



February 16, 2022

Health Care Partners,

During the Omicron variant surge, the Department of State Health Services (DSHS) authorized 5,470 health care surge staff to assist facilities with the burden associated with caring for COVID-19 patients. The sharp increase in hospitalizations due to the Omicron variant stretched every region of our state. Thankfully Texas is now on the downward slope of this surge.

In the past weeks, data reveals a precipitous drop in the impact of COVID-19 on Texas. In the last month, the molecular positivity rate has dropped from a seven-day average of more than 34 percent to a seven-day average of about 12 percent. A month ago, the seven-day average of daily confirmed cases was 50,000. This week, the seven-day average is 8,100.

Most importantly, since January 26, 2022, all areas of the state have experienced continual decline in the COVID-19 patient census. The average statewide reduction is just over 300 COVID-19 patients per day, with a current statewide census of 6,914.

If hospitalizations continue to decline at this rate, DSHS projects that COVID-19 hospitalizations will be about 3,000 by the end of the month. For this reason, DSHS is notifying you of its intent to begin an incremental process toward demobilizing state-supported staff. As with previous surges, DSHS will use a phased demobilization approach.

The DSHS timeline for demobilization will be as follows:

- **February 22, 2022:** No additional surge staff will be brought into the state; no more medical surge staffing requests (STARs) will be filled.



- **February 28, 2022:** Backfilling surge staff will discontinue. If a facility releases assigned surge staff, those staff will be fully demobilized and not assigned to another facility.
- **March 7, 2022:** Active demobilization will begin. Staff will demobilize at 25% percent per week until demobilization is complete.
- **By April 2022:** Demobilization is expected to be complete.

DSHS will continue to rely on our Hospital Preparedness Program (HPP) Providers to allocate staff across their regions addressing needs throughout the demobilization process. As with previous demobilizations, DSHS will be flexible within this timeline, particularly if certain areas are experiencing slower or stalled decline in COVID-19 patients. It should be noted, however, that every region of the state is experiencing consistent and sustained declines.

It is expected that by the time active demobilization begins in March, the state's COVID-19 hospitalizations will be less than 3,000. This trajectory is comparable to the two most recent waves, in which active demobilization began at 4,712 and 3,333 COVID-19 hospitalizations.

If the situation changes, or a specific hospital/region has an emergent need, DSHS will adjust the demobilization process accordingly. DSHS understands that facilities have been under tremendous, continual strain throughout the pandemic. As always, it is our intention to be a good partner in the demobilization effort.

Thank you all for everything you do to take care of Texans affected by COVID-19.

Sincerely,

A handwritten signature in black ink, appearing to read "Kirk Cole", written over a white background.

Kirk Cole

Deputy Commissioner