

Dear Catherine Pendergast,

In accordance with the “Board Member Remote Participation Policy” adopted by the Board on September 7, 2021 and after consultation with you, I am directing that the May 3, 2022 meeting of the Board be conducted virtually through exclusively remote participation pursuant to Section 2(a)(ii) of that policy. In support of this directive, I have determined that, based on the following circumstances, there exists an emergency or urgent issue which, pursuant to the policy, requires the Board to meet by entirely remote methods on May 3, 2022:

1. The Secretary of the U.S. Department of Health and Human Services first proclaimed on January 31, 2020, and most recently renewed on July 20, 2021, the nationwide public health emergency (PHE) due to the continued consequences of the Coronavirus Disease 2019 (COVID-19) pandemic.
(<https://www.phe.gov/emergency/news/healthactions/phe/Pages/COVID-19July2021.aspx>)
2. The Commissioner of the Maine Department of Health and Human Services declared on July 1, 2021 a health emergency due to the continued consequences of the COVID-19 pandemic, which shall remain in effect through the duration of the PHE declared by the Secretary of the U.S. Department of Health and Human Services.
(<https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/Public%20Health%20Emergency%20Declaration%206-30-21.pdf>)
3. The acting Secretary of the U.S. Department of Health and Human Services wrote a letter to all Governors on January 22, 2021 stating, “To assure you of our commitment to the ongoing response, we have determined that the PHE will likely remain in place for the entirety of 2021, and when a decision is made to terminate the declaration or let it expire, HHS will provide states with 60 days' notice prior to its termination.”
(<https://ccf.georgetown.edu/wp-content/uploads/2021/01/Public-Health-Emergency-Message-to-Governors.pdf>)
4. Efforts to combat the pandemic continue in Maine where, as of April 26, 2022, 242,033 residents have been infected (175,297 confirmed and 66,736 probable), 4,668 residents have been hospitalized with the virus, and 2,280 people have died from the virus since January 2020. (<https://www.maine.gov/dhhs/mecdc/infectious-disease/epi/airborne/coronavirus/data.shtml>)
5. As of April 26, 2022, the number of new COVID-19 infections in the State of Maine as confirmed by testing brings the seven-day average of new cases in the State to 398.85; the number of new cases (confirmed and probable) statewide is 2,792; the number of current hospitalizations is 130 (with 25 in critical care); the number of validated vaccine breakthrough cases is 79,253; the total number of deaths is 2,280.
(<https://www.maine.gov/dhhs/mecdc/infectious-disease/epi/airborne/coronavirus/data.shtml>)
6. The new infections in the United States and the State of Maine involve the Delta variant, a highly contagious SARS-CoV-2 virus strain, which was first identified in India in

December 2020. The Delta variant has increased transmission, increased risk of hospitalization and fatality, decreased susceptibility to therapeutic agents, and has evaded natural or vaccine-induced immunity. The Omicron variant is a variant of SARS-CoV-2, the virus that causes COVID-19. It was first reported to the WHO from South Africa on November 24, 2021. On November 26, 2021, the WHO designated it as a variant of concern and named it Omicron. As of April 26, 2022, the Delta variant represents 0 percent, and the Omicron variant represents 100 percent of all sequenced samples collected in Maine.

7. Also, as a result of the Delta variant and the increase in COVID-19 infections, the United States Centers for Disease Control and Prevention announced on July 28, 2021 that even fully vaccinated individuals should wear masks in indoor public settings in parts of the country that are experiencing a substantial or high transmission of COVID-19. The Maine Center for Disease Control and Prevention has also announced a similar policy. (<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated-guidance.html>) (<https://www.maine.gov/governor/mills/news/state-maine-follows-updated-us-cdc-recommendations-face-coverings-indoor-public-settings-2021>)
8. As of April 26, 2022, 14 of Maine's counties are now in the “low”, 1 county (Franklin) is in the “medium” and 1 county (Aroostook) is in the “high” transmission category as defined by the U.S. Centers for Disease Control and Prevention. The U.S. C.D.C. recommends that people in 16 Maine counties with “substantial” or “high” transmission wear face coverings in public indoor settings. (<https://covid.cdc.gov/covid-data-tracker/#county-view>)
9. An in-person meeting of the Board is foreseeably likely to result in individuals who may reside in counties with “substantial” or “high” transmission, or otherwise be at higher risk of exposure to the COVID-19 virus, including members of the Board, its staff, licensees, and members of the public, gathering indoors.
10. Conducting an in-person Board meeting on May 3, 2022 is not practicable due to the widespread rise in COVID-19 infections and the potential exposure to the COVID-19 virus to Board members and to members of the public. Therefore, after consultation with you, I have determined that there is an emergency such that the May 3, 2022 Board meeting shall be held entirely remotely as the best way to protect the safety and wellbeing of the members of the Board, its staff, licensees, and members of the public.

There will be no physical location where members of the public may attend this meeting. The Board will continue to provide members of the public a meaningful opportunity to attend the meeting remotely via Zoom as it has successfully done since April of 2020. Please post this determination to the Board website and update the agenda to include the Zoom information as soon as possible.

Wendyann Boston
Wendyann Boston, Chair