Summer 2025

News from your local Health Department

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5 years CD Report

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Kindergarten Oral Health Assessment (KOHA) Growth Highlights

UPDAT

ROMDE

The KOHA program became law in December 2023. Now, with a full year of implementation complete, the oral health teams are reporting significant, measurable outcomes.

The in-school oral health sealant program has experienced record growth, particularly in response to local challenges related to access to dental care in smaller and more rural communities. Increased demand for schoolbased dental sealant clinics is evident, driven by limited provider availability and persistent unmet needs.

While sealants remain an effective preventive measure for youth and teens, Silver Diamine Fluoride (SDF) can help arrest active decay. Thanks to strong school engagement, attendance at Kindergarten Round-Ups has been high. These events present a valuable opportunity to offer SDF treatment to children with early signs of decay, parents are typically on-site and can provide consent.

Parents are actively enrolling their children in schoolbased dental services, reflecting trust in the program and growing awareness of its benefits. The program has also proven to be an effective referral source, helping close critical gaps in oral health care for children across rural northern Michigan.

Sealant Program Growth Across Sites

- Central Lake: Parent approvals increased from 4 in 2023-24 to 30 in 2024-25.
- Ellsworth: Students receiving sealants rose from 8 to 28.
- Alanson: Services expanded from 22 to 38 students.

KOHA Data from HDNW, GTCHD, BLDHD

- Total # of children screened: 1,807
- # of children referred for dental treatment: 96
- # of children referred for urgent dental care: 54 •

KOHA Data from DHD4

- Total # of children screened: 709
- # of children referred for dental treatment: 62
- # of children referred for urgent dental care: 22





District Health Department No. 4

231-882-4409 www.bldhd.org

Benzie-Leelanau

DISTRICT HEALTH DEPARTMENT

CARING FOR OUR COMMUNITIES

989-356-4507 www.dhd4.org



DEPARTMENT

800-432-4121 www.nwhealth.org

Heat Events and Trends Over Time



Extreme heat events—also known as heat waves—are defined as two or more consecutive days when daily maximum temperatures exceed the 90th percentile, based on historical data. This measure is calculated only from May through September.

Heat waves are a leading cause of weather-related deaths in the U.S., with heat stress contributing to a growing number of fatalities. Populations at higher risk for heatrelated illnesses include:

- Infants and children under 5,
- Adults 65 and older,
- Individuals with chronic illnesses,
- People who are overweight.

Resources for Providers

MiThrive Data Dashboard MDHHS Extreme Heat Ready.Gov/Heat

Ending the HIV Epidemic

More than 1.2 million Americans are currently living with HIV. In Michigan, an estimated 1 in 8 individuals with HIV remain unaware of their status—highlighting the urgent need for early detection and intervention.

Early diagnosis and timely treatment can reduce the risk of HIV transmission by up to 93%.

The national <u>Ending the HIV Epidemic</u> in the U.S. initiative is focused on four key strategies: **Diagnose, Treat, Prevent**, and **Respond**. Its ambitious goal is to reduce HIV infections by 75% in 2025 and 90% by 2030, potentially preventing over 250,000 infections nationwide. As a provider, it is our role to help achieve these outcomes through routine screening, patient education, and linkage to care.



Lead Update: New Blood Lead Testing Requirements

Michigan has updated its requirements for blood lead testing in children to strengthen early detection and intervention.

Who Should Be Tested? Michigan now requires blood lead testing for all children at:

- 12 and 24 months, or by age 6 if not previously tested.
- Age 4 if living in one of 82 MDHHS-designated high-risk areas.
- Any age before 6 if living in a home built before 1978 or with known lead exposure.
- Within 3 months if a provider or parent identifies high risk.

Physicians are responsible for ordering testing. Parents may decline testing by objection.

Resources for Providers

- MDHHS MiLeadSafe
- <u>NIEHS Lead Information</u>
- MDHHS Lead Screening & Follow-Up Guidelines for Physicians (July 2024)



New Michigan Child Passenger Safety Requirements – Effective April 2, 2025

Michigan's updated car seat law aligns with national best practices to better protect children in vehicles:

- Rear-facing until age 2 or seat limits.
- Forward-facing until at least age 5.
- Booster seat until age 8 or 4'9" height.
- Children under 13 must ride in the back seat where available.

These changes reflect AAP guidelines and aim to reduce injuries in crashes—the leading cause of child death. Providers are encouraged to educate families about proper restraint use and offer local resources for car seat safety.

Car Seat Distribution Program for Maternal Infant Health Program (MIHP) Families – Now Through Sept. 30, 2025

As part of a temporary initiative, Medicaid Health Plans (MHPs) are partnering with MIHP providers to distribute infant car seats to eligible families.

Eligibility:

- · Enrolled in MIHP
- · Covered by a Medicaid Health Plan (not Fee-for-Service)
- Temporary Assistance for Needy Families (TANF)-eligible

Eat Safe Fish Guidelines

The Michigan Department of Environment, Great Lakes, and Energy (EGLE) conducts year-round fish contaminant monitoring, collecting samples from sites with known or suspected contamination and popular fishing locations.

Each year, Michigan Department of Health and Human Services requests specific species from selected lakes and rivers. EGLE then measures, weighs, and prepares the fish for testing. Every region of Michigan has their own guidelines, dependent on environmental factors. The guidelines not only identify the safest fish to eat but also offer serving size recommendations and outlines the 'Three Cs' of fishing to help reduce chemical exposure:

- *Choose*: the safest fish to eat, especially if you eat fish often,
- *Clean*: remove the fat, skin and organs, as chemicals often are stored in these areas,
- Cook: grill or broil your fish to help reduce chemical-carrying fat—these methods are also healthier.



Click the image to access the guides

New WIC Income Guidelines (Effective June 1, 2025)

Michigan's WIC program has updated income limits for June 1, 2025 – May 30, 2026. Families may now qualify at slightly higher income thresholds.

Family Size*	Hourly	Weekly	Bi-weekly	Monthly	Annual
1	\$13.91	\$557	\$1,114	\$2,413	\$28,953
2	\$18.81	\$753	\$1,505	\$3,261	\$39,128
3	\$23.70	\$949	\$1,897	\$4,109	\$49,303
4	\$28.59	\$1,144	\$2,288	\$4,957	\$59,478
5	\$33.48	\$1,340	\$2,679	\$5,805	\$69,653
6	\$38.37	\$1,536	\$3,071	\$6,653	\$79,828
7	\$43.27	\$1,731	\$3,462	\$7,501	\$90,003
8	\$48.16	\$1,927	\$3,853	\$8,349	\$100,178
For each addition member add:	onal family	\$196	\$392	\$848	\$10,175

Also eligible regardless of income for families receiving Medicaid, SNAP, or TANF automatically qualify.

Income Includes: wages (including overtime), alimony/child support, retirement/military pay. Documentation may come from recent paystubs, W-2/1040 forms, or month-to-date earnings extrapolated to a full year.

Communicable Disease Trends

As was reported by many local providers and schools in Northern Michigan last year, there was a sharp increase reported in the <u>number of hospitalized</u> <u>children for Mycoplasma pneumoniae-associated Community Acquired</u> <u>Pneumonia (CAP) in 2024 in the US</u>, after a decrease during the pandemic that persisted through 2023. M. pneumoniae CAP accounted for approximately half the cases of hospitalized children with CAP and included children under 5 years of age. Consideration should be given to testing children with CAP as well as judicious use of macrolides if antibiotics are indicated.



Another infection that showed increased activity recently is Parvovirus B19, with many area schools and daycares reporting outbreaks of illness consistent with Parvovirus B19 (Fifth's Disease). <u>The CDC reported</u> data indicating a sustained increase in transmission January -May10, 2025. Although generally a self-limited illness in school age children, it can be confused with other rash illnesses and can cause adverse fetal outcomes in nonimmune pregnant women. Providers should consider testing for immunity to B19 in pregnant women that may be exposed, and the use of additional prevention strategies in susceptible people at risk for complications.





5 Years of Communicable Disease Reports

For

Benzie-Leelanau District Health Department

Counties Include:

Benzie Leelanau

COUDISIANSMonitary seture informational CAUNE 30ForNo.I.No.<	Disease Group	Disease	2021	2022	2023	2024	2025	Total
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VPD VZ Infection, Unspecified 5 1 3 6 0 15 VPD Subtotal 7 5 7 14 6 39 Vectorborne Anaplasmosis 0 0 1 10 9 20 Vectorborne Babesiosis 0 1 1 2 0 4 Vectorborne Dengue Fever 0 0 1 1 2 0 2 Vectorborne Dengue Fever 0 0 1 1 0 2 Vectorborne Malaria 0 0 0 1 10 9 20 Vectorborne Malaria 0 0 0 1 1 0 2 Vectorborne Subtotal 49 33 51 59 19 211 Vectorborne Subtotal 49 33 51 59 19 211 Viral Hepatitis Hepatitis C, Chroni	VPD	Pertussis	0	0	1	5	6	12
VPD Subtotal 7 5 7 14 6 39 Vectorborne Anaplasmosis 0 0 1 10 9 20 Vectorborne Babesiosis 0 1 1 2 0 4 Vectorborne Dengue Fever 0 0 1 1 0 2 Vectorborne Lyme Disease 49 32 47 44 10 182 Vectorborne Malaria 0 0 0 1 0 2 Vectorborne West Nile Virus 0 0 1 0 2 1 1 Vectorborne Subtotal 49 33 51 59 19 211 Vectorborne Bubtotal 49 33 51 59 19 211 Viral Hepatitis Hepatitis C, Chronic 8 6 9 13 1 37	VPD	Shingles	0	0	0	1	0	1
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Vectorborne Babesiosis 0 1 1 2 0 4 Vectorborne Dengue Fever 0 0 1 1 0 2 Vectorborne Lyme Disease 49 32 47 44 10 182 Vectorborne Malaria 0 0 0 2 0 2 Vectorborne West Nile Virus 0 0 1 0 2 1 Vectorborne Subtotal 49 33 51 59 19 211 Vectorborne Hepatitis B, Chronic 0 1 1 1 4 Viral Hepatitis Hepatitis C, Chronic 8 6 9 13 1 37	VPD	Subtotal	7	5	7	14	6	39
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Vectorborne Lyme Disease 49 32 47 44 10 182 Vectorborne Malaria 0 0 0 2 0 2 Vectorborne West Nile Virus 0 0 1 0 0 1 Vectorborne Subtotal 49 33 51 59 19 211 Viral Hepatitis Hepatitis C, Chronic 8 6 9 13 1 37	Vectorborne	Dengue Fever	0	0	1	1	0	2
Vectorborne Malaria 0 0 0 2 0 2 Vectorborne West Nile Virus 0 0 1 0 0 1 Vectorborne Subtotal 49 33 51 59 19 211 Viral Hepatitis Hepatitis C, Chronic 0 1 1 1 4		-						
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Viral Hepatitis Hepatitis C, Chronic 8 6 9 13 1 37								
Viral Hepatitis Subtotal 8 7 10 14 2 41								
	Viral Hepatitis	Subtotal	8	7	10	14	2	41



Dr. Joshua Meyerson serves as the Medical Director for three local health departments in northern Michigan: Health Department of Northwest Michigan, Benzie-Leelanau District Health Department, and District Health Department No. 4.

5 Years of

Communicable Disease Reports

For

District Health Department No. 4

Counties Include:

Alpena Cheboygan Montmorency Presque Isle

Disease Group	Disease	2021	2022	2023	2024	2025	Total
COVID19/MIS	Multisystem Inflammatory Syndrome	1	0	0	0	0	1
COVID19/MIS	Novel Coronavirus COVID-19	8995	5633	1836	1245	333	18042
COVID19/MIS	Subtotal	8996	5633	1836	1245	333	18043
Carbon Monoxide Poisoning	Carbon Monoxide Poisoning	0	0	2	2	0	4
Carbon Monoxide Poisoning	Subtotal	0	0	2	2	0	4
Foodborne	Campylobacter	10	13	6	16	8	53
Foodborne	Cryptosporidiosis	1	8	5	2	1	17
Foodborne	Giardiasis Norovirus	4	4	1	6	0	15 6
Foodborne	Salmonellosis	6	7	9	8	10	40
Foodborne	Shiga toxin-producing Escherichia coli(STEC)	0	0	2	2	2	6
Foodborne	Shigellosis	0	2	0	1	2	5
Foodborne	Yersinia enteritis	2	2	0	0	0	4
Foodborne	Subtotal	24	38	24	36	24	146
Influenza	Flu Like Disease*	0	49	0	41	42	132
Influenza	Influenza	12	277	148	164	277	878
Influenza	Respiratory Syncytial Virus	0	0	0	2	4	6
Influenza	Subtotal	12	326	148	207	323	1016
Meningitis	Meningitis - Aseptic	1	1	1	0	0	3
Meningitis	Meningitis - Bacterial Other	0	0	1	1	1	3
Meningitis	Streptococcus pneumoniae, Inv	1	12	13	9	8	43
Meningitis	Subtotal	2	13	15	10	9	49
Other	Blastomycosis	1	2	3	0	2	8
Other	CPO	3	2	1	2	2	10
Other	Candida auris	0	0	0	1	2	3
Other	Coccidioidomycosis	0	7	6	4	2	19
Other	Encephalitis, Primary	0	0	0	1	0	1
Other	Gastrointestinal Illness	0	0	0	52	12	64
Other	Guillain-Barre Syndrome	0	0	0	1	0	1
Other	Head Lice Histoplasmosis	2	2	5	8	9	2
Other		1	1	1	2	9 1	6
Other	Legionellosis Q. Fever*	0	1	0	0	0	1
Other	Staphylococcus Aureus Infect.*	1	0	0	0	0	1
Other	Strep Throat	0	5	0	0	0	5
Other	Streptococcal Dis, Inv, Grp A	3	0	11	12	5	31
Other	Unusual Outbreak or Occurrence	6	0	6	1	0	13
Other	Subtotal	17	27	33	84	35	196
Rabies	Rabies Animal	0	0	0	1	0	1
Rabies	Rabies: Potential Exposure & PEP	66	66	88	72	40	332
Rabies	Subtotal	66	66	88	73	40	333
STD	Chlamydia (Genital)	131	95	98	72	36	432
STD	Gonorrhea	14	7	5	12	0	38
STD	Syphilis - Early Latent	0	0	0	1	0	1
STD	Syphilis - Primary	0	0	1	0	0	1
STD	Syphilis - Secondary	0	1	0	2	0	3
STD	Syphilis - To Be Determined	0	0	0	0	1	1
STD	Syphilis - Unknown Duration or Late	0	0	2	1	2	5
STD	Subtotal	145	103	106	88	39	481
Tuberculosis	Latent Tuberculosis Infection	1	6	13	11	1	32
Tuberculosis	Nontuberculous Mycobacterium	5	10	6	2	2	25
Tuberculosis Tuberculosis	Tuberculosis Subtotal	7 7	18 18	19 19	14 14	3 3	61 61
VPD	Chickenpox (Varicella)	0	18	19	14	3 0	7
VPD	H. influenzae Disease - Inv.	1	4	3	4	5	17
VPD	Mumps	0	0	0	0	1	1
VPD	Pertussis	0	0	6	0	2	8
VPD	Shingles	1	1	0	1	0	3
VPD	VZ Infection, Unspecified	5	2	3	2	1	13
VPD	Subtotal	7	8	17	8	9	49
Vectorborne	Dengue Fever	0	1	0	0	0	1
Vectorborne	Ehrlichiosis, all types	0	0	0	1	0	1
Vectorborne	Encephalitis, California Serogroup	1	0	0	1	0	2
Vectorborne	Lyme Disease	3	6	12	10	2	33
Vectorborne	Rickettsial Disease - Spotted Fever	1	0	0	0	0	1
Vectorborne	Subtotal	5	7	12	12	2	38
Viral Hepatitis	Hepatitis A	0	0	0	0	1	1
Viral Hepatitis	Hepatitis B, Acute	0	1	0	0	3	4
Viral Hepatitis	Hepatitis B, Chronic	2	4	1	0	2	9
Viral Hepatitis	Hepatitis C, Acute	0	4	0	0	2	6
Viral Hepatitis	Hepatitis C, Chronic	24	17	20	21	12	94



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5 Years of Communicable Disease Reports

For

Health Department of Northwest Michigan

Counties Include:

Antrim Charlevoix Emmet Otsego

Disease Group	Disease	2021	2022	2023	2024	2025	Total
COVID19/MIS	Novel Coronavirus COVID-19	12069	10535	2417	1752	348	27121
COVID19/MIS	Subtotal	12069	10535	2417	1752	348	27121
Carbon Monoxide Poisoning	Carbon Monoxide Poisoning	0	0	6	8	1	15
Carbon Monoxide Poisoning	Subtotal	0	0	6	8	1	15
Foodborne	Campylobacter	16	17	27	27	13	100
Foodborne	Cryptosporidiosis	8	5	4	10	0	27
Foodborne	Giardiasis	13	6	3	15	0	37
Foodborne	Listeriosis	0	0	1	0	0	1
Foodborne	Norovirus	18	24	6	1	0	49
Foodborne	Salmonellosis	8	10	17	12	9	56
Foodborne	Shiga toxin-producing Escherichia coli –(STEC)	4	4	6	4	2	20
Foodborne	Shigellosis	2	0	2	4	0	8
Foodborne	Yersinia enteritis	1	6	0		2	17
Foodborne	Subtotal	70	72	66	81	26	315
Influenza	Flu Like Disease*	3941	8119	6518	5651	2845	27074
Influenza	Influenza	12	307	201	310	254	1084
Influenza		0	0	1	0	254	1084
Influenza	Influenza, Novel	0	0	3	2	13	1
	Respiratory Syncytial Virus						
Influenza	Subtotal	3953	8426	6723	5963	3112	28177
Meningitis	Meningitis - Aseptic	0	1	2	3	0	6
Meningitis	Meningitis - Bacterial Other	0	2	1	2	1	6
Meningitis	Meningococcal Disease	0	0	1	0	0	1
Meningitis	Streptococcus pneumoniae, Inv	7	10	7	7	8	39
Meningitis	Subtotal	7	13	11	12	9	52
Other	Blastomycosis	0	2	1	1	0	4
Other	Brucellosis	0	1	0	0	0	1
Other	CPO	0	1	2	4	2	9
Other	Candida auris	0	0	1	0	1	2
Other	Coccidioidomycosis	2	3	4	1	0	10
Other	Creutzfeldt-Jakob Disease	0	0	1	0	0	1
Other	Cyclosporiasis	1	2	2	0	0	5
Other	Encephalitis, Post Other	1	0	1	0	0	2
Other	Encephalitis, Primary	2	0	0	0	0	2
Other	Gastrointestinal Illness	37	10	133	48	0	228
Other	Guillain-Barre Syndrome	0	0	1	1	0	2
Other	Head Lice	123	101	129	130	41	524
Other	Histoplasmosis	3	2	1	3	0	9
Other	Kawasaki	1	0	0	0	0	1
Other	Legionellosis	1	0	3	2	0	6
Other	Q Fever Acute	0	0	2	0	0	2
Other	Staphylococcus Aureus Infect.*	0	0	0	1	0	1
Other	Strep Throat	115	231	941	639	181	2107
Other	Streptococcal Dis, Inv, Grp A	3	3	12	6	4	28
Other	Streptococcus pneumoniae, Drug Resistant	0	1	0	0	0	1
Other	Trachoma	0	0	1	0	0	1
Other	Unusual Outbreak or Occurrence	0	4	45	14	0	63
Other	Vibriosis - Non Cholera	1	0	0	0	0	1
Other	Subtotal	290	361	1280	850	229	3010
Rabies	Rabies Animal	0	1	1	0	0	2
Rabies	Rabies: Potential Exposure & PEP	47	97	70	83	31	328
Rabies	Subtotal	47	98	71	83	31	330
STD	Chlamydia (Genital)	209	213	184	137	56	799
STD	Gonorrhea	32	17	16	10	5	80
STD	Syphilis - Early Latent	3	1	3	2	2	11
STD	Syphilis - Primary	1	2	2	0	0	5
STD	Syphilis - Secondary	1	0	2	1	1	5
STD	Syphilis - Unknown Duration or Late	1	2	2	7	0	12
STD	Subtotal	247	235	209	157	64	912
Tuberculosis	Latent Tuberculosis Infection	6	10	5	9	9	39
Tuberculosis	Nontuberculous Mycobacterium	8	3	1	3	1	16
Tuberculosis	Tuberculosis	2	0	1	1	0	4
Tuberculosis	Subtotal	16	13	7	13	10	.↓ 59
VPD	Chickenpox (Varicella)	0	2	12	2	2	18
VPD	H. influenzae Disease - Inv.	1	4	3	2	3	13
VPD	Pertussis	0	1	0	17	2	20
VPD	Shingles	8	2	2	1/	2	15
VPD	VZ Infection, Unspecified	9	3	7	2	0	21
VPD	V2 Intection, Unspectified Subtotal	9 18	3 12	24	2	9	21 87
		-					
Vectorborne	Anaplasmosis	0	0	0	0	2	2
Vectorborne	Babesiosis	1	0	0	0	0	1
Vectorborne	Lyme Disease	2	4	32	34	6	78
Vectorborne	Malaria	1	0	0	0	0	1
Vectorborne	Subtotal	4	4	32	34	8	82
Viral Hepatitis	Hepatitis A	0	1	0	0	0	1
Viral Hepatitis	Hepatitis B, Acute	1	2	0	2	0	5
Viral Hepatitis	Hepatitis B, Chronic	4	5	5	1	3	18
	Hepatitis C, Acute	2	1	1	1	0	5
Viral Hepatitis							
Viral Hepatitis	Hepatitis C, Chronic	36	27	29	20	20	132
	Hepatitis C, Chronic Hepatitis E	36 0	27 0	29 0	20	20	132



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