine, masking, or PPE.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF PUBLIC HEALTH



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Changes to Publicly Posted Data

Throughout the pandemic, NCDHHS has developed and strengthened systems that provide us with more timely and complete data to inform public health actions and help communities understand their risk. These include:

- COVID-like illness, influenza-like illness and respiratory syncytial virus (RSV)-like illness and overall acute respiratory illness visits to emergency departments
- o COVID-19 and influenza hospital admissions
- o Death certificate data obtained through the N.C. Database Application for Vital Events
- Wastewater surveillance

As we evolve our response to the more routine nature of COVID-19 going forward, these indicators will continue to be updated and available at https://covid19.ncdhhs.gov/dashboard to help us monitor respiratory illnesses including COVID-19 and adjust our response if needed.

Please contact your local health department or the Communicable Disease Branch epidemiologist on call at 919-733-3419 with any questions.