On February 25, 2022, the U.S. Centers for Disease Control and Prevention (CDC) released new COVID-19 Community Levels and associated recommendations for COVID-19 prevention measures. This framework provides a better tool to demonstrate the risk COVID-19 poses to communities and to focus recommendations on minimizing severe illness, limiting strain on the healthcare system, and enabling those at highest risk to protect themselves against infection and severe illness.

MDH and MSDE support the use of the CDC’s new COVID-19 Community Levels and associated recommendations to inform decision making about the use of layered prevention strategies to decrease the risk of COVID-19 transmission in schools and child care programs. As directed by the governing authority of a local school system, nonpublic school or child care program’s management, schools and child care programs may choose to align their prevention strategies with these CDC recommendations. We recommend that local school systems, nonpublic schools, and child care programs consult with their local health departments on implementing these CDC recommendations.

Use of Masking
Schools and child care programs should be aware that at all CDC COVID-19 Community Levels, people can choose to wear a mask based on personal preference or informed by personal level of risk, however the CDC recommends universal indoor mask wearing only at the high COVID-19
Community Level. People with COVID-19 symptoms, a positive test, or exposure to someone with COVID-19 should follow CDC guidance for isolation and quarantine and wear a mask regardless of the COVID-19 Community Level.

Effective February 25, 2022, CDC is exercising its enforcement discretion to not require wearing masks on buses or vans operated by public or private school systems, including early care and education/child care programs; however, masks should still be worn in the situations noted above. For more information, please see the CDC’s order.

Case Identification and Contact Tracing in Schools and Child Care
Based on guidance from the CDC and other national public health organizations, universal contact tracing is no longer needed in schools and child care programs. Schools and child care programs may elect to continue contact tracing as resources permit. All schools and child care programs should focus on identifying symptomatic COVID-19 cases by excluding staff and students/children who have symptoms of an infectious illness, including COVID-19 symptoms, and recommending testing for COVID-19 if appropriate.

When universal contact tracing is not being implemented in a school or child care program and a COVID-19 case has been identified in a staff member or a student/child:
- The school or child care program should continue to exclude the staff member or student/child and enforce CDC isolation guidance.
- The staff member with COVID-19 or parents of the student/child with COVID-19 should be instructed to notify their own/their child’s close contacts.
- Schools and child care programs should provide notification of the COVID-19 case to the school or child care community at the cohort level (e.g. classroom level or grade level as appropriate) and encourage self-identification and quarantine for persons who may have been in close contact and are not up to date on COVID-19 vaccinations.

Schools and child care programs must continue to follow existing procedures for reporting communicable diseases (COMAR 10.06.01) and notifying the local health department when a staff member or student/child has tested positive for COVID-19. When an outbreak is identified, schools and child care programs should identify close contacts of all persons with COVID-19 in the school and child care setting through contact tracing and exclude them for quarantine according to CDC guidance. Additional measures to mitigate the outbreak may also need to be implemented, in consultation with the local health department.

Note: The interim guidance provided in this memo supersedes the relevant portions of K-12 School and Child Care COVID-19 Guidance dated October 27, 2021. MDH and MSDE will be updating the October 27, 2021 guidance document as soon as possible.

Questions about the interim guidance contained in this memo may be directed to Rachel Nurse-Baker at rachel.nurse-baker@maryland.gov.