ALABAMA

STATE REPORT | 08.02.2020

SUMMARY

- Alabama is in the red zone for COVID-19 cases, indicating more than 100 new cases per 100,000 population last week, and the red zone for COVID-19 test positivity, indicating a rate above 10%.
- Alabama has seen stability in new cases and a decrease in testing positivity over the past week demonstrating the early impact of the statewide mitigation efforts.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Jefferson County, 2. Mobile County, and 3. Madison County. These counties represent only 30.6 percent of new cases in Alabama and there remains diverse community spread across the state, both in rural and urban areas.
- Alabama had 239 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 38 to support operations activities from FEMA and 1 to support operations activities from USCG.
- Between Jul 25 - Jul 31, on average, 213 patients with confirmed COVID-19 and 193 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Alabama. An average of 89 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Recommend continuing the statewide mask mandate.
- Close establishments where social distancing and mask use cannot occur, such as bars.
- Move to outdoor dining and limit indoor dining to less than 25% of normal capacity.
- Ask citizens to limit ALL social gatherings to fewer than 10 people. Recreating spreading events at bars and large gatherings in homes will lead to continued high cases and result in those with co-morbidities becoming infected.
- Encourage individuals that have participated in large social gatherings, birthday parties, and family gatherings to get tested.
- Continue messaging of the risk of serious disease in all age groups with preexisting medical conditions, including obesity, hypertension, and diabetes mellitus.
- Protect those in nursing homes, assisted living, and long-term care facilities by ensuring access to rapid facility-wide testing in response to a resident or staff member with COVID-19. Ensure social distancing and universal facemask use.
- Continue the scale-up of testing, moving to community-led neighborhood testing. Work with local communities to implement and provide clear guidance for households that test positive, including individual isolation procedures.
- Continue to enhance contact tracing and ensure the ability of cases and contacts to quarantine or isolate safely.
- Monitor testing data to identify additional sites of increased transmission and focus public health resources on zones of transmission.
- Ensure the state public health lab is fully staffed and running 24/7, utilizing all platforms.
- With the potential for schools to reopen in the coming weeks, require all universities with RNA detection platforms to use this equipment to expand surveillance testing and increase capacity for responding to outbreaks for schools (K-12, community colleges) and university students.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

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	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	11,703 (239)	-9.5%	158,298 (237)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	15.5%	-0.9%*	13.6%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	90,027** (1,836)	-11.1%**	1,078,189** (1,611)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	143 (3)	-17.8%	2,494 (4)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	30.9%	-5.3%*	22.5%	12.3%

MOBILITY

* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	26 Top 12 shown (full list below)	Birmingham-Hoover Mobile Huntsville Montgomery Daphne-Fairhope-Foley Tuscaloosa Decatur Florence-Muscle Shoals Auburn-Opelika Anniston-Oxford Gadsden Albertville	1	Jasper
COUNTY LAST WEEK	62 Top 12 shown (full list below)	Jefferson Mobile Madison Baldwin Montgomery Shelby Tuscaloosa Lee Calhoun Etowah Marshall Morgan	5	Walker Marion Tallapoosa Winston Geneva

All Red CBSAs: Birmingham-Hoover, Mobile, Huntsville, Montgomery, Daphne-Fairhope-Foley, Tuscaloosa, Decatur, Florence-Muscle Shoals, Auburn-Opelika, Anniston-Oxford, Gadsden, Albertville, Dothan, Fort Payne, Talladega-Sylacauga, Cullman, Atmore, Columbus, Ozark, Scottsboro, Selma, Enterprise, Alexander City, Eufaula, LaGrange, Troy

All Red Counties: Jefferson, Mobile, Madison, Baldwin, Montgomery, Shelby, Tuscaloosa, Lee, Calhoun, Etowah, Marshall, Morgan, DeKalb, St. Clair, Houston, Talladega, Elmore, Colbert, Cullman, Limestone, Escambia, Russell, Blount, Lauderdale, Chilton, Dale, Covington, Jackson, Autauga, Dallas, Coffee, Franklin, Barbour, Perry, Clarke, Chambers, Pike, Lawrence, Monroe, Washington, Marengo, Crenshaw, Bibb, Randolph, Conecuh, Cherokee, Clay, Wilcox, Lamar, Hale, Butler, Henry, Pickens, Macon, Fayette, Sumter, Lowndes, Cleburne, Choctaw, Bullock, Greene, Coosa

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

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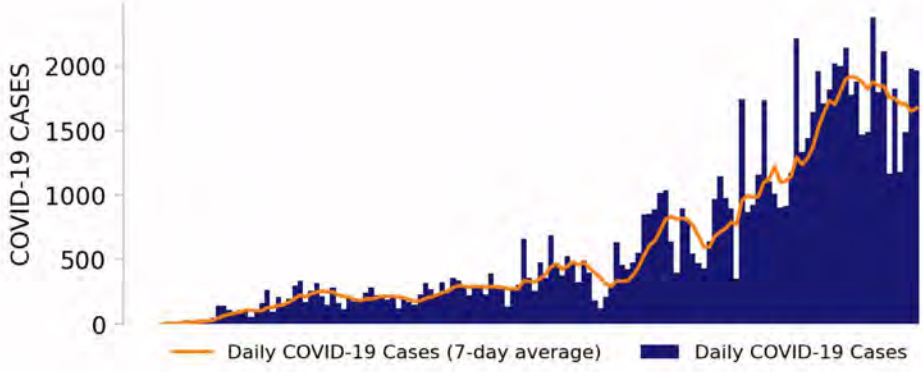
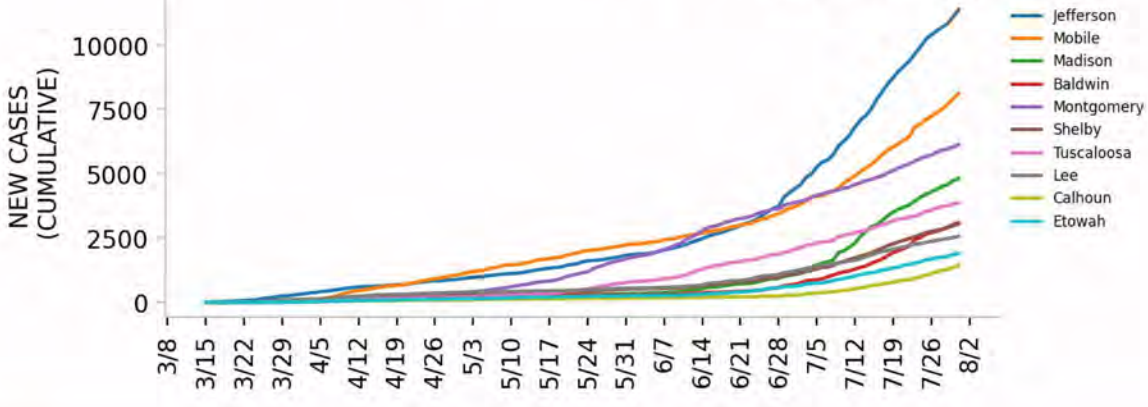
NEW CASES



TESTING

TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

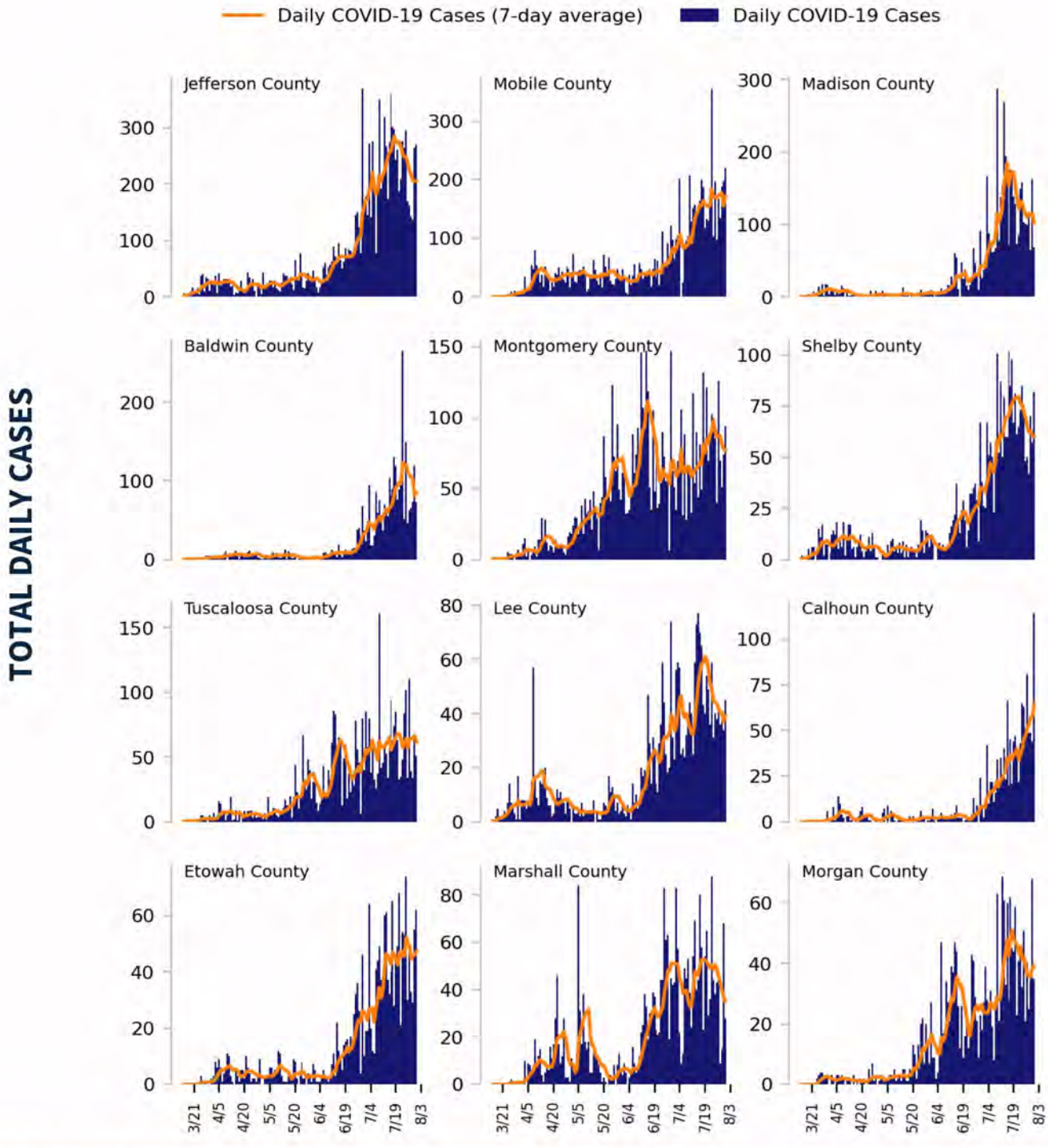


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

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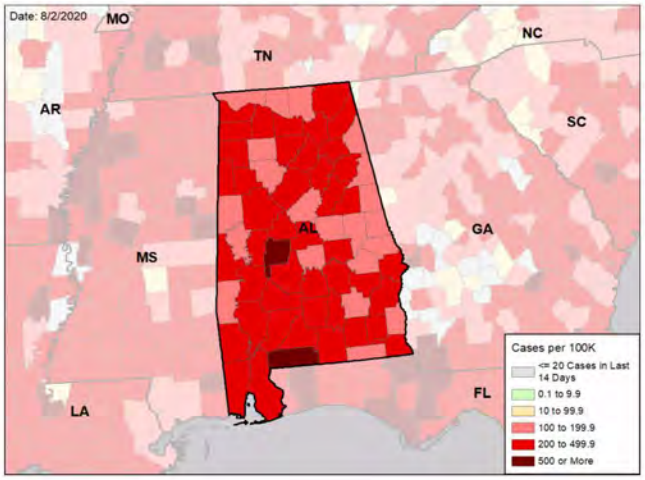
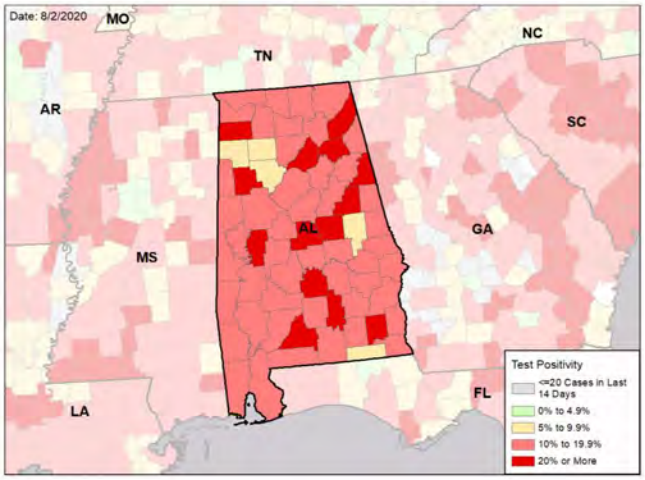
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

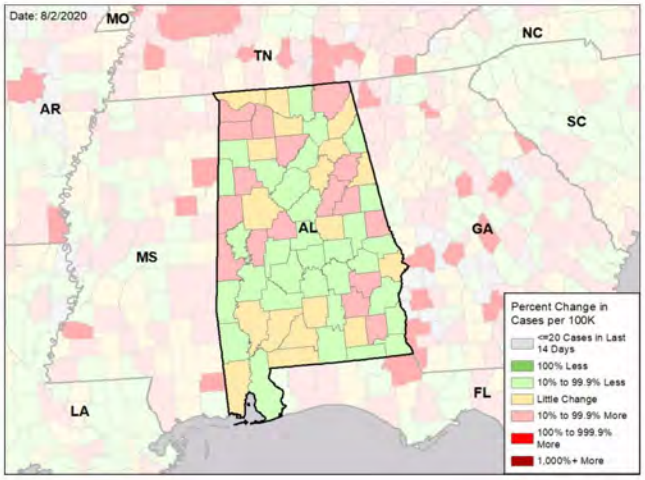
NEW CASES PER 100,000 DURING LAST WEEK



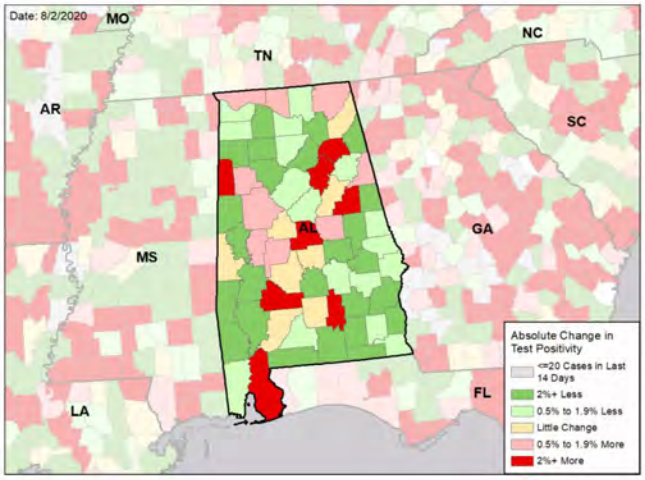
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

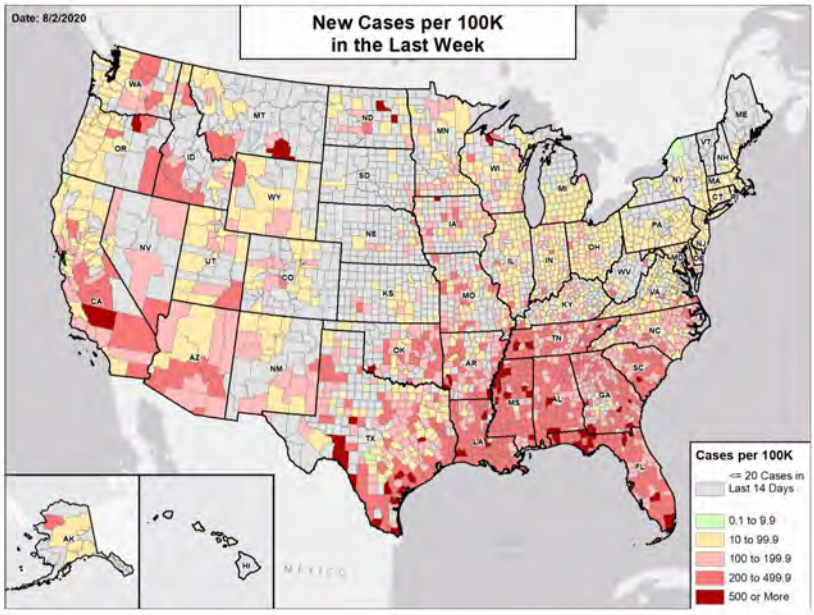


DATA SOURCES

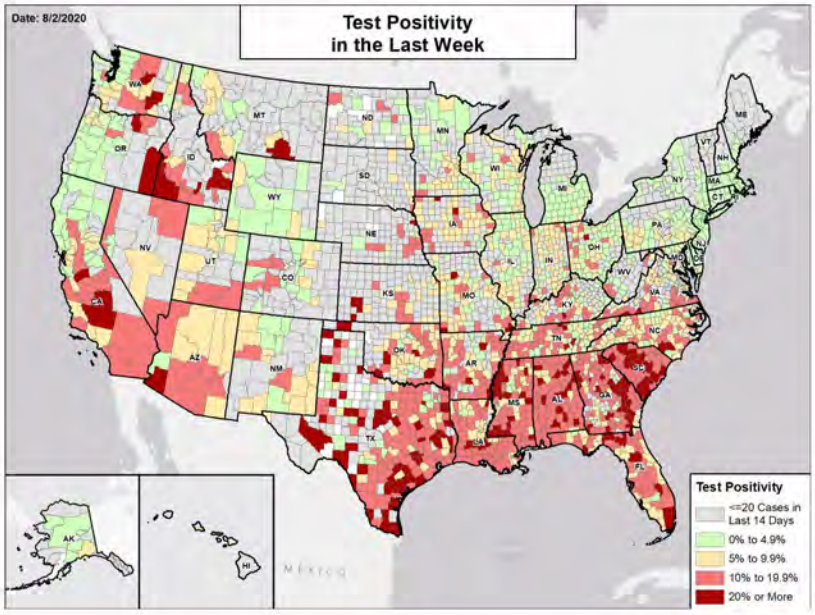
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

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COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

ALASKA

STATE REPORT | 08.02.2020

SUMMARY

- Alaska is in the yellow zone for cases, indicating between 10 to 100 new cases per 100,000 population last week, and the green zone for COVID-19 test positivity, indicating a rate between 5% to 10%.
- Alaska has seen an increase in new cases and stability in testing positivity over the past week.
- The following three boroughs had the highest number of new cases over the past 3 weeks: 1. Anchorage Municipality, 2. Fairbanks North Star Borough, and 3. Matanuska-Susitna Borough. These boroughs represent 79.4 percent of new cases in Alaska.
- Getting on top of a rising epidemic is critically important, given the accelerating epidemic in Fairbanks North Star, Kenai Peninsula, Matanuska-Susitna and especially Anchorage municipality. Maintain and intensify efforts in those boroughs.
- Alaska had 100 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 17 to support operations activities from FEMA; 5 to support testing activities from CDC; and 22 to support operations activities from USCG.
- Between Jul 25 - Jul 31, on average, 4 patients with confirmed COVID-19 and 12 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Alaska. An average of 70 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- The state has been emphasizing the need for social distancing and face masks through press conferences, social media, video, and radio campaigns. Continue to emphasize these messages and the risk of serious disease in the elderly and in all age groups with preexisting medical conditions, including obesity, hypertension, and diabetes mellitus.
- Mandate wearing of cloth face masks outside the home.
- Provide public health messaging and education on the importance of these interventions.
- Monitor implementation of social distancing and wearing of face masks in indoor environments, especially crowded work environments like seafood processing plants; consider fines for non-adherence.
- Alaska is expanding contact tracing capacity and upgrading contact tracing technology. Continue these efforts. If infections surpass the capacity of contact tracers to respond, focus resources in Anchorage and other areas with evidence of outbreaks or increasing transmission; if needed, request federal assistance early.
- Ensure continued availability of testing in all crowded work environments and long-term care facilities; residents should continue to be tested on admission and as clinically warranted. Staff should continue to be tested periodically, especially in areas like Anchorage with increasing community transmission.
- Continue ongoing efforts with the Mass Care Task Force to ensure adequate and safe housing for quarantine and isolation. This is particularly important for indigenous populations and members of multi-generational households.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

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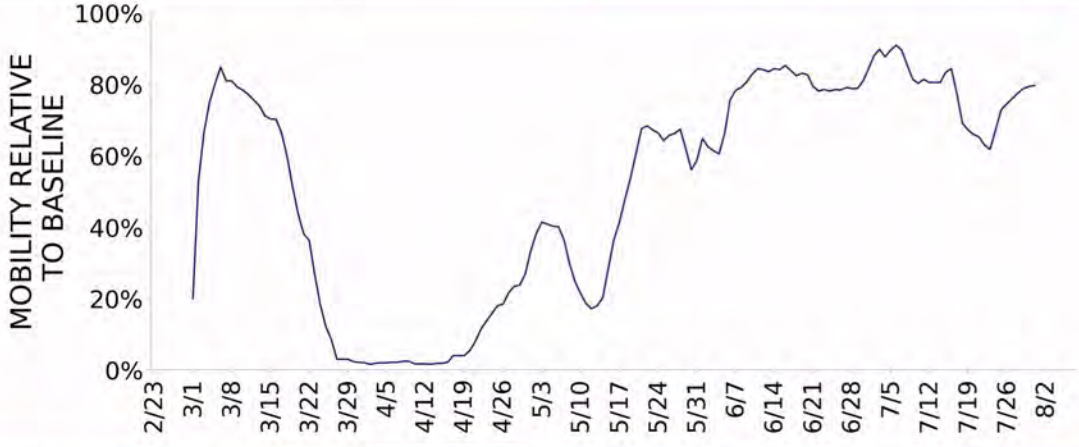
ALASKA

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	733 (100)	+37.5%	11,560 (81)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	4.3%	+0.5%*	7.0%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	31,234** (4,270)	+10.1%**	194,557** (1,356)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	4 (1)	+100.0%	165 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	0.0%	+0.0%*	7.8%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating borough-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a borough; 100% represents the baseline mobility level. Data is anonymized and provided at the borough level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

ALASKA

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COVID-19 BOROUGH AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	1	Anchorage
BOROUGH LAST WEEK	0	N/A	1	Anchorage Municipality

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and boroughs that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and boroughs that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating borough-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
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ALASKA

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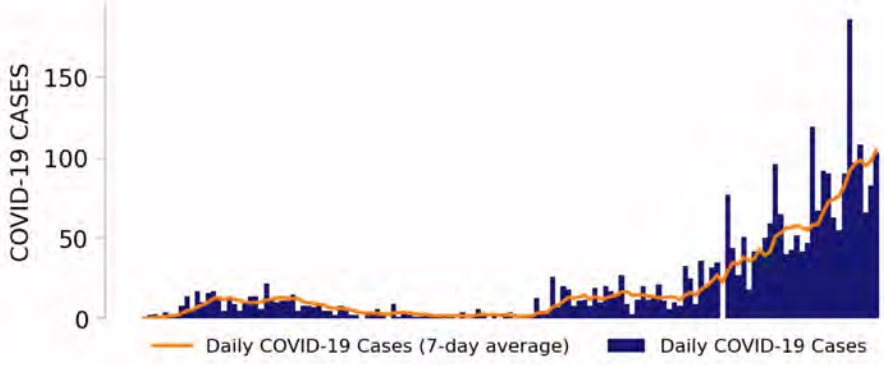
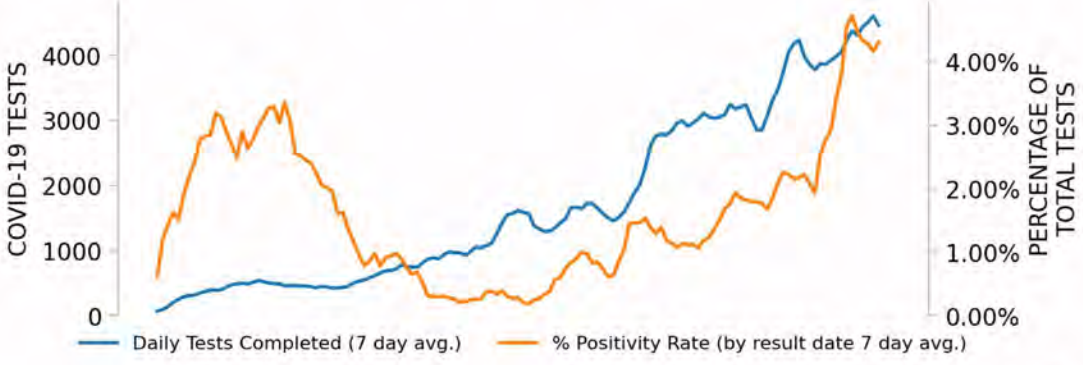
NEW CASES

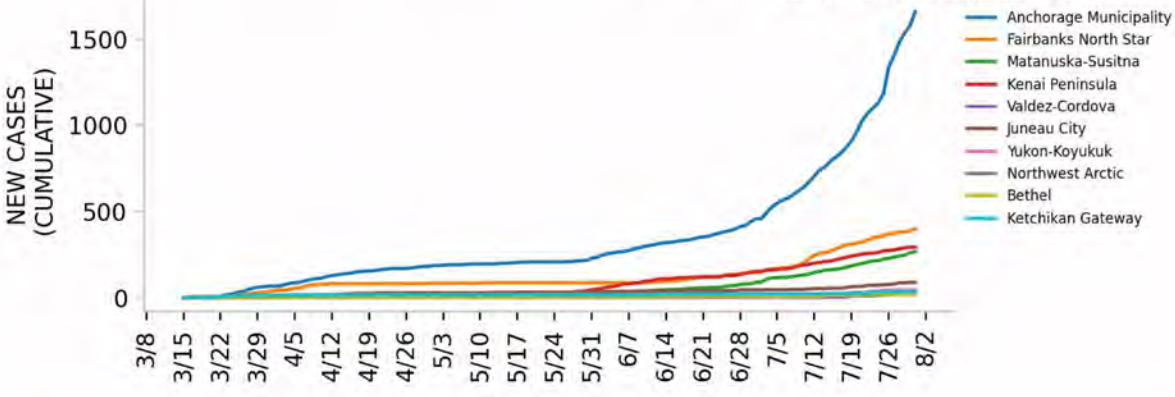


TESTING



TOP BOROUGHS

Top boroughs based on greatest number of new cases in last three weeks (7/11 - 7/31)

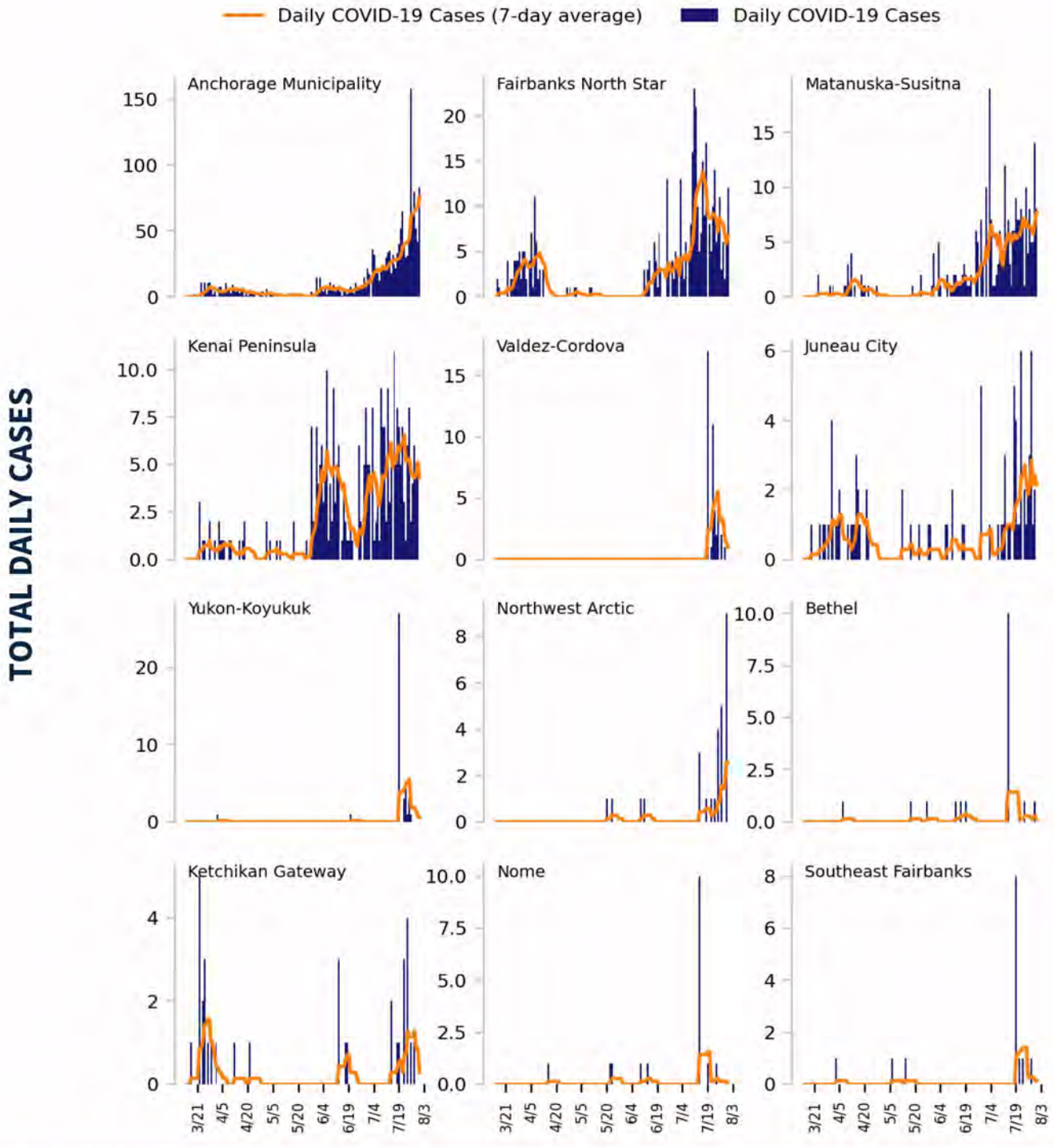


DATA SOURCES

Cases: Borough-level data from USAFacts. State values are calculated by aggregating borough-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 boroughs based on number of new cases in the last 3 weeks



DATA SOURCES

Cases: Borough-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

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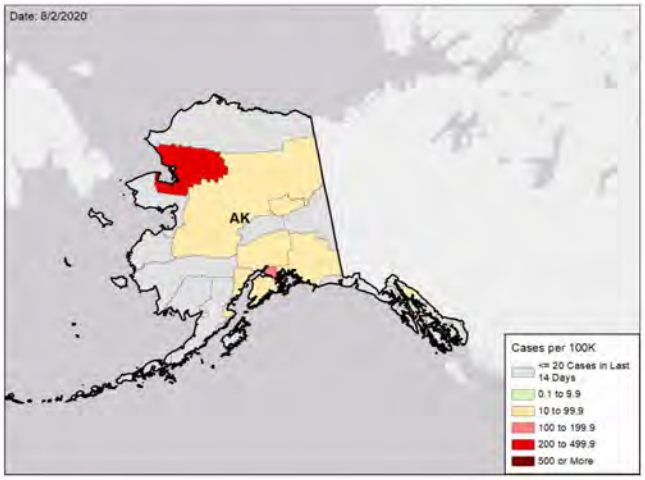
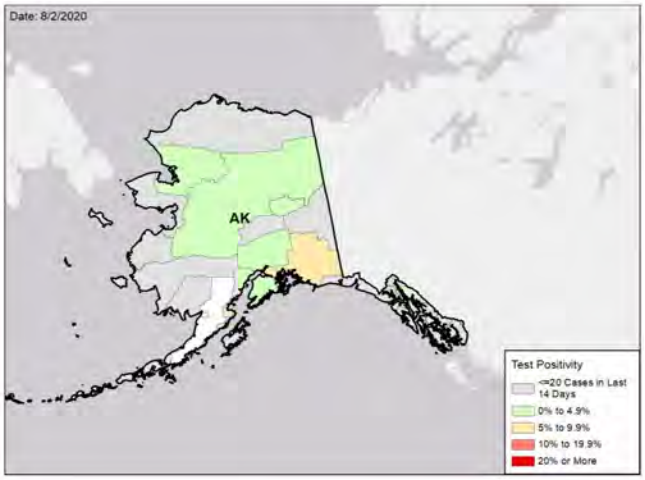
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

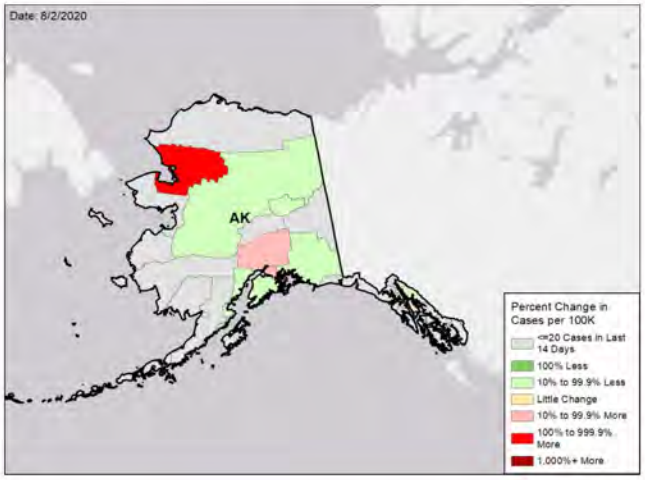
NEW CASES PER 100,000 DURING LAST WEEK



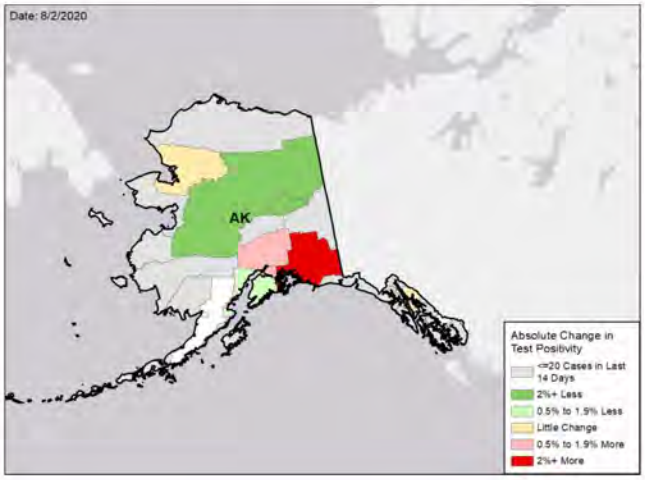
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

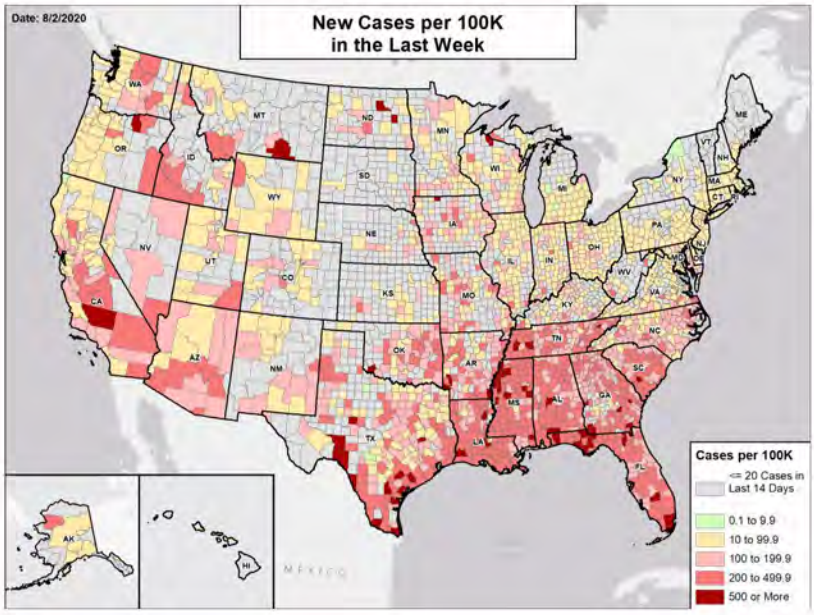


DATA SOURCES

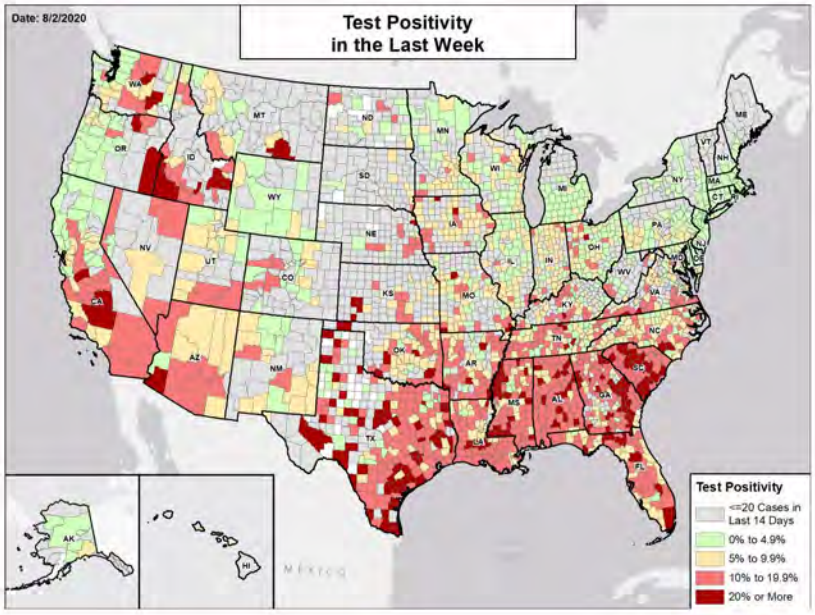
Cases: Borough-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

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COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

ARIZONA

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SUMMARY

- Arizona is in the red zone for COVID-19 cases, indicating more than 100 new cases per 100,000 population last week, and the red zone for COVID-19 test positivity, indicating a rate above 10% with evidence of improvement from mitigation efforts.
- Arizona has seen stability in new cases and a decrease in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Maricopa County, 2. Pima County, and 3. Yuma County. These counties represent 85.5 percent of new cases in Arizona. Preventing spread to additional counties will be critical.
- Arizona had 243 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 10 to support operations activities from FEMA; 16 to support medical activities from ASPR; 12 to support epidemiology activities from CDC; 2 to support operations activities from CDC; 1 to support medical activities from VA; and 2 to support operations activities from VA.
- Between Jul 25 - Jul 31, on average, 135 patients with confirmed COVID-19 and 243 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Arizona. An average of 77 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Continue to protect those in nursing homes, assisted living, and long-term care facilities by ensuring access to rapid facility-wide testing in response to a resident or staff member with COVID-19. Ensure social distancing and universal facemask use.
- Extend mandated public use of masks in all current and evolving hot spots.
- Continue bar and gym closures in hot spot counties.
- Continue the limits on indoor dining to less than 50% of normal capacity.
- Continue to ask citizens to limit their social gatherings to fewer than 10 people and always protect the vulnerable members of their households.
- Increase messaging of the risk of serious disease in all age groups with preexisting medical conditions, including obesity, hypertension, and diabetes mellitus.
- Continue the scale-up of testing, moving to community-led neighborhood testing and pooled household testing in Maricopa, Pima, and Yuma counties. Work with local communities to implement and provide clear guidance for households that test positive, including individual isolation procedures.
- Continue to enhance contact tracing and ensure the ability of cases and contacts to quarantine or isolate safely.
- Continue to monitor testing data to identify additional sites of increased transmission and focus public health resources there, with enhanced support to the Tribal Nations.
- Expand testing capacity in public health labs by adding shifts and weekend shifts to decrease turnaround times. Institute 3:1 or 2:1 pooling on all high throughput machines as long as turnaround times are greater than 36 hours. For families and cohabiting households, screen entire households in a single test by pooling specimens.
- Work on improving lab results turnaround. The Sonora Quest lab has been averaging 7-16 days to process and provide lab results to individuals.
- Continue to work with HHS for Surge Testing CBTS 4.0 to reach those in more rural areas.
- Continue identifying new areas that need increased testing and working with HHS to encourage private stakeholders to increase the deployment of CBTS 2.0 to those areas.
- Require all universities with RNA detection platforms to use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Tribal Nations: Continue enforcement of social distancing and masking measures in areas of increased transmission. Continue enhanced testing activities. Increase Abbott ID Now supplies to test individuals in positive households.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

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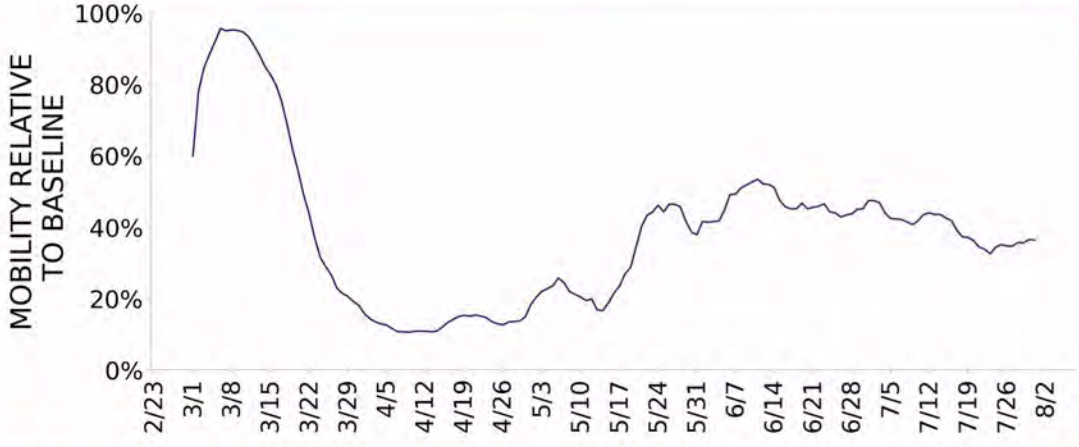
	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	17,681 (243)	-0.7%	87,028 (170)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	14.4%	-2.6%*	11.0%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	132,022** (1,814)	+26.1%**	958,730** (1,869)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	410 (6)	-41.5%	1,403 (3)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	27.9%	-6.2%*	15.7%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	7	Phoenix-Mesa-Chandler Tucson Yuma Lake Havasu City-Kingman Nogales Payson Safford	4	Show Low Prescott Valley-Prescott Flagstaff Sierra Vista-Douglas
COUNTY LAST WEEK	8	Maricopa Pima Yuma Pinal Mohave Santa Cruz Gila Graham	6	Navajo Yavapai Coconino Cochise Apache Greenlee

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

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POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
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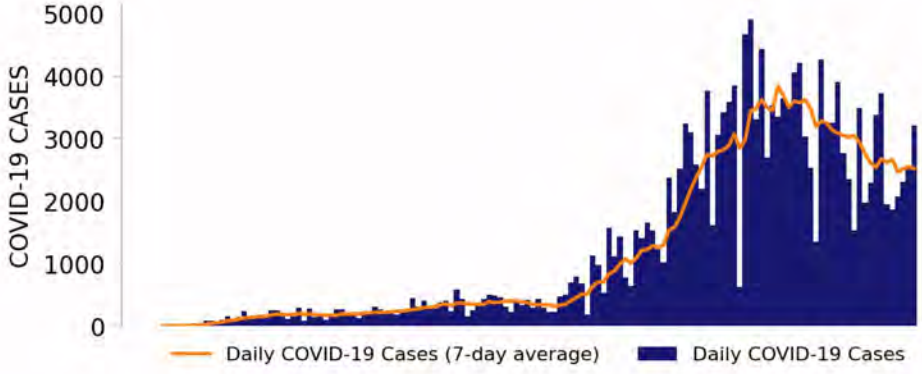
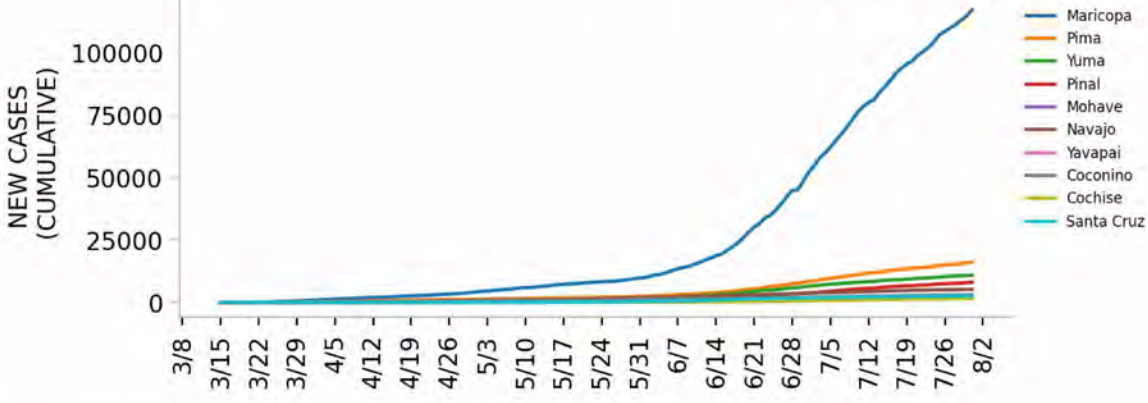
NEW CASES



TESTING

TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)



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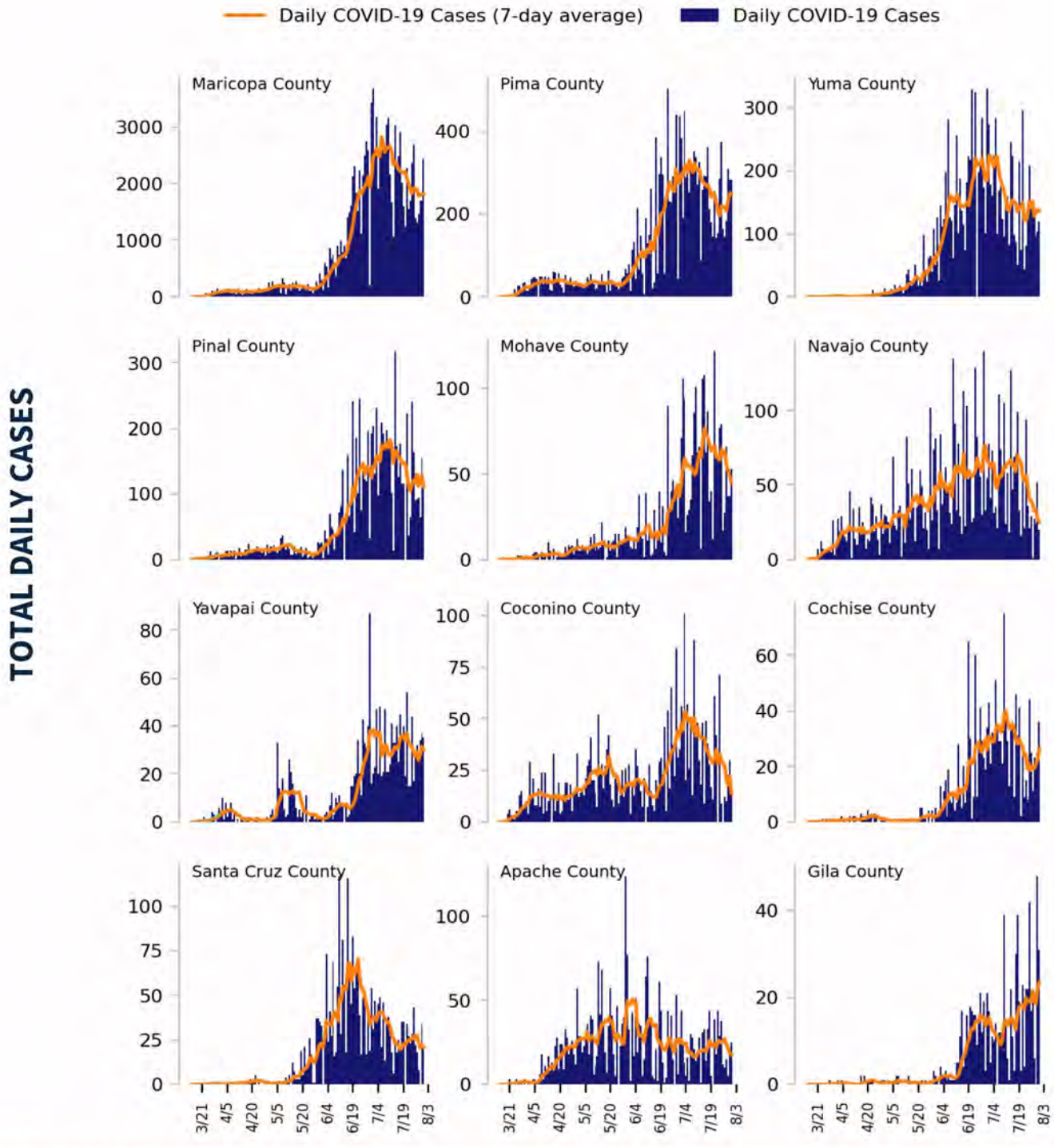
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

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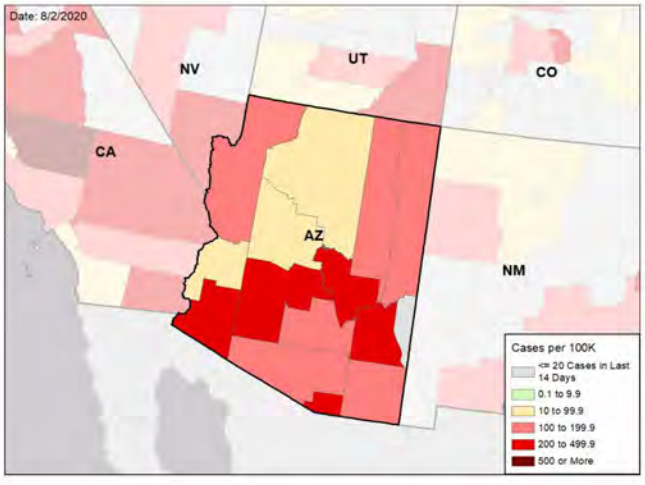
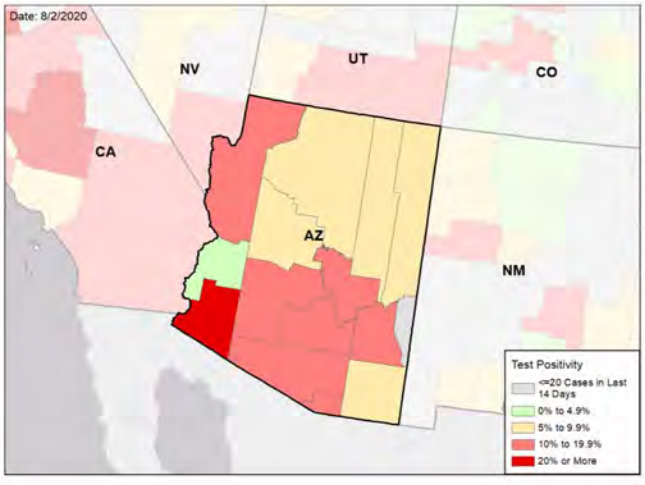
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

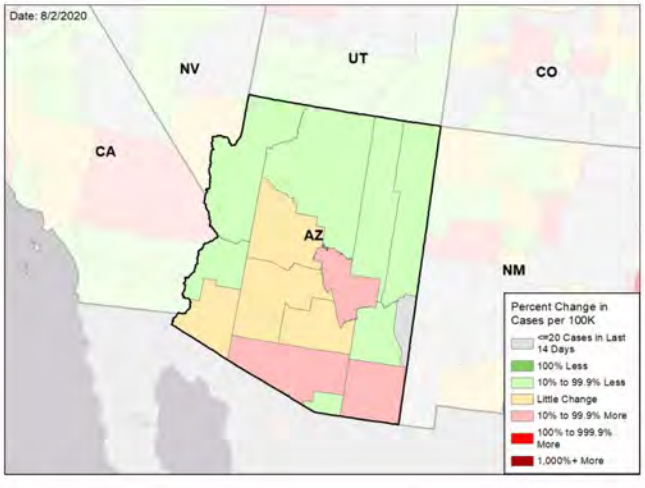
NEW CASES PER 100,000 DURING LAST WEEK



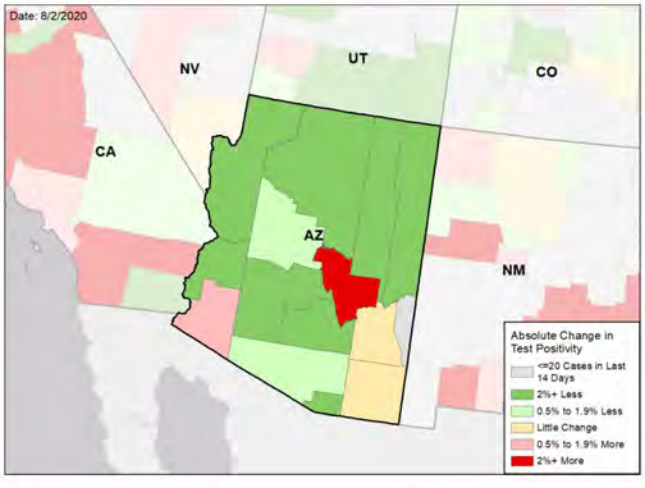
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

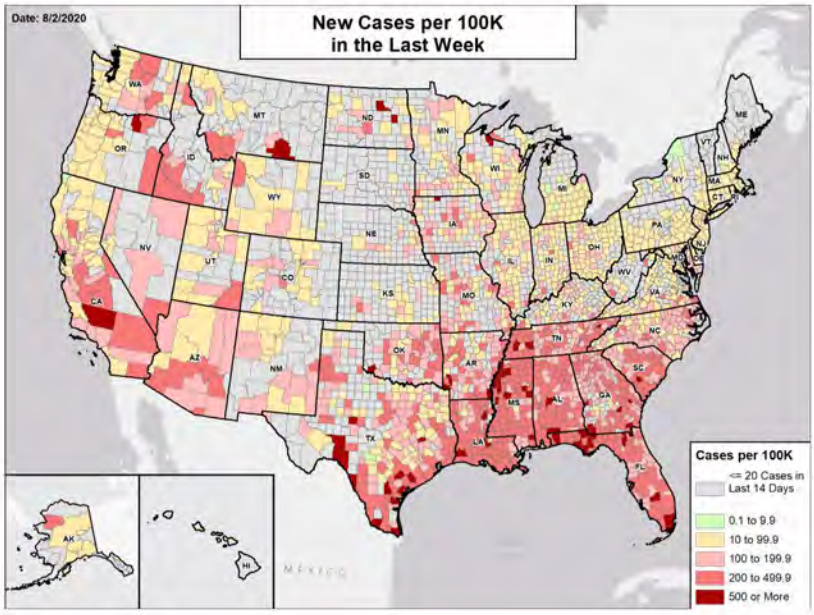


DATA SOURCES

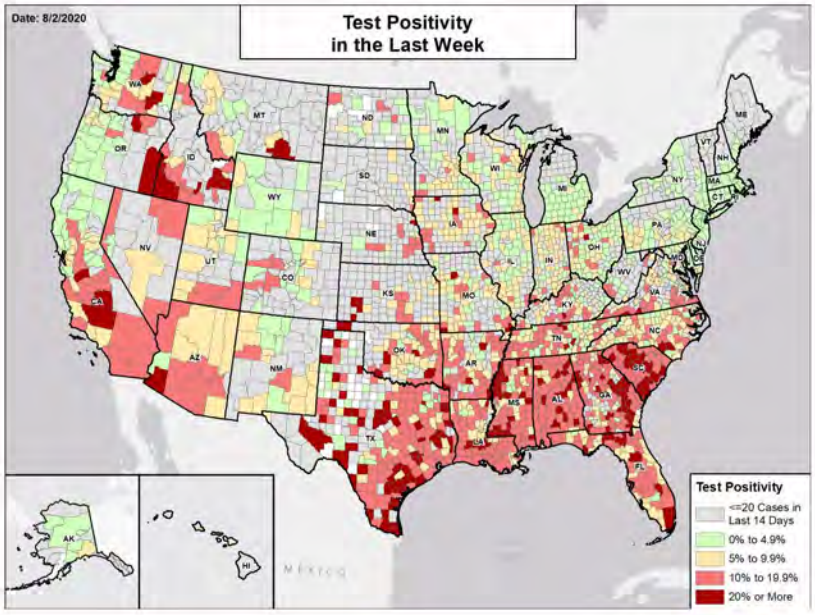
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
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Methods

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COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
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- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

ARKANSAS

STATE REPORT | 08.02.2020

SUMMARY

- Arkansas is in the red zone for cases, indicating more than 100 new cases per 100,000 population last week, and the red zone for test positivity, indicating a rate above 10%.
- Arkansas remains at high levels for new cases and test positivity.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Pulaski County, 2. Washington County, and 3. Benton County. These counties represent 29.1 percent of new cases in Arkansas.
- Arkansas had 174 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 4 to support operations activities from FEMA.
- Between Jul 25 - Jul 31, on average, 57 patients with confirmed COVID-19 and 206 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Arkansas. An average of 70 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Keep mask requirement in place statewide. Identify mechanisms to assess compliance with local regulations.
- Limit social gatherings to 10 people or fewer.
- Providing timely test results to individuals so they can isolate and stop the spread is critical. Implement the following to increase testing capacity and decrease turnaround times:
    - (1) For family and cohabitating households, screen entire households in a single test by pooling a sample of each member's specimen. For households that test positive, isolate and conduct follow-up individual tests.
    - (2) Expand testing capacity in public health labs by adding shifts, including weekend shifts, to reduce turnaround times.
    - (3) Require all universities with RNA detection platforms to use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Message to residents that if they vacation in an area with high COVID prevalence and return to an area with low COVID prevalence, they should: remain socially distanced, stay masked in all public spaces, and avoid all indoor gatherings where social distancing and masks cannot be maintained.
- Nursing home facilities with more than 2 confirmed or suspected COIVD-19 cases are largely in red and yellow zones. Decreasing transmission in these areas is critical to protect the vulnerable nursing home population. Protect vulnerable populations in assisted living and long-term care facilities through weekly testing of all workers and requiring masks. In facilities with workers who tested positive, ensure all residents have been tested and appropriate cohorting measures are in place.
- Contact tracing is ongoing, and the state has implemented an automated text messaging system for those who have been in contact with someone who has tested positive. Continue to leverage this system.
- Increase messaging of the risk of serious disease in all age groups with preexisting medical conditions, including obesity, hypertension, and diabetes mellitus.
- Close establishments where social distancing and mask use cannot occur, such as bars, nightclubs, and entertainment venues.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

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	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	5,260 (174)	-4.1%	87,300 (204)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	11.1%	+0.1%*	12.2%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	44,785** (1,484)	-15.0%**	317,760** (744)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	59 (2)	+47.5%	2,954 (7)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	10.3%	+1.5%*	21.6%	12.3%

MOBILITY

* Indicates absolute change in percentage points.
** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

ARKANSAS

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	**16** Top 12 shown (full list below)	Fort Smith Russellville Jonesboro Pine Bluff Malvern Hot Springs Blytheville Memphis Texarkana Batesville El Dorado Hope	**4**	Little Rock-North Little Rock-Conway Fayetteville-Springdale-Rogers Forrest City Harrison
COUNTY LAST WEEK	**37** Top 12 shown (full list below)	Washington Sebastian Craighead Hot Spring Pope Garland Jefferson Mississippi Crittenden Chicot Independence Johnson	**17** Top 12 shown (full list below)	Pulaski Benton Faulkner Saline Lonoke St. Francis Arkansas Boone Carroll Franklin Grant Drew

All Red CBSAs: Fort Smith, Russellville, Jonesboro, Pine Bluff, Malvern, Hot Springs, Blytheville, Memphis, Texarkana, Batesville, El Dorado, Hope, Paragould, Helena-West Helena, Arkadelphia, Magnolia
All Red Counties: Washington, Sebastian, Craighead, Hot Spring, Pope, Garland, Jefferson, Mississippi, Crittenden, Chicot, Independence, Johnson, Crawford, Miller, Yell, Union, Howard, Greene, Sevier, Ashley, Hempstead, Lincoln, Little River, Randolph, Phillips, Newton, Clark, Poinsett, Columbia, Bradley, Desha, Lawrence, Lee, Pike, Dallas, Scott, Nevada
All Yellow Counties: Pulaski, Benton, Faulkner, Saline, Lonoke, St. Francis, Arkansas, Boone, Carroll, Franklin, Grant, Drew, Logan, Cross, Conway, Sharp, Monroe

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.
Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."
Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

ARKANSAS

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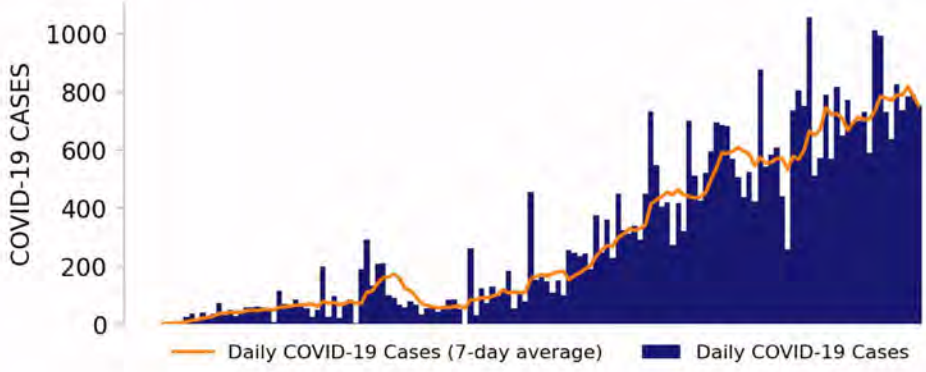
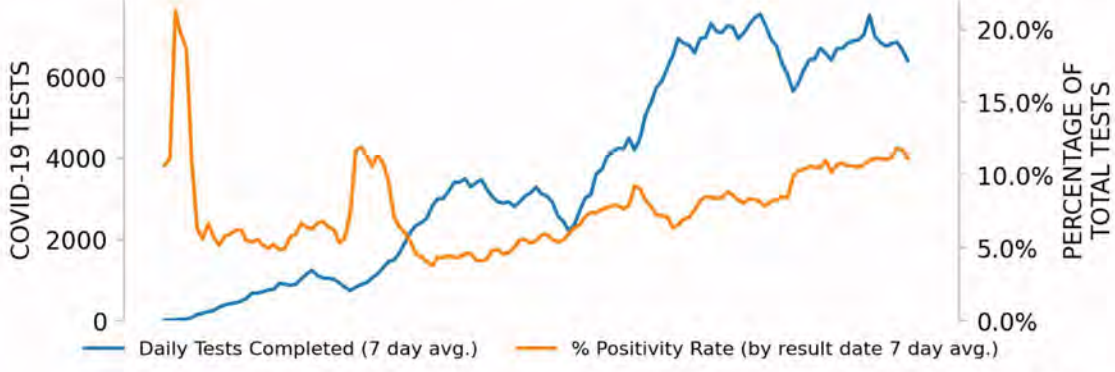
NEW CASES

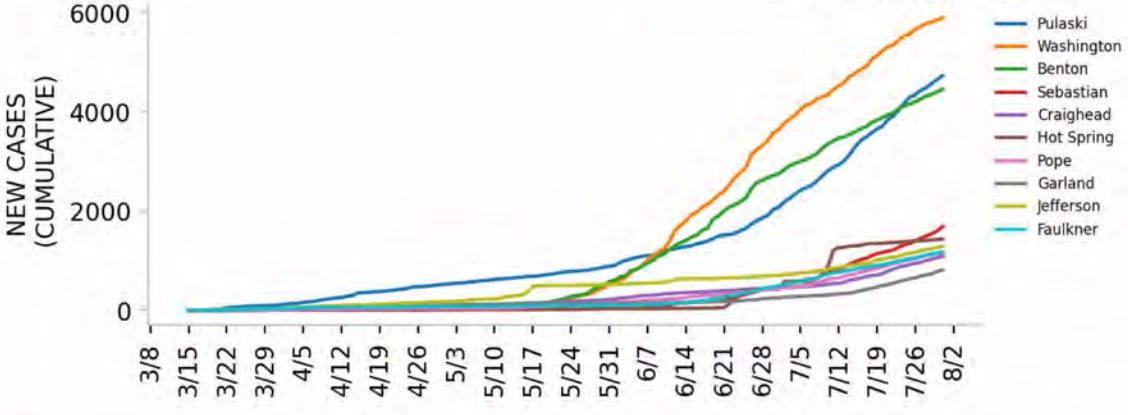


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

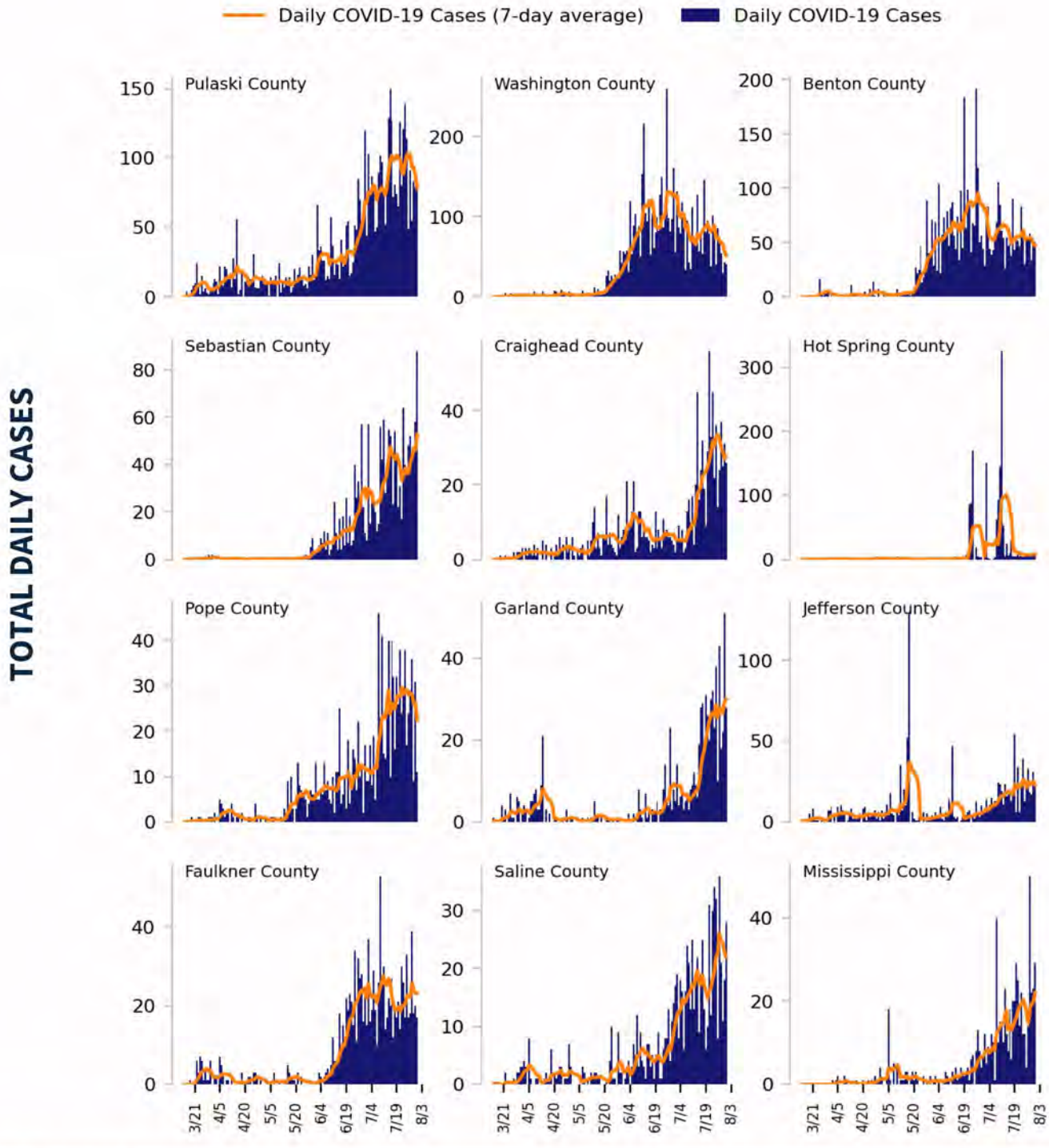


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

ARKANSAS

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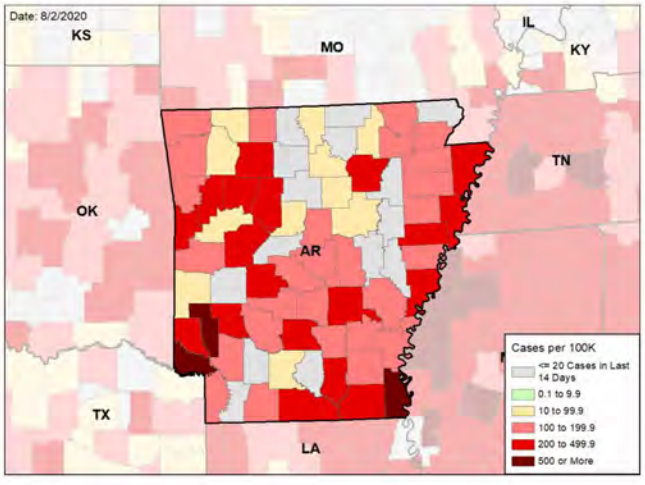
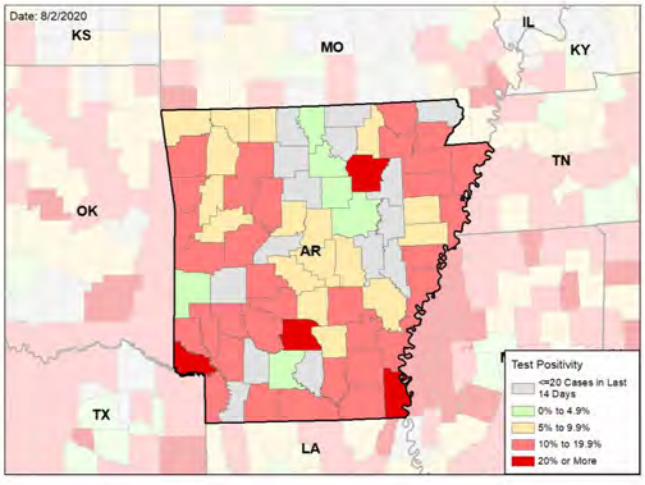
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

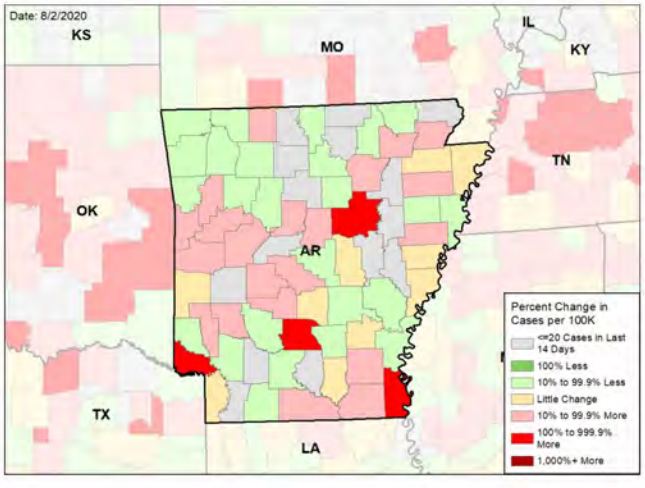
NEW CASES PER 100,000 DURING LAST WEEK



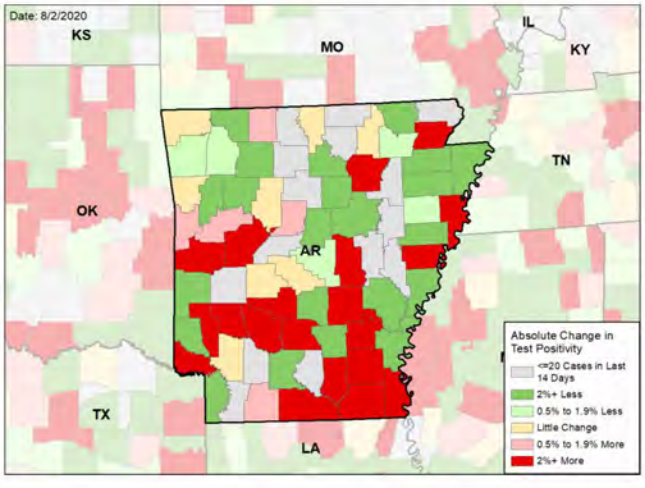
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



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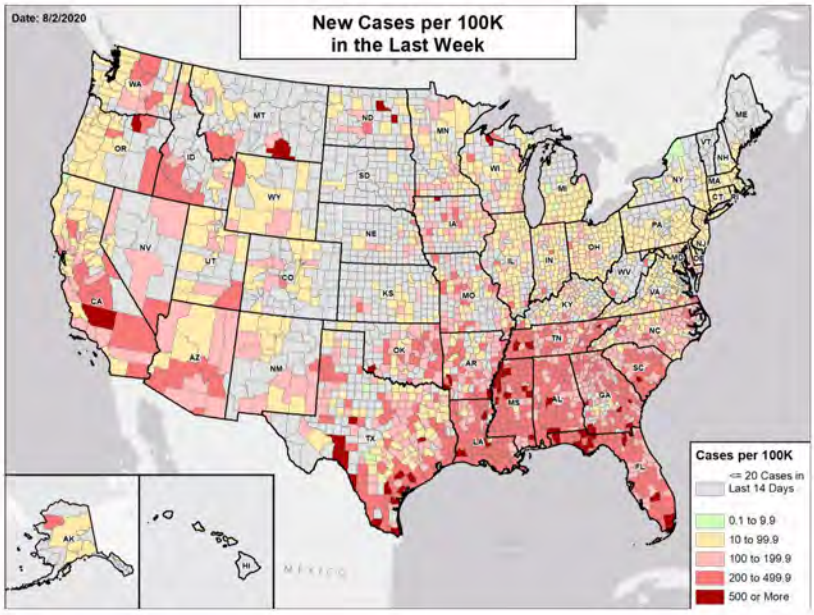
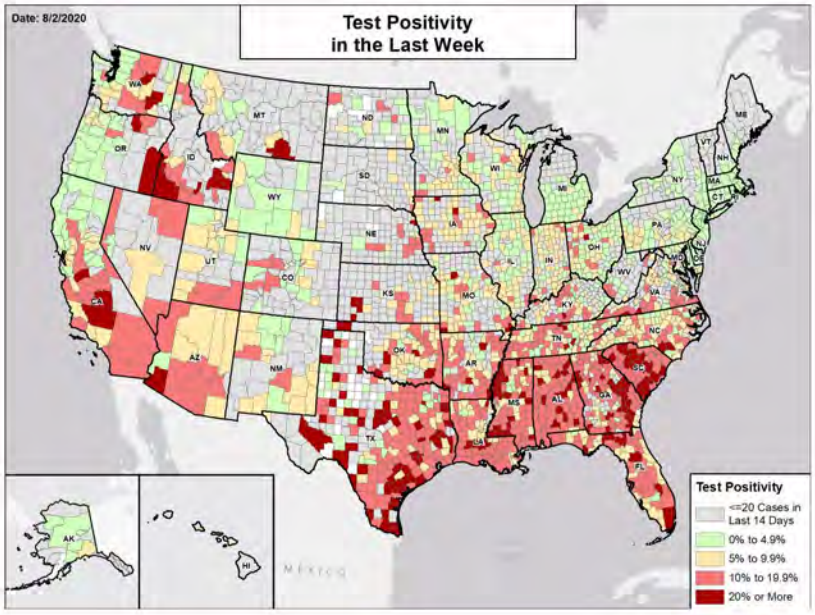
National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



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Methods

STATE REPORT | 08.02.2020

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Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

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CALIFORNIA

STATE REPORT | 08.02.2020

SUMMARY

- California is in the red zone for cases, indicating more than 100 new cases per 100,000 population last week, and the red zone for test positivity, indicating a rate above 10%.
- Overall, California has seen stability in new cases and an increase in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Los Angeles County, 2. San Bernardino County, and 3. Orange County. These counties represent 46.7 percent of new cases in California.
- Viral transmission is occurring throughout the state with continued significant variation across counties. Cases remained at high levels, although case counts are relatively stable or declining in most coastal Southern California counties and many Bay Area counties.
- Cases continued to be reported at very high levels throughout the Central Valley with some continued areas of rapid growth, including the Bakersfield CBSA.
- Testing positivity rates remain high in the inland counties of Southern California (Imperial, Riverside, San Bernardino) and throughout the Central Valley.
- California had 156 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 163 to support medical activities from DOD; 10 to support operations activities from DOD; 173 to support operations activities from FEMA; 49 to support operations activities from ASPR; 12 to support epidemiology activities from CDC; 2 to support operations activities from CDC; 255 to support operations activities from USCG; and 1 to support medical activities from VA.
- The federal government has supported a surge testing site in Bakersfield, CA.
- Between Jul 25 - Jul 31, on average, 845 patients with confirmed COVID-19 and 818 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in California. An average of 91 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Continue the expanded statewide limitations on activity and the adaptive inclusion of counties with elevated reported cases. Consider intensified limitations in counties on alert lists.
- Continue with state masking mandate and develop innovative ways to monitor compliance.
- Ensure that all business retailers and personal services require masks and can safely social distance.
- Continue the enhanced focus on Central Valley outbreaks; the formation of the Central Valley Taskforce is commended.
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates. The direction of augmented state and federal testing resources for Bakersfield is commended.
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates and increase community level testing. Work with local communities to provide clear guidance for households that test positive, including individual isolation procedures.
- Continue efforts to increase testing at public health and private laboratories.
- Protect those in nursing homes and long-term care facilities by ensuring access to rapid facility-wide testing in response to a resident or staff member with COVID-19. Address staff and supply shortages; California's efforts to augment staff at LTCF and other clinical facilities through innovative measures is commended. Ensure social distancing and universal facemask use.
- Identify universities with RNA detection platforms; consider efforts to use this equipment to expand surveillance testing for university students and schools (K-12, community colleges).
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

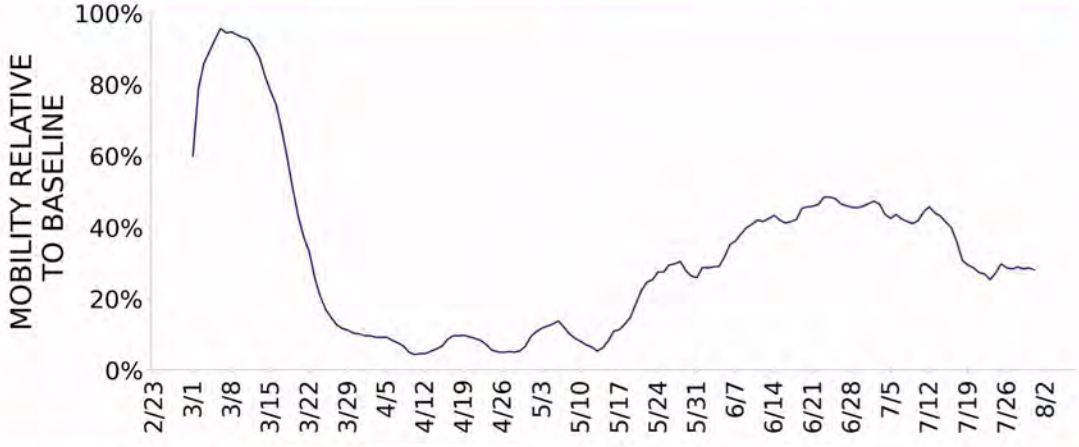
** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

CALIFORNIA

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	61,577 (156)	-7.2%	87,028 (170)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	10.3%	+0.8%*	11.0%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	752,145** (1,904)	-22.2%**	958,730** (1,869)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	885 (2)	+12.0%	1,403 (3)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	15.1%	-5.3%*	15.7%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

CALIFORNIA

STATE REPORT | 08.02.2020

COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	**13** Top 12 shown (full list below)	Riverside-San Bernardino-Ontario Bakersfield Fresno Stockton Modesto Visalia Santa Maria-Santa Barbara Merced Salinas El Centro Hanford-Corcoran Madera	**7**	Los Angeles-Long Beach-Anaheim San Francisco-Oakland-Berkeley San Diego-Chula Vista-Carlsbad Sacramento-Roseville-Folsom Oxnard-Thousand Oaks-Ventura Vallejo San Luis Obispo-Paso Robles
COUNTY LAST WEEK	**17** Top 12 shown (full list below)	San Bernardino Kern Riverside Fresno San Joaquin Stanislaus Tulare Santa Barbara Merced Monterey Imperial Kings	**15** Top 12 shown (full list below)	Los Angeles Orange San Diego Sacramento Alameda Contra Costa Ventura Marin Solano San Luis Obispo Placer Yolo

All Red CBSAs: Riverside-San Bernardino-Ontario, Bakersfield, Fresno, Stockton, Modesto, Visalia, Santa Maria-Santa Barbara, Merced, Salinas, El Centro, Hanford-Corcoran, Madera, Yuba City
All Red Counties: San Bernardino, Kern, Riverside, Fresno, San Joaquin, Stanislaus, Tulare, Santa Barbara, Merced, Monterey, Imperial, Kings, Madera, Sutter, Colusa, Glenn, Mono
All Yellow Counties: Los Angeles, Orange, San Diego, Sacramento, Alameda, Contra Costa, Ventura, Marin, Solano, San Luis Obispo, Placer, Yolo, El Dorado, Yuba, San Benito

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.
Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."
Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

CALIFORNIA

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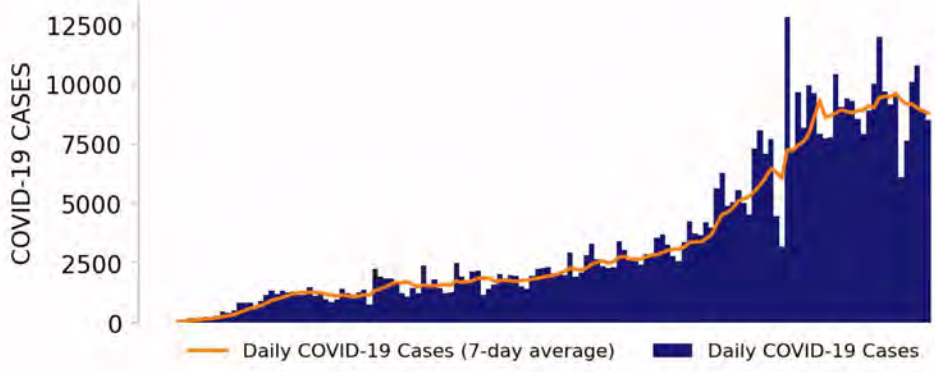
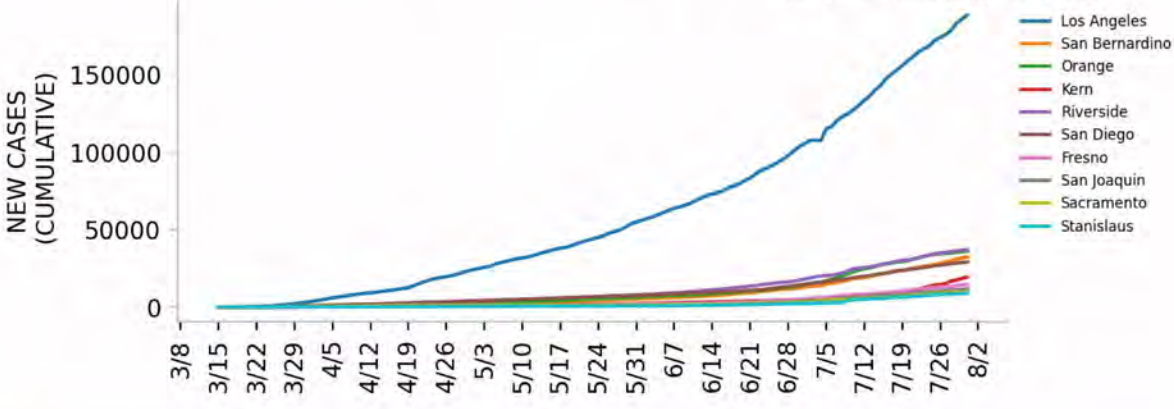
NEW CASES



TESTING

TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

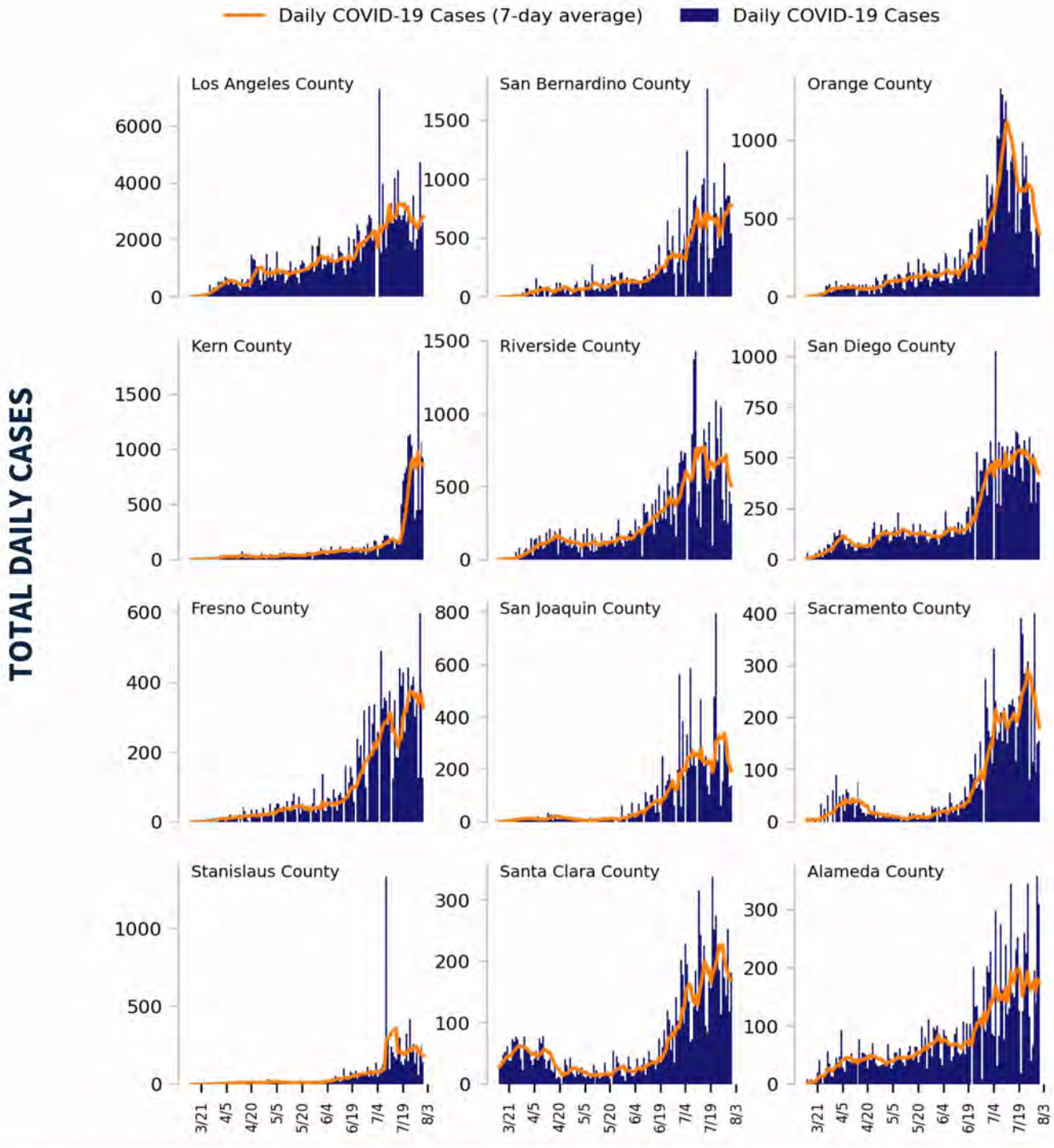


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

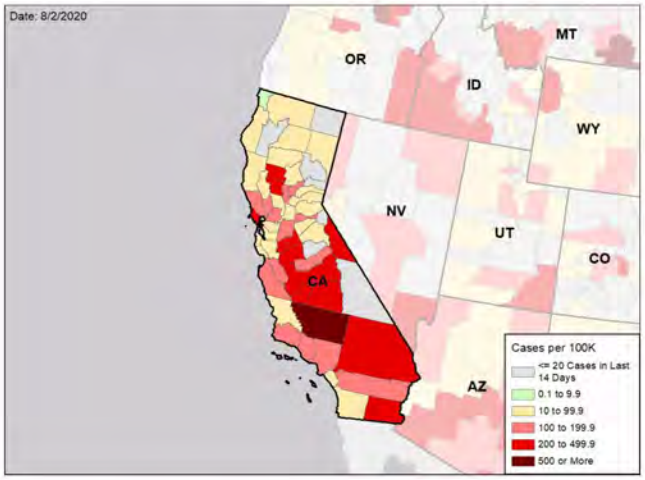
Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

CALIFORNIA

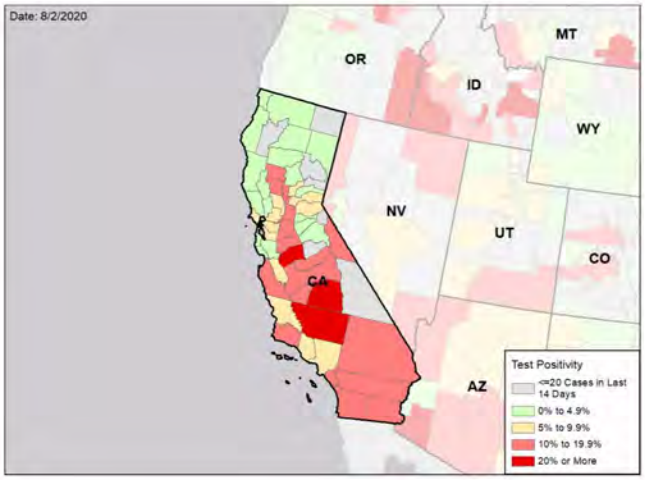
STATE REPORT | 08.02.2020

CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

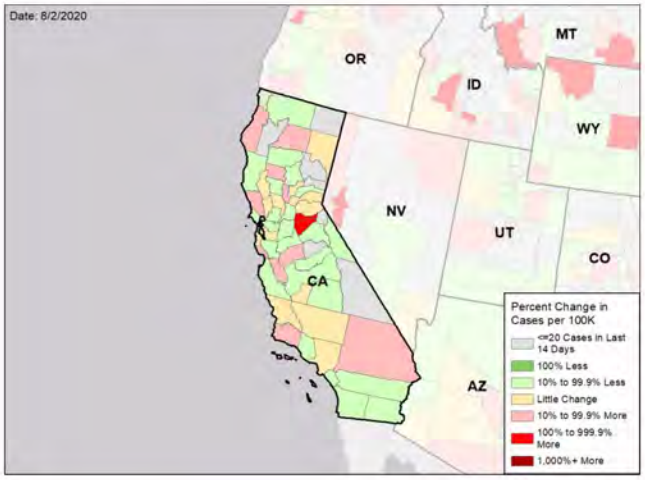
NEW CASES PER 100,000 DURING LAST WEEK



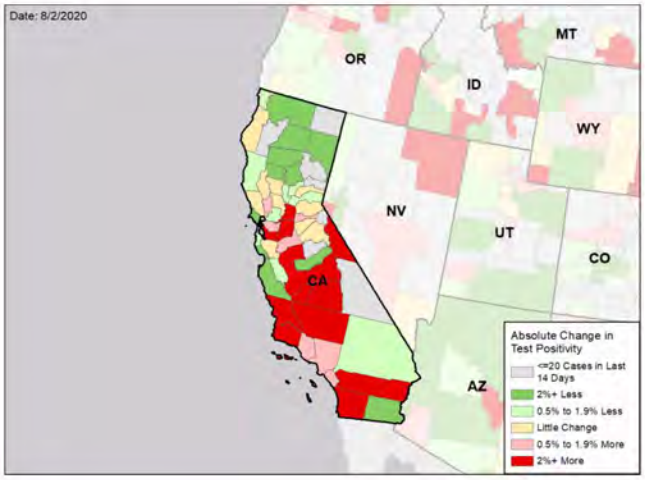
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

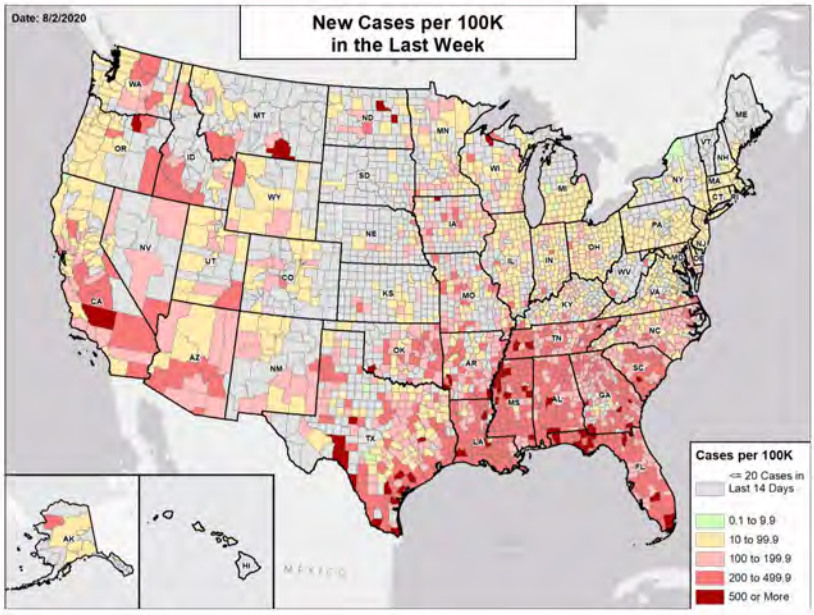


DATA SOURCES

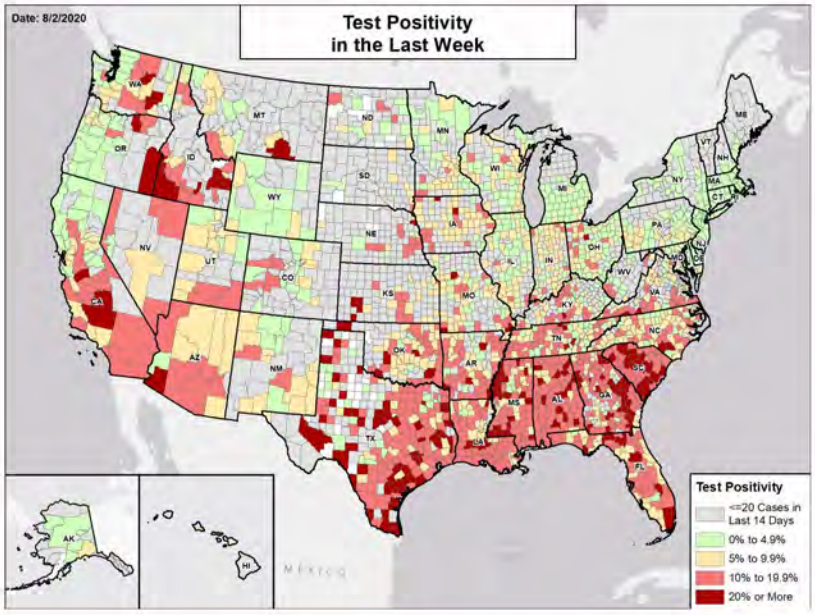
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

STATE REPORT | 08.02.2020

COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

COLORADO

STATE REPORT | 08.02.2020

SUMMARY

- Colorado is in the yellow zone for cases, indicating between 10 to 100 new cases per 100,000 population last week, and the yellow zone for test positivity, indicating a rate between 5% to 10%.
- Colorado has seen stability in new cases and stability in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Denver County, 2. El Paso County, and 3. Arapahoe County. These counties represent 44.2 percent of new cases in Colorado.
- Cases remain concentrated near the Front Range urban centers, especially Denver and Colorado Springs. Continued high incidence was reported in counties along I-70 and US 50 west of the Continental Divide (Eagle, Garfield, Chaffee, Gunnison).
- Colorado had 67 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 67 to support operations activities from FEMA; 4 to support operations activities from ASPR; 1 to support testing activities from CDC; 15 to support epidemiology activities from CDC; and 1 to support operations activities from CDC.
- Between Jul 25 - Jul 31, on average, 47 patients with confirmed COVID-19 and 76 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Colorado. An average of 78 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Continue with state masking mandate and targeted tailored messaging to encourage compliance.
- Continue the restrictions on bars and public entertainment venues.
- Limit social gatherings to 10 people or fewer; remove variances that allow larger gatherings for those counties reporting increased cases.
- Continue increasing testing at both public health and private laboratories.
- Monitor testing data to identify additional sites of increased transmission and focus public health resources on them.
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates and increase community level testing.
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours.
- Continue messaging of the risk of serious disease in all age groups with preexisting medical conditions, including obesity, hypertension, and diabetes mellitus.
- Protect those in nursing homes and long-term care facilities by ensuring access to rapid facility-wide testing in response to a resident or staff member with COVID-19. Address staff and supply shortages. Ensure social distancing and universal facemask use.
- Identify universities with RNA detection platforms; consider efforts to use this equipment to expand surveillance testing for university students and schools (K-12, community colleges).
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

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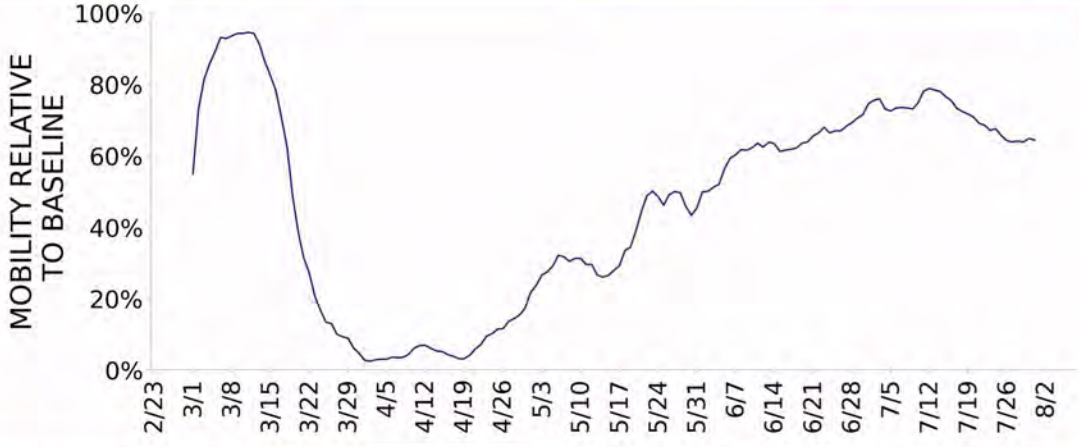
COVID-19

COLORADO

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	3,830 (67)	+5.4%	9,748 (80)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	5.1%	-0.3%*	5.7%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	79,020** (1,372)	+9.8%**	205,390** (1,675)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	48 (1)	+23.1%	102 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	4.8%	-0.8%*	4.7%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

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Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

COLORADO

STATE REPORT | 08.02.2020

COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	2	Glenwood Springs Edwards	4	Denver-Aurora-Lakewood Colorado Springs Greeley Montrose
COUNTY LAST WEEK	4	Garfield Eagle Gunnison Pitkin	7	El Paso Arapahoe Adams Weld Montrose Teller Otero

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
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COLORADO

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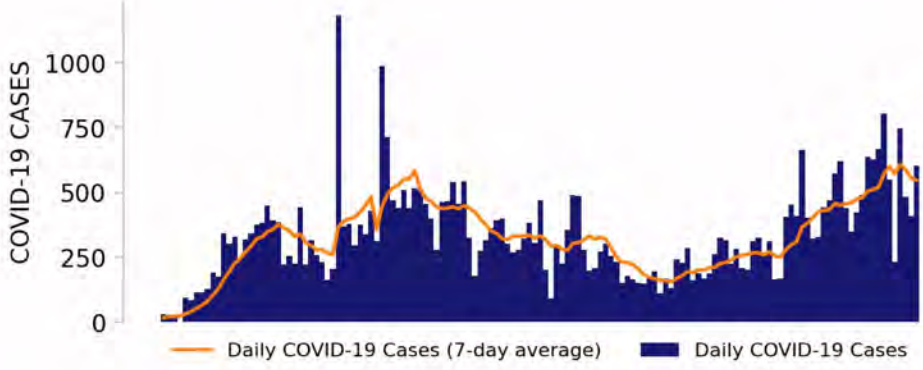
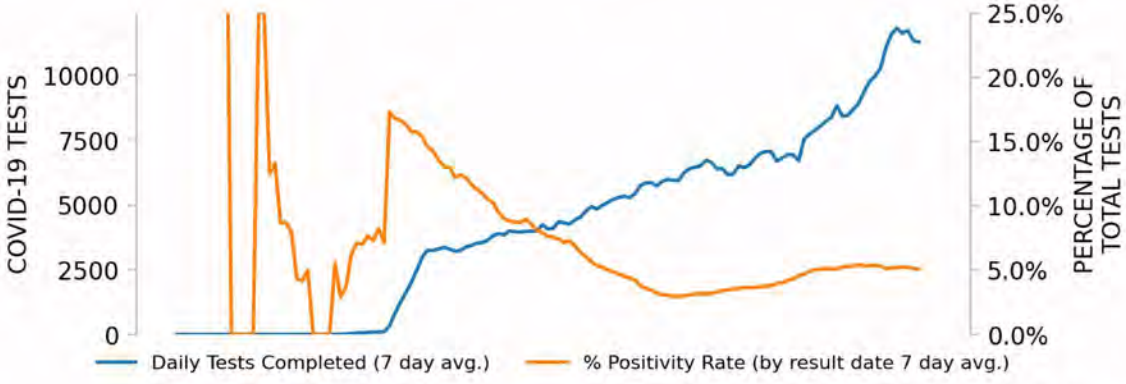
NEW CASES

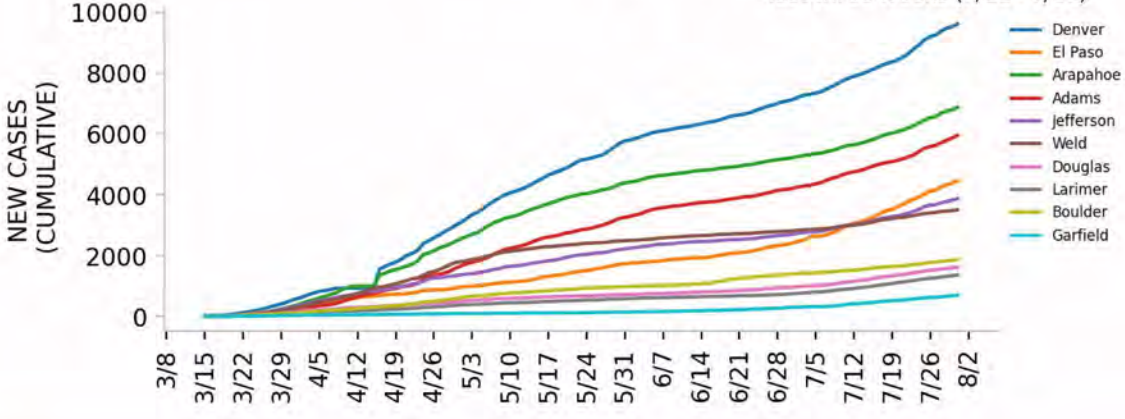


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)



DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

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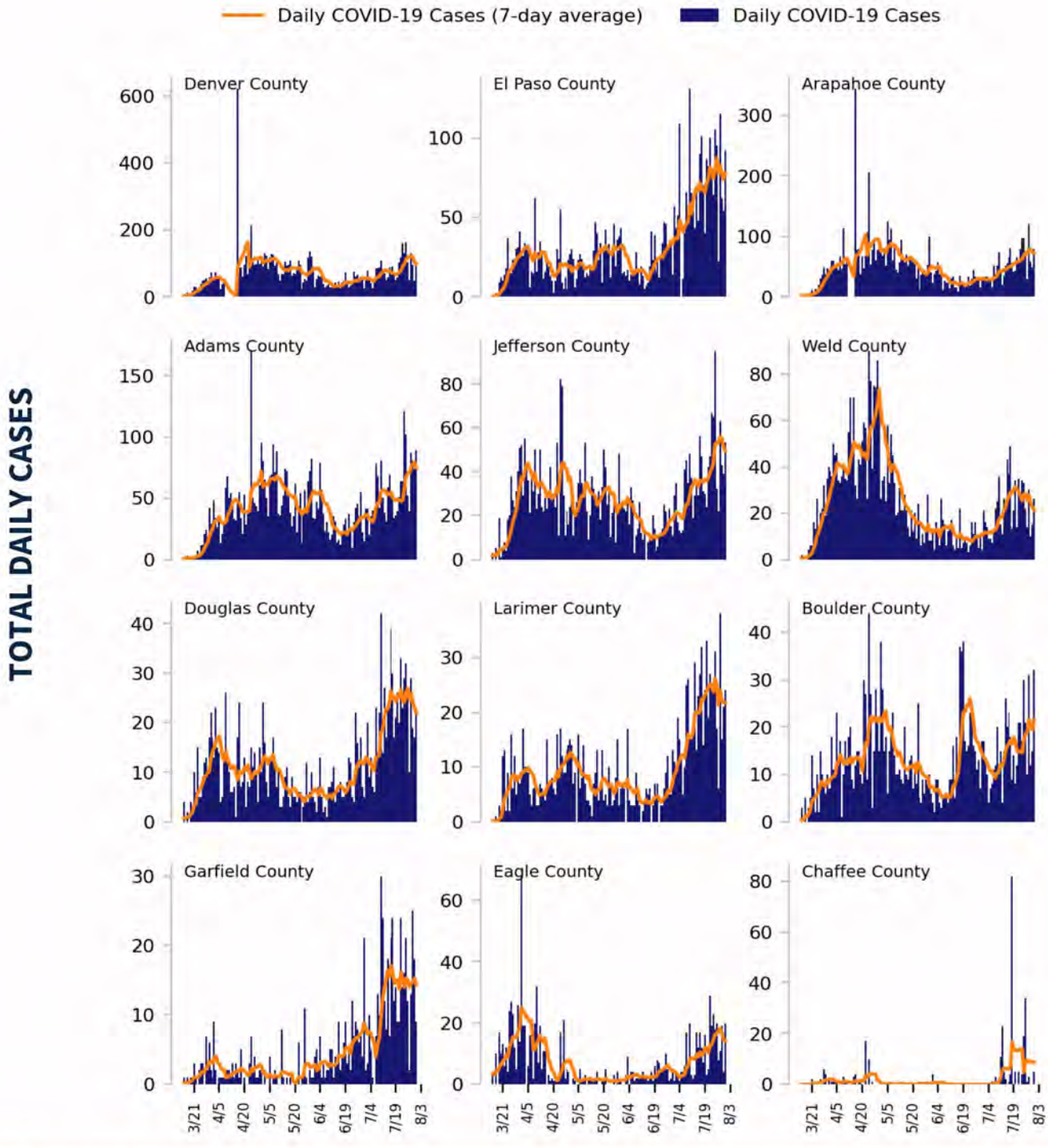
Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

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COLORADO

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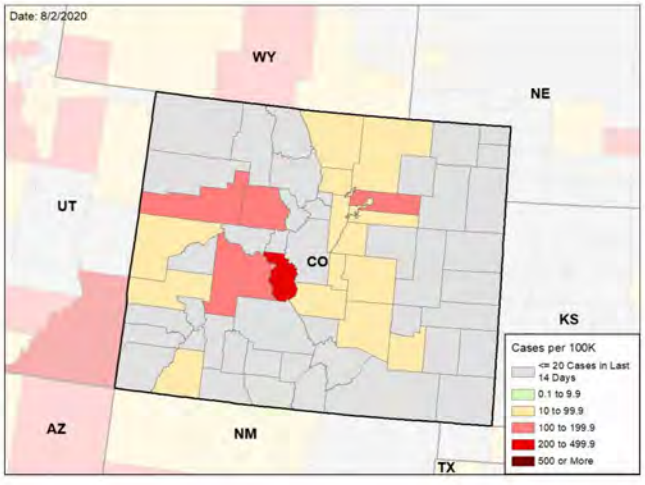
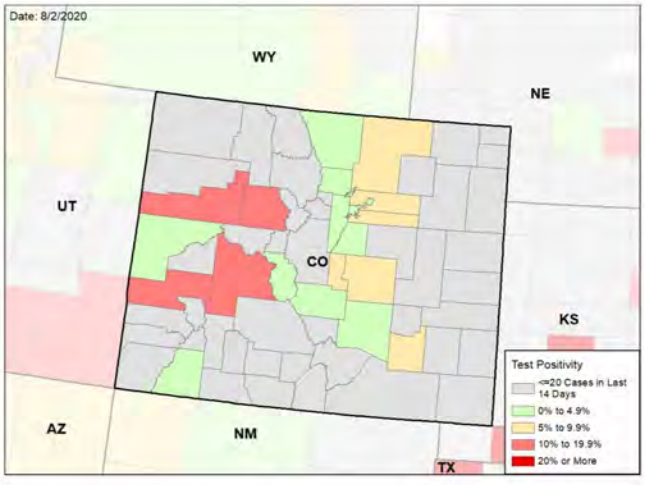
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

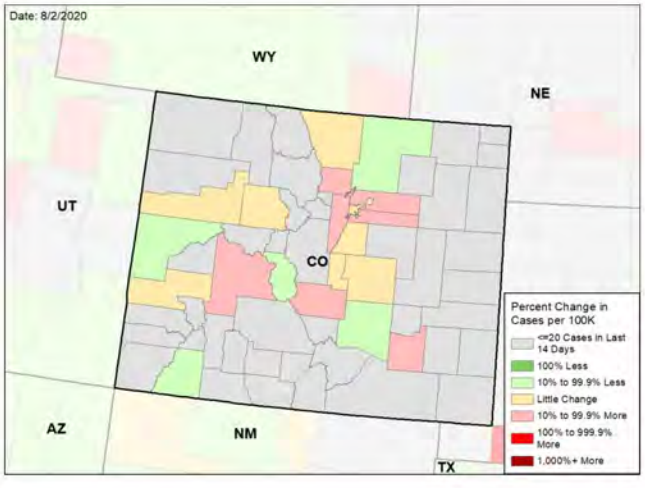
NEW CASES PER 100,000 DURING LAST WEEK



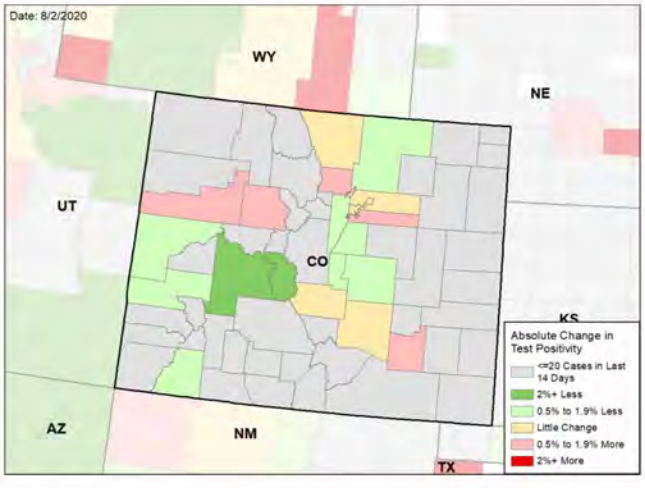
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
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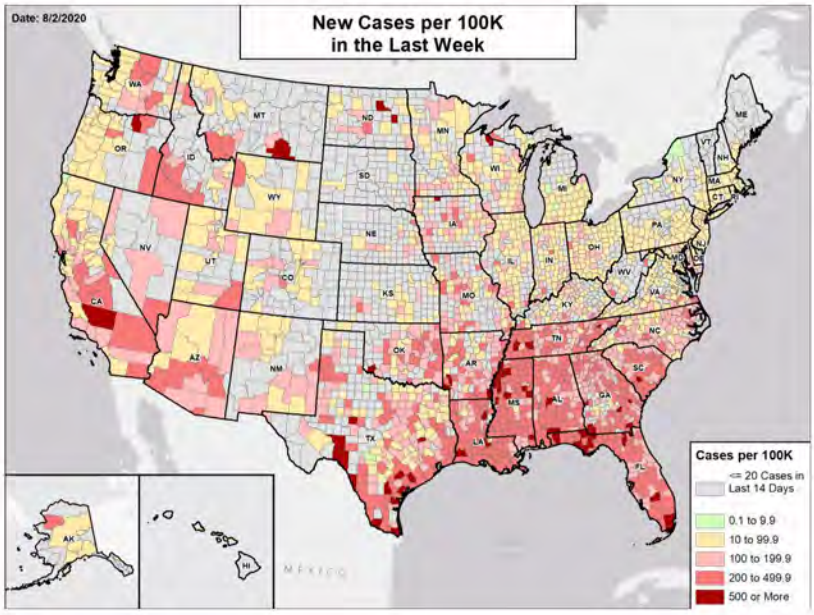
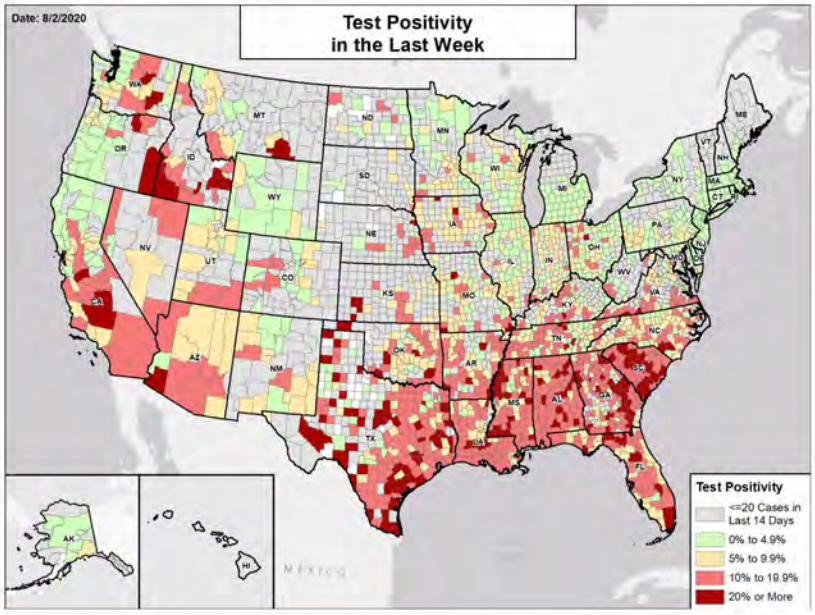
National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

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COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

CONNECTICUT

STATE REPORT | 08.02.2020

SUMMARY

- Connecticut is in the yellow zone for cases, indicating between 10 to 100 new cases per 100,000 population last week, and the green zone for test positivity, with a steady rate of <2% last week.
- Connecticut has seen an increase in reported new cases last week and stability in testing positivity over the past week. Increased numbers of cases among adolescents and young adults were linked to social gatherings.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Fairfield County, 2. Hartford County, and 3. New Haven County. These counties represent 85.2 percent of new cases in Connecticut.
- Connecticut had 29 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 2 to support operations activities from FEMA; 4 to support operations activities from USCG; and 1 to support operations activities from VA.
- Between Jul 25 - Jul 31, on average, 6 patients with confirmed COVID-19 and 52 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Connecticut. An average of 69 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Continue limitations on indoor occupancy of bars and restaurants and on private gatherings as specified in phase 2 of Connecticut's Reopen Plan. Intensify efforts to increase compliance.
- Continue the scale-up of testing and rollout of contact tracing currently underway, building on the increasing success rates.
- Continue the state masking requirement and intensify public messaging of its importance given national trends and increases in cases in nearby states.
- Protect those in nursing homes and long-term care facilities by continuing the testing program in place. Ensure social distancing and universal facemask use.
- Identify universities with RNA detection platforms; consider efforts to use this equipment to expand surveillance testing for university students and schools (K-12, community colleges).
- Message to residents that if they have vacationed in, or had visitors from, areas with high COVID-19 prevalence including the South and West of the United States, they should: avoid vulnerable individuals; remain socially distanced and masked when around others for a minimum of 14 days; avoid indoor gatherings where social distancing and masks cannot be maintained; and get tested if anyone in their family develops symptoms. Also, message that they can transmit the virus even when asymptomatic.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

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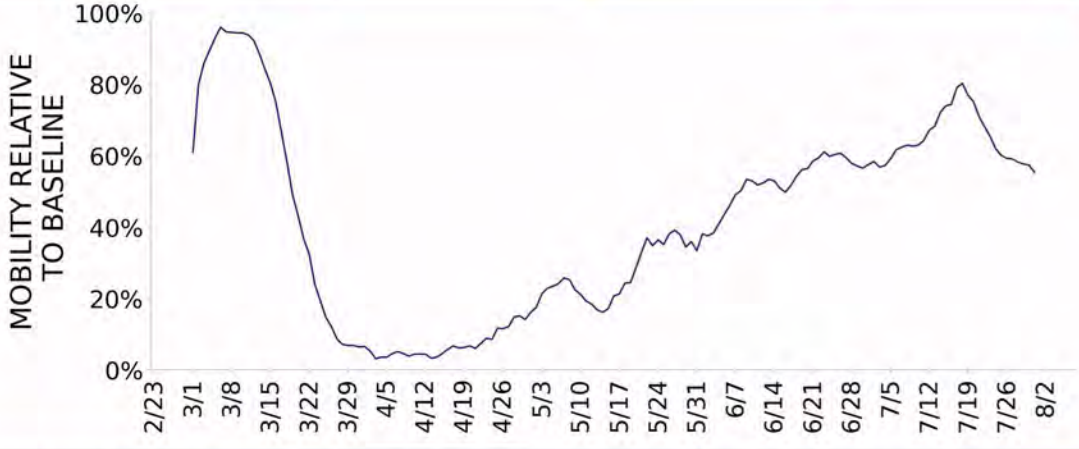
	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	1,034 (29)	+16.8%	4,853 (33)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	1.1%	+0.2%*	1.9%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	40,548** (1,137)	-38.8%**	229,303** (1,545)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	19 (1)	+5.6%	144 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	5.7%	-2.3%*	4.3%	12.3%

MOBILITY



* Indicates absolute change in percentage points.
** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

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Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

CONNECTICUT

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	0	N/A
COUNTY LAST WEEK	0	N/A	0	N/A

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

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Public Messaging

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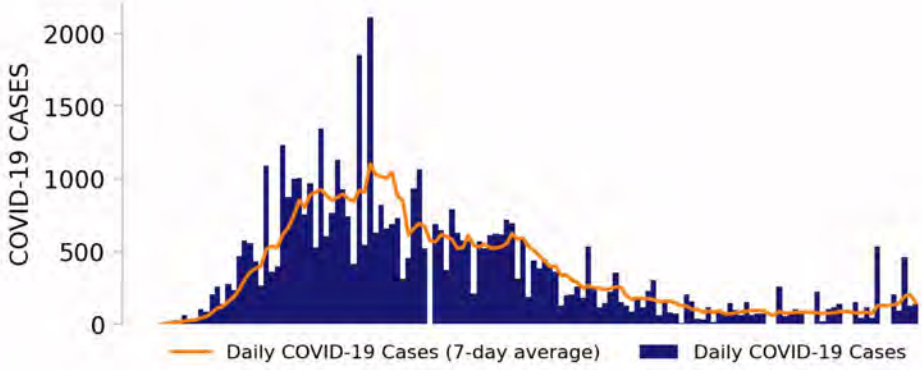
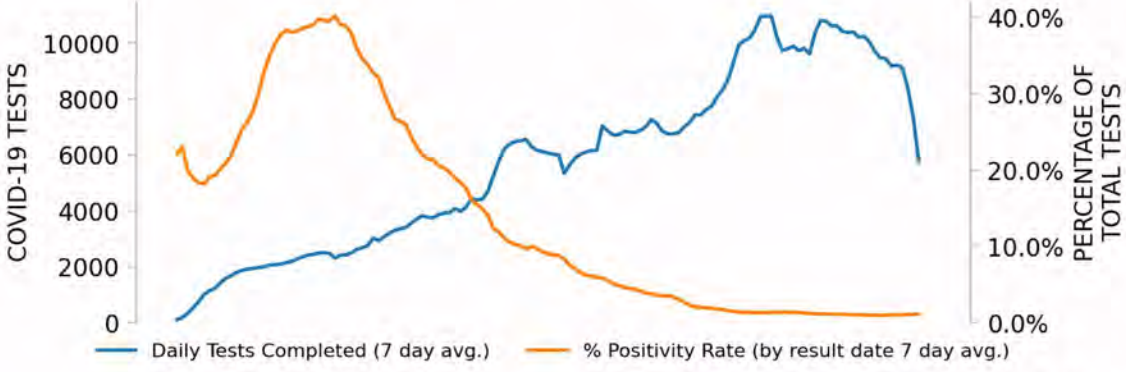
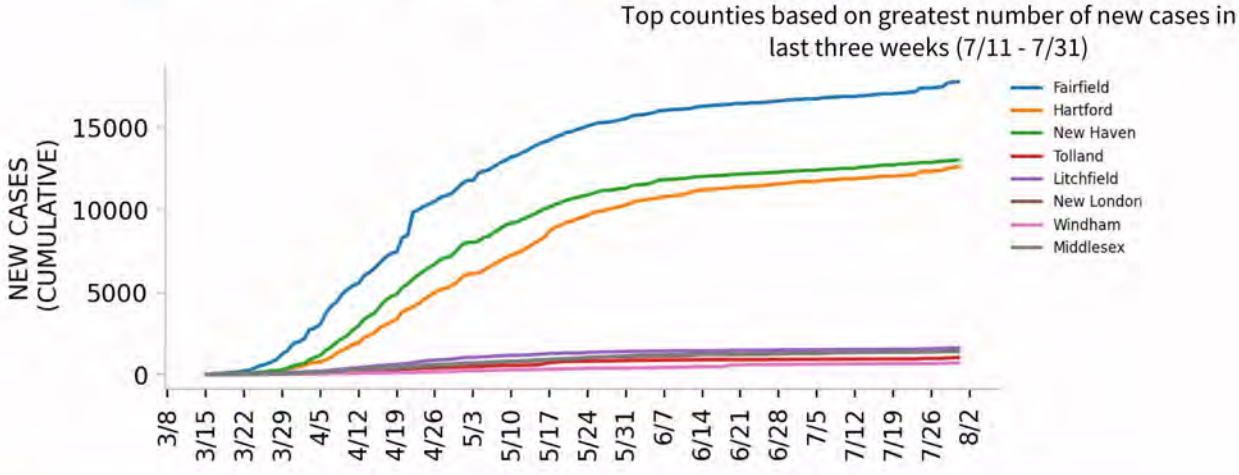
NEW CASES



TESTING



TOP COUNTIES



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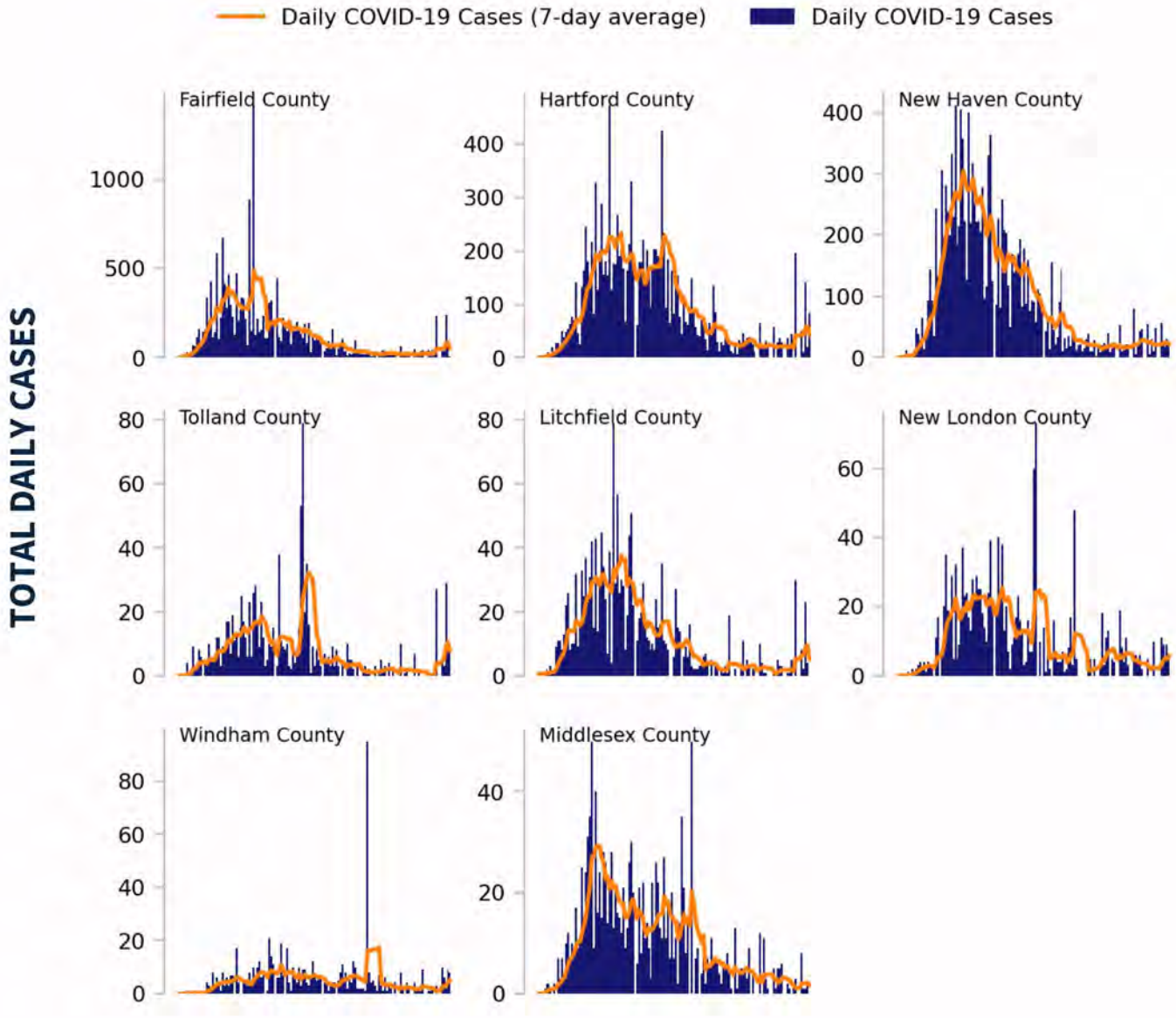
Top 12 counties based on number of new cases in the last 3 weeks



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CONNECTICUT

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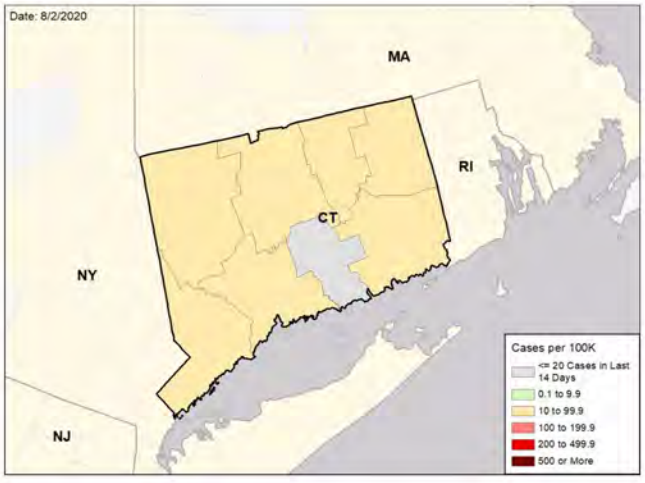
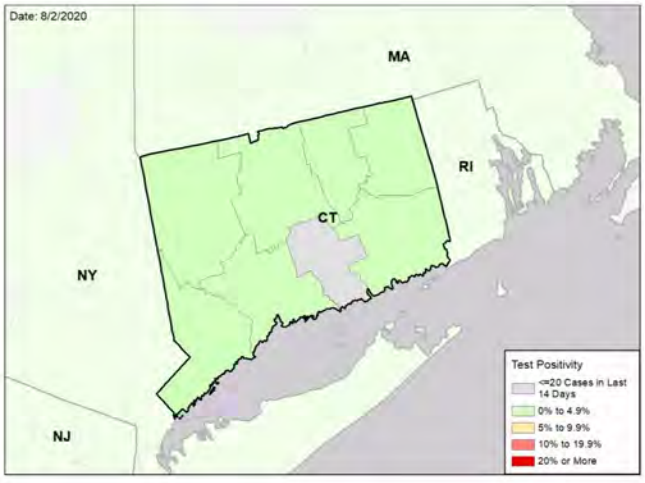
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

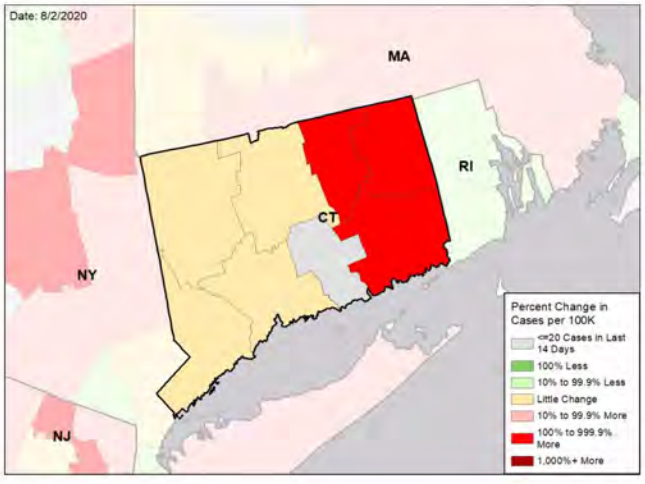
NEW CASES PER 100,000 DURING LAST WEEK



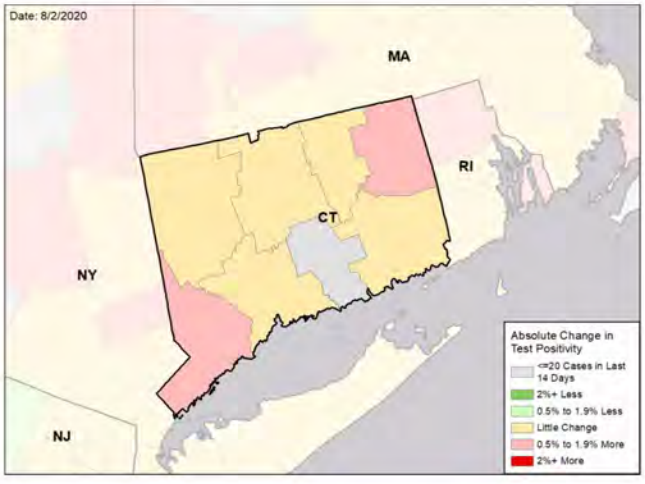
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

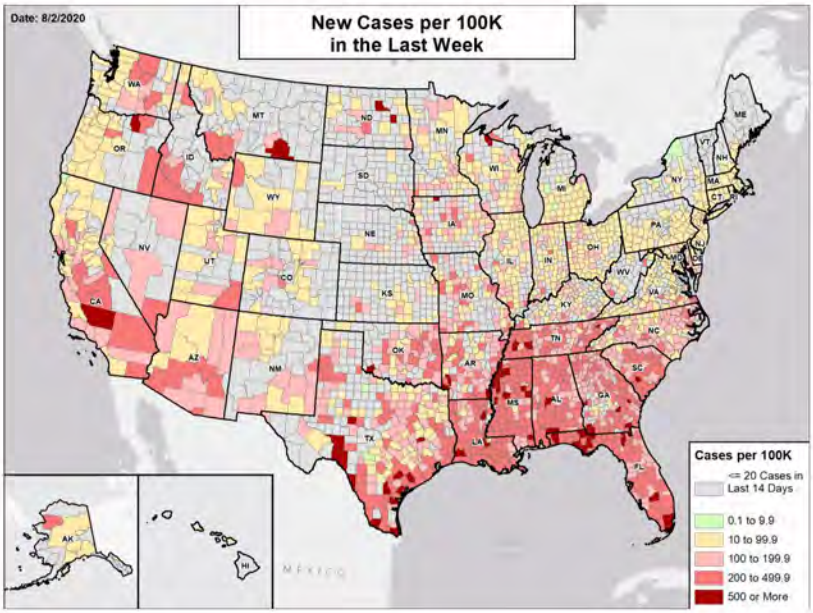


DATA SOURCES

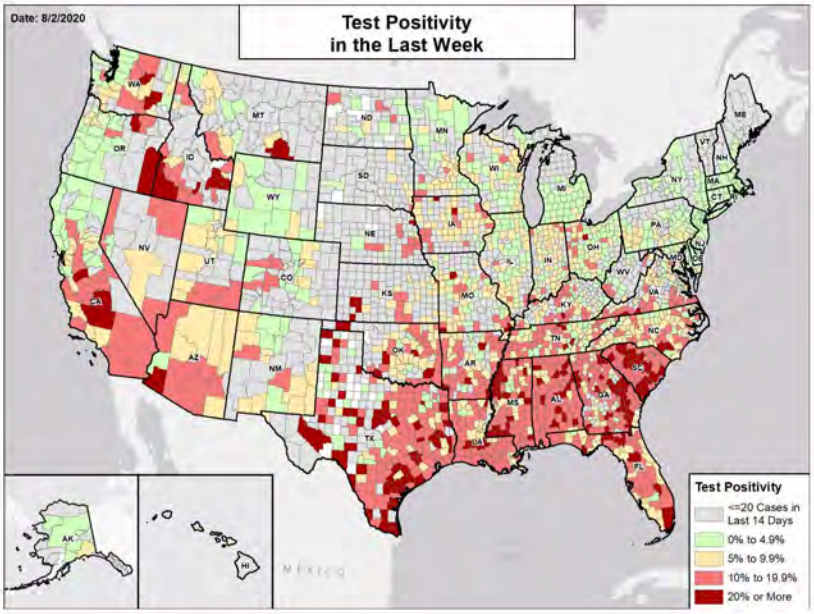
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

STATE REPORT | 08.02.2020

COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

DELAWARE

STATE REPORT | 08.02.2020

SUMMARY

- Delaware is in the yellow zone for cases with 89 new cases per 100,000 population last week, and the green zone for test positivity with a rate below 5%.
- Delaware has seen a decrease in new cases and stability in testing positivity over the past week.
- Rates have fallen in Sussex County, the site of many highly popular beaches and where intensified restrictions were implemented.
- Delaware had 73 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 5 to support operations activities from FEMA.
- Between Jul 25 - Jul 31, on average, 6 patients with confirmed COVID-19 and 23 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Delaware. An average of 75 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Consider targeted messaging for wearing of face masks, hand washing, and social distancing to individuals attending worship services; recommend testing for all attendees if cases are detected.
- Identify universities with RNA detection platforms; consider efforts to use this equipment to expand surveillance testing for university students and schools (K-12, community colleges).
- Continue closure or limited seating of bars in highly affected areas. Modulate business restrictions on occupancy or operation in other localities depending on changes in reported cases. Intensify efforts to improve compliance.
- Continue emphasis on masking requirements in more affected areas. Encourage masking statewide.
- Continue ongoing efforts to build contact tracing capacity, with interim use of National Guard personnel. Ensure all cases are contacted and all members of positive households are individually tested within 24 hours.
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates and increase community level testing. The efforts by the Delaware Division of Public Health (DPH) and the Healthy Communities Delaware (HCD) initiative to support communities are commended; consider targeted messaging using various dissemination methods to vulnerable populations through HCD collaborations.
- Message to residents that if they have vacationed in, or had visitors from, areas with high COVID-19 prevalence including the South and West of the United States, they should: avoid vulnerable individuals; remain socially distanced and masked when around others for a minimum of 14 days; avoid indoor gatherings where social distancing and masks cannot be maintained; and get tested if anyone in their family develops symptoms. Also, message that they can transmit the virus even when asymptomatic.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

DELAWARE

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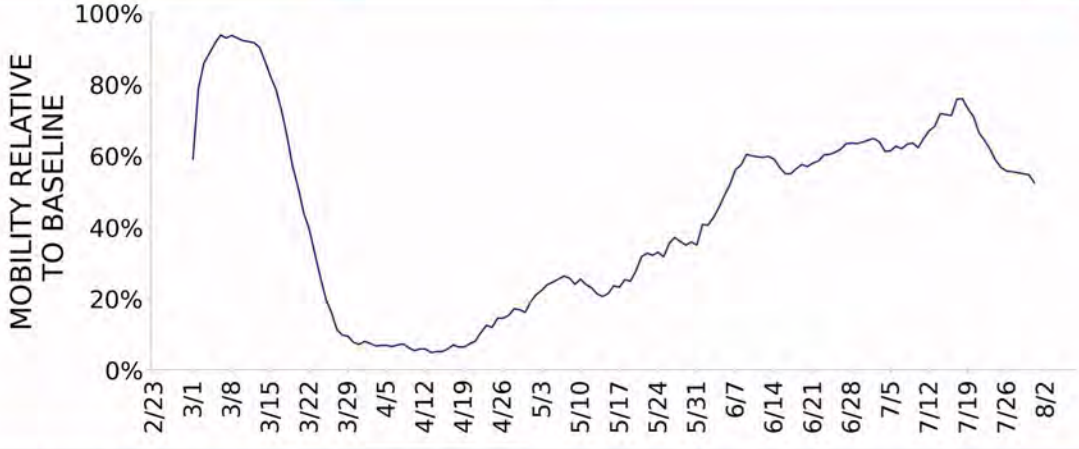
	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	706 (73)	-15.6%	22,651 (73)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	4.3%	+0.5%*	6.0%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	10,458** (1,074)	-14.0%**	545,608** (1,768)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	7 (1)	-87.7%	293 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	5.0%	-6.9%*	9.9%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

DELAWARE

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	0	N/A
COUNTY LAST WEEK	0	N/A	0	N/A

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

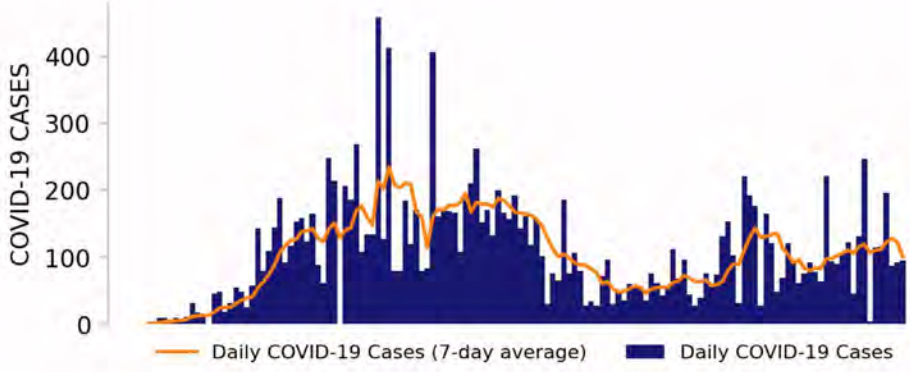
Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

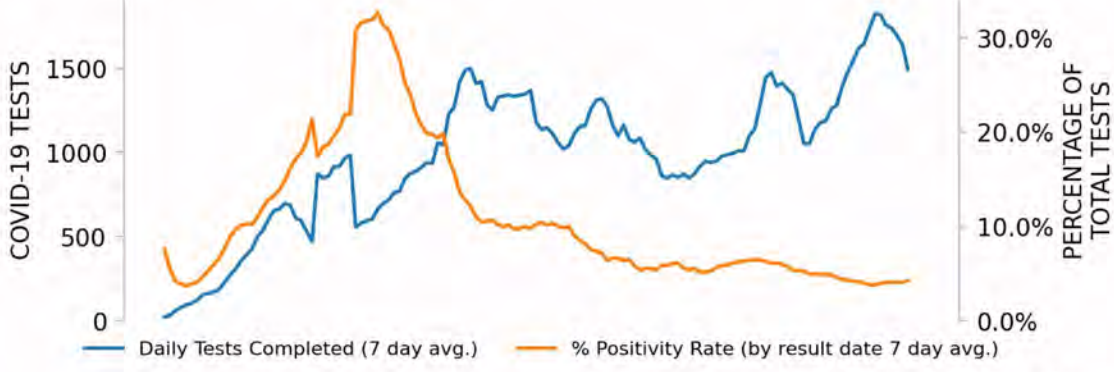
DELAWARE

STATE REPORT | 08.02.2020

NEW CASES

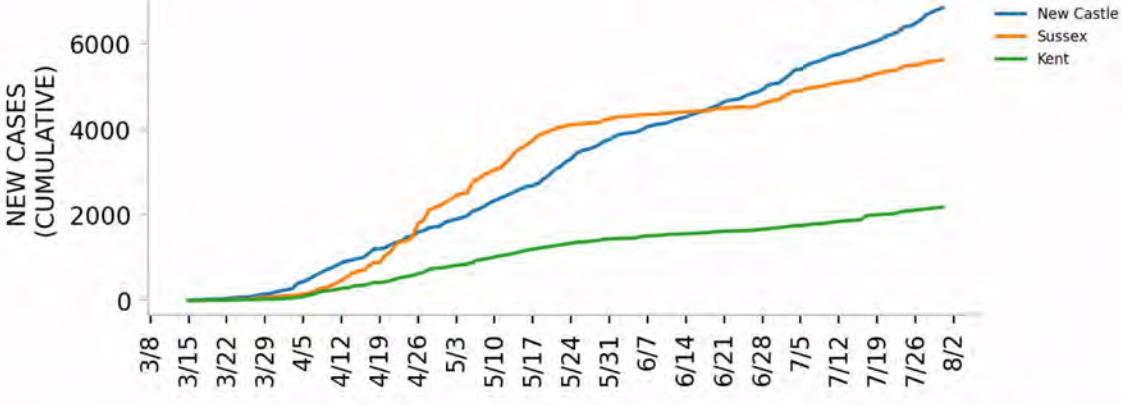


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

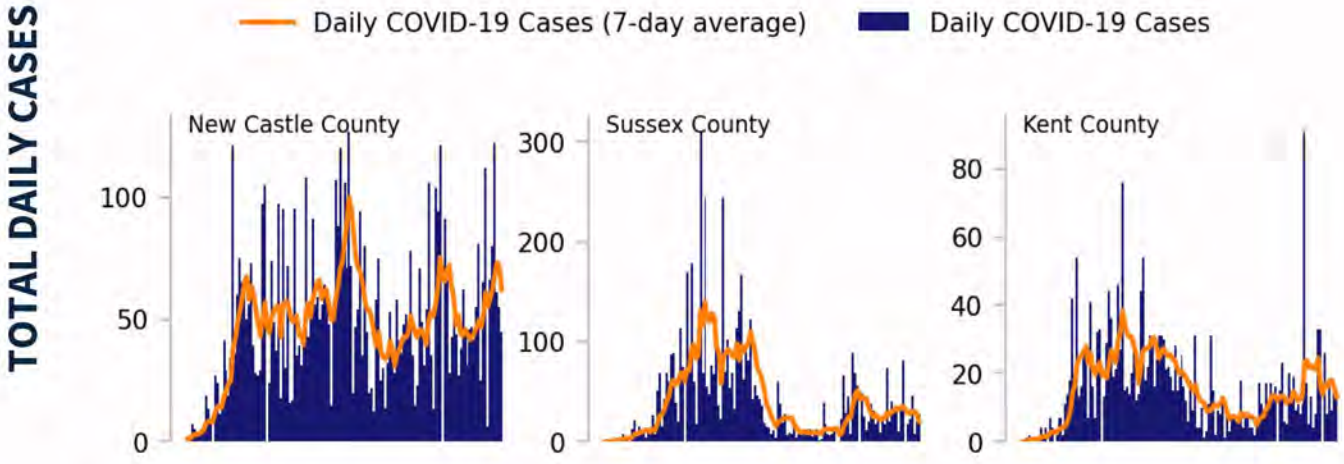


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

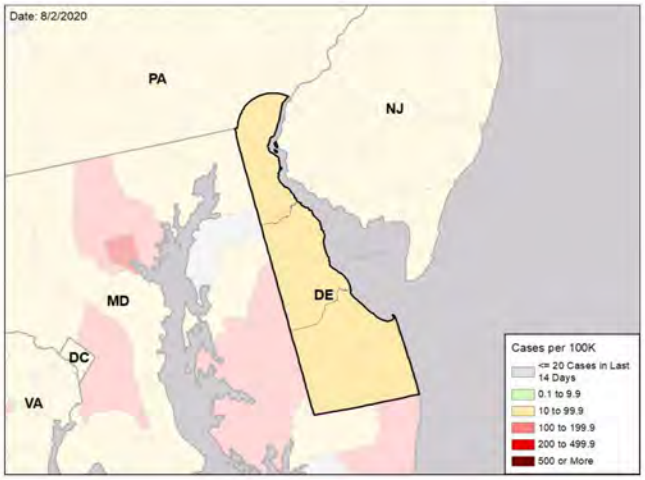
Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

DELAWARE

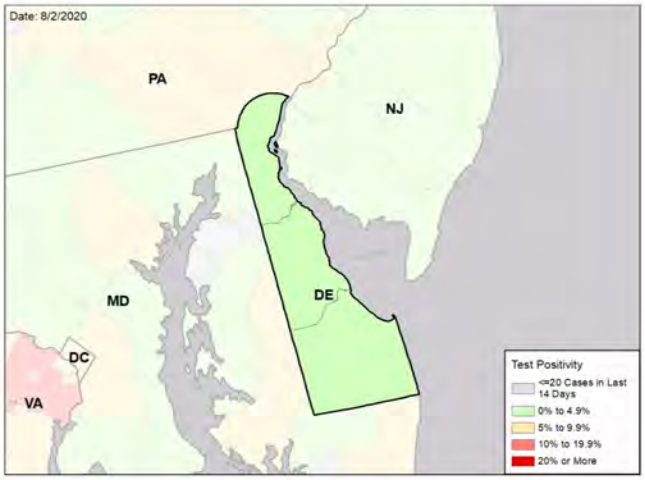
STATE REPORT | 08.02.2020

CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

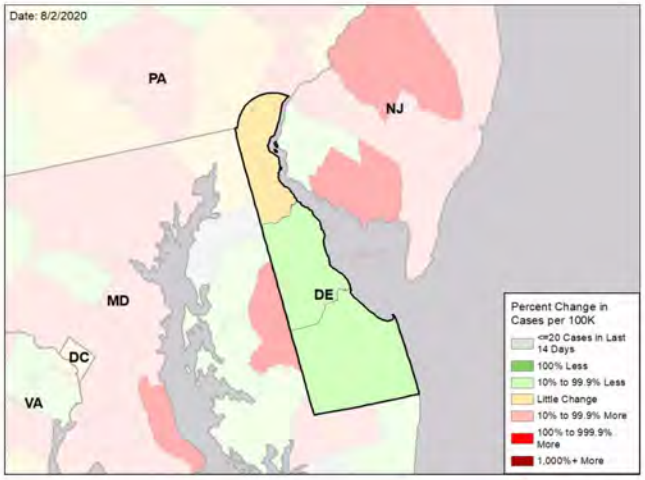
NEW CASES PER 100,000 DURING LAST WEEK



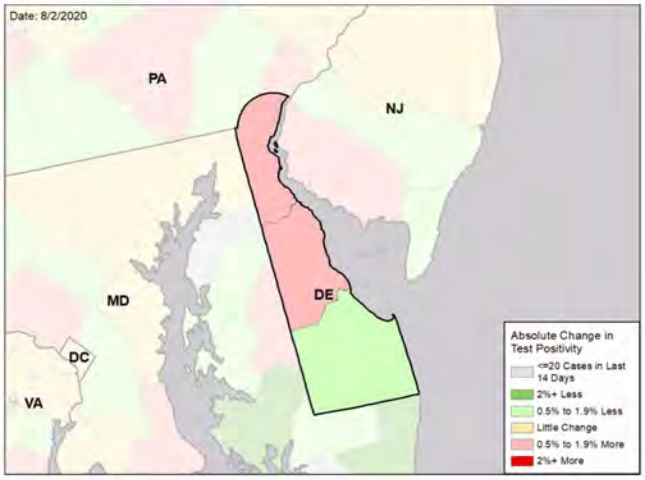
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



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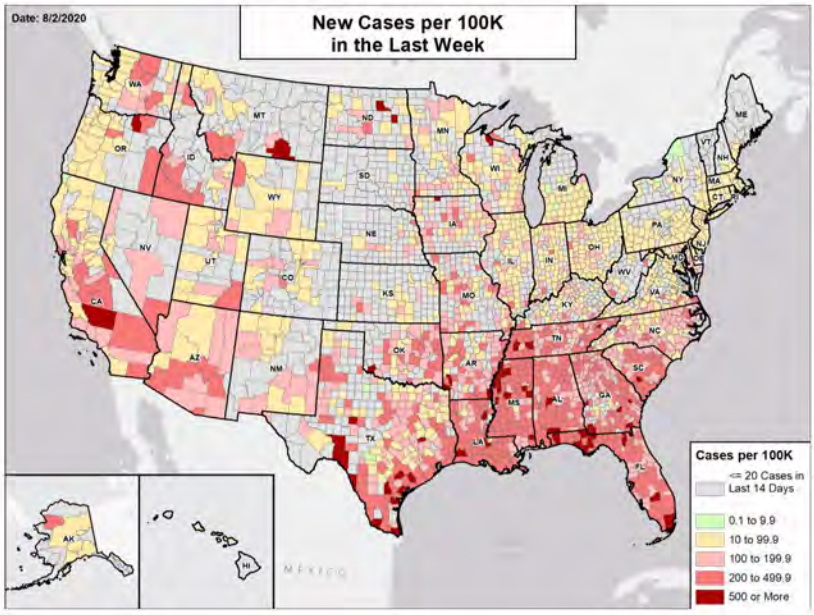
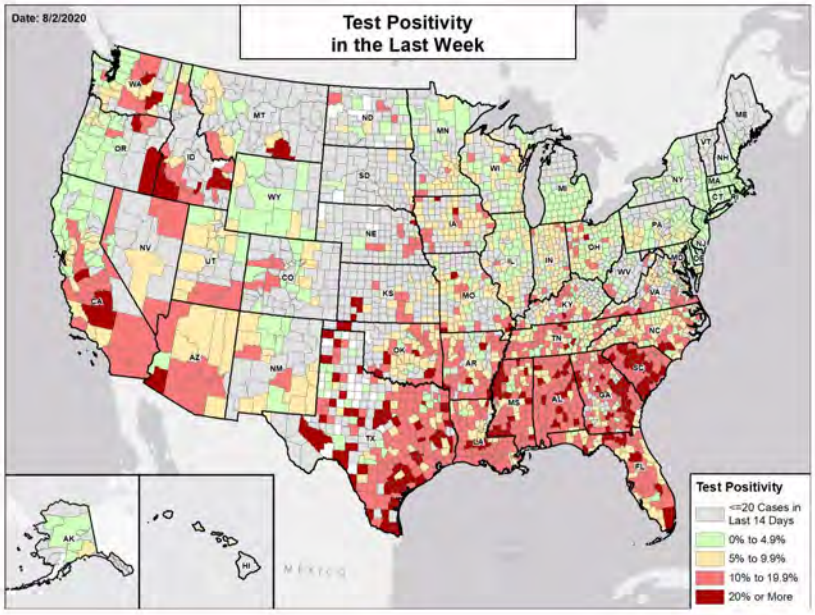
National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



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Methods

STATE REPORT | 08.02.2020

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Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
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Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

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THE DISTRICT OF COLUMBIA

STATE REPORT | 08.02.2020

SUMMARY

- The District of Columbia is in the yellow zone for cases, indicating between 10 to 100 new cases per 100,000 population last week, and the yellow zone for test positivity, indicating a rate between 5% to 10%.
- The District of Columbia has seen stability in new cases last week after several weeks of rising cases; testing positivity rates were also stable last week.
- The District of Columbia had 69 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 8 to support operations activities from FEMA.
- Between Jul 25 - Jul 31, on average, 8 patients with confirmed COVID-19 and 32 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in the District of Columbia. An average of 29 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Consider collaborating with counties/states within the National Capital Region on a COVID-19 containment strategy similar to efforts implemented by NJ-NY-CT.
- Actively promote testing of young people and those engaged in public activities, gatherings, and protests to ensure new cases are found before active community spread occurs.
- Adaptively modulate additional restrictions on occupancy or operation within the current phase 2 opening status for certain businesses (bars, restaurants) depending on further changes in case counts.
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates and increase community level testing.
- The efforts to surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates such as Columbia Heights and Brightwood are commended and should continue.
- Develop a strategic plan for the return of students to colleges and universities and for K-12 for the fall, including surge testing and mitigation strategies.
- Message to residents that if they have vacationed in, or had visitors from, areas with high COVID-19 prevalence, they should: avoid vulnerable individuals; remain socially distanced and masked when around others for a minimum of 14 days; avoid indoor gatherings where social distancing and masks cannot be maintained; and get tested if anyone in their family develops symptoms. Also, message that they can transmit the virus even when asymptomatic.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

THE DISTRICT OF COLUMBIA

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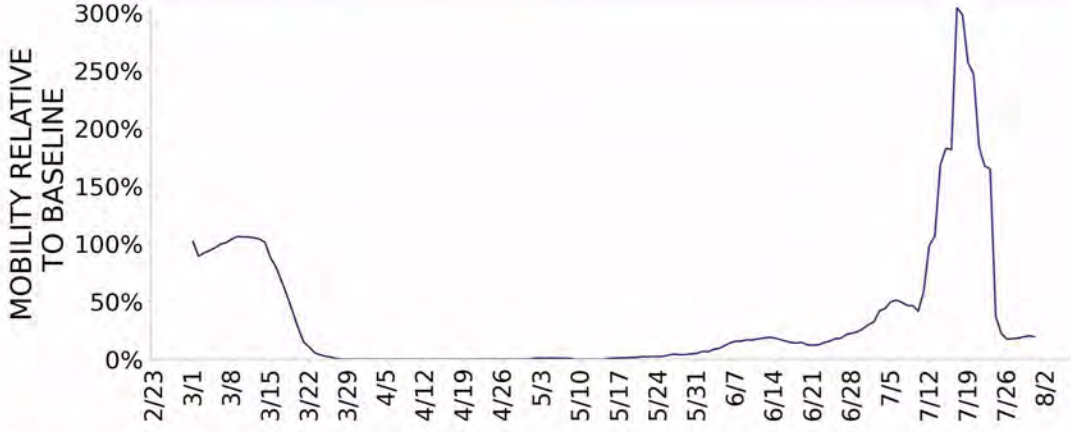
	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	488 (69)	-6.7%	22,651 (73)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	7.3%	-0.1%*	6.0%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	31,539** (4,469)	+2.4%**	545,608** (1,768)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	4 (1)	+0.0%	293 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	11.1%	-11.1%*	9.9%	12.3%

MOBILITY



* Indicates absolute change in percentage points.
** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	1	Washington-Arlington-Alexandria
COUNTY LAST WEEK	0	N/A	1	District of Columbia

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

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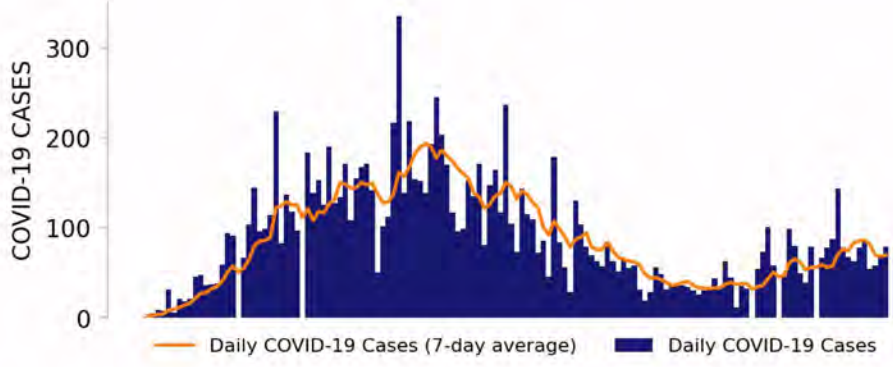
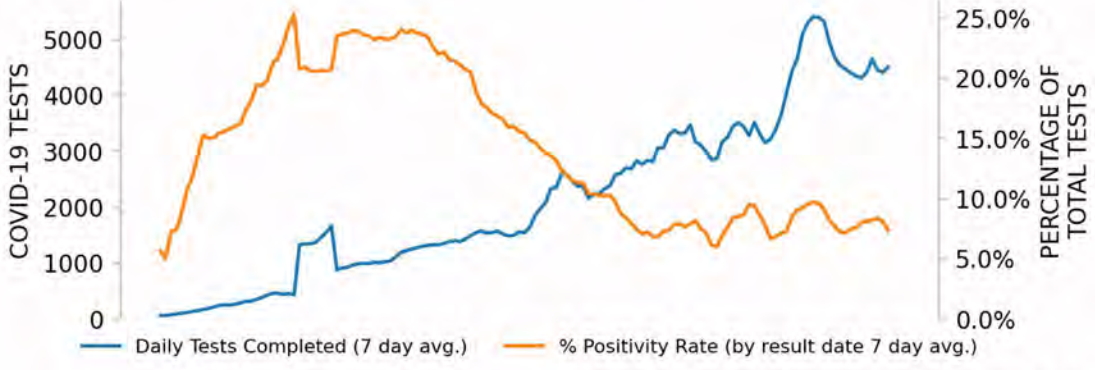
NEW CASES

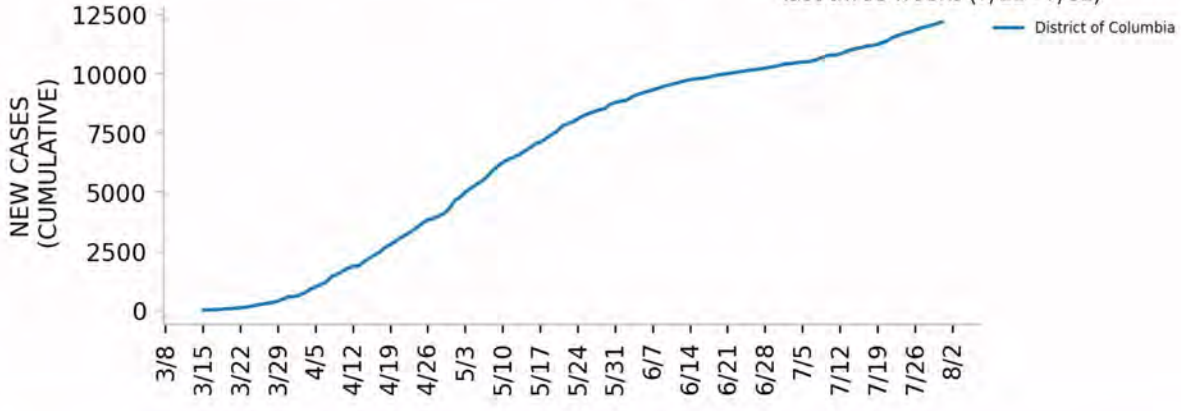


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

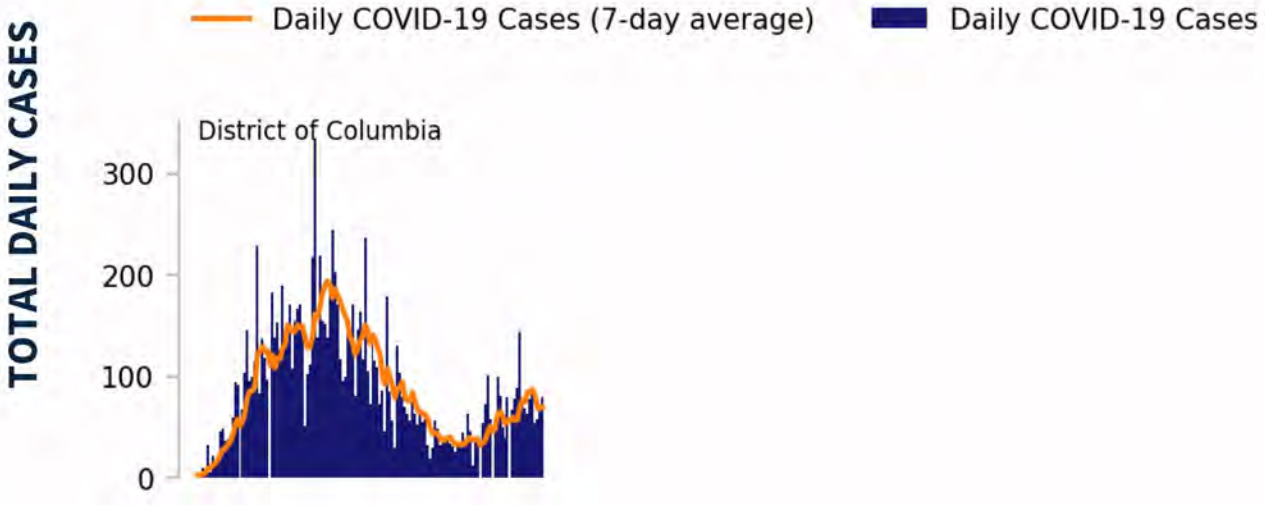


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

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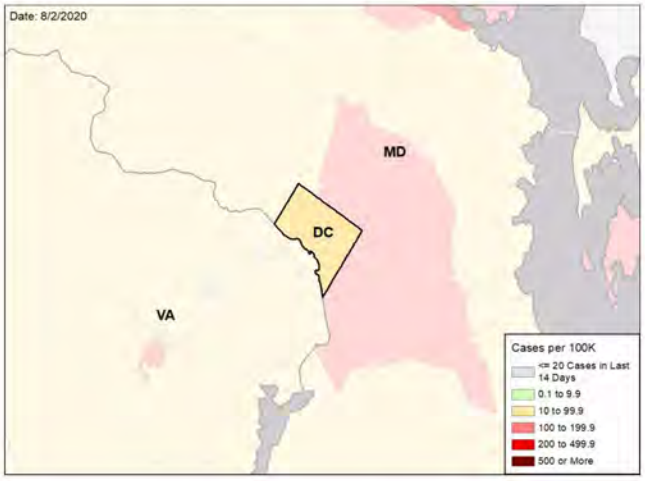
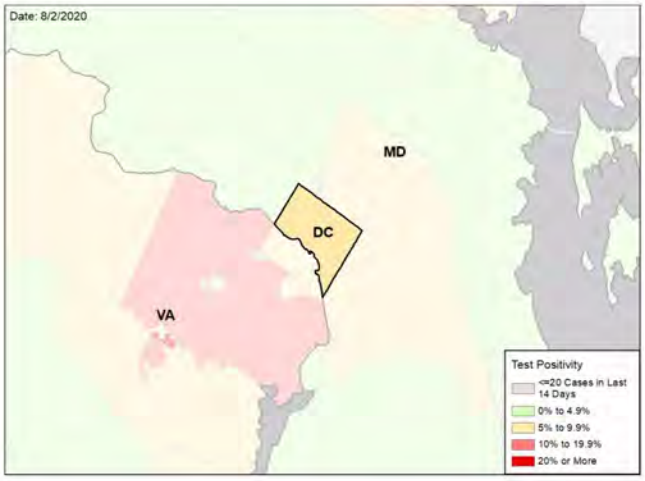
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

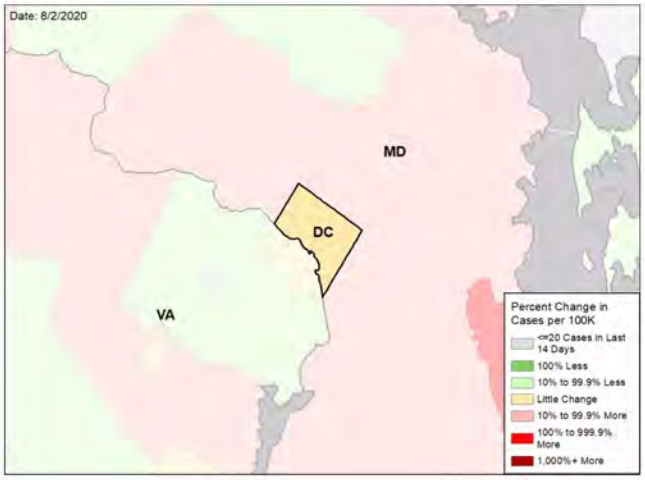
NEW CASES PER 100,000 DURING LAST WEEK



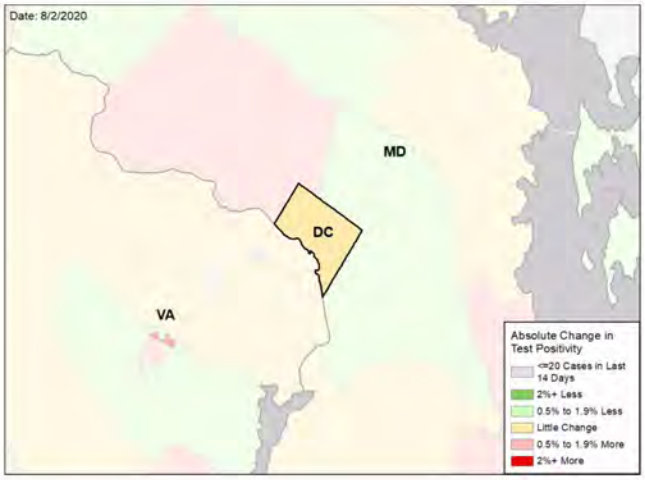
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

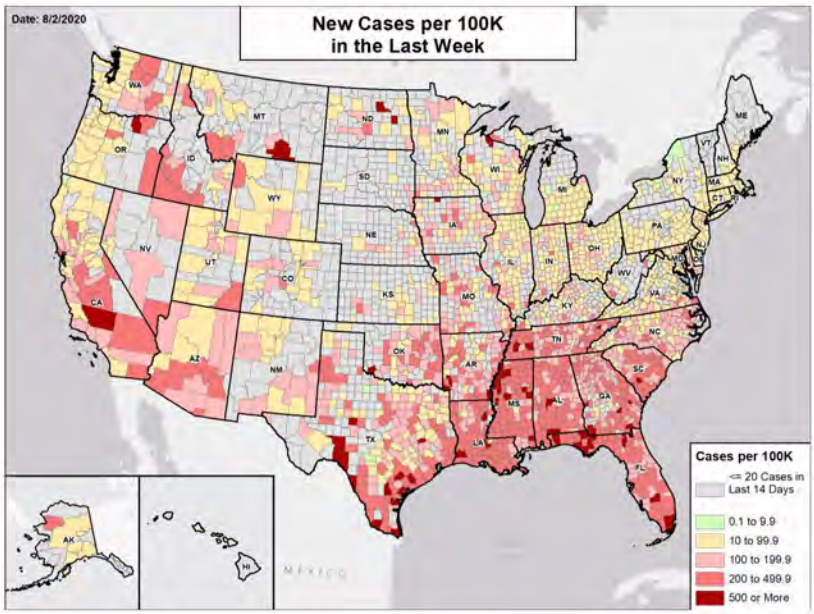


DATA SOURCES

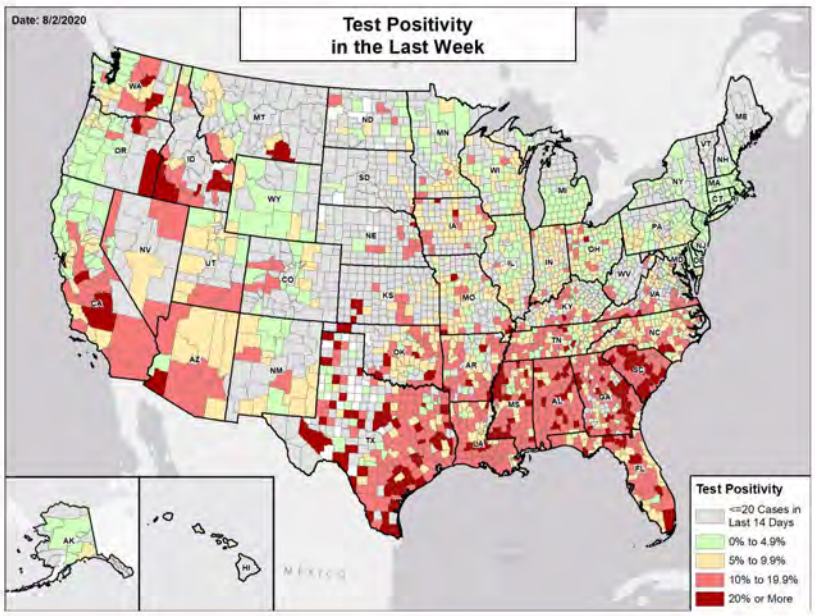
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

STATE REPORT | 08.02.2020

COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

FLORIDA

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SUMMARY

- Florida is in the red zone for COVID-19 cases, indicating more than 100 new cases per 100,000 population last week, and the red zone for COVID-19 test positivity, indicating a rate above 10%.
- Florida has seen stability in new cases and stability in testing positivity over the past week, indicating mitigation efforts are beginning to have an impact.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Miami-Dade County, 2. Broward County, and 3. Palm Beach County. These counties represent 45.5 percent of new cases in Florida.
- The high plateau of cases in Miami City and Miami County remains concerning.
- Florida had 317 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 3 to support operations activities from FEMA; 29 to support medical activities from ASPR; 6 to support operations activities from ASPR; 1 to support epidemiology activities from CDC; 1 to support operations activities from USACE; 53 to support operations activities from USCG; and 37 to support medical activities from VA.
- The federal government has supported a surge testing site in Miami, FL.
- Between Jul 25 - Jul 31, on average, 757 patients with confirmed COVID-19 and 599 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Florida. An average of 83 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Continue the aggressive protection of those in nursing homes, assisted living, and long-term care facilities by ensuring access to rapid facility-wide testing in response to a resident or staff member with COVID-19. Ensure social distancing and universal facemask use.
- Consider a statewide mask mandate for counties with 50 or more active cases to ensure consistent mask usage.
- In all counties with rising test percent positivity, continue bar closure, increase outdoor dining opportunities, and limit indoor dining to 25% of normal capacity.
- Ensure messaging to all citizens to limit social gatherings to 10 or fewer people. Cases seem to be coming from within households; need to ensure all citizens are limiting gatherings and protecting the members of their households with co-morbidities.
- Continue the scale-up of testing, moving to community-led neighborhood testing. Work with local community groups to increase household testing of multigenerational households with clear guidance on test positive isolation procedures and mask use.
- Ensure all individuals and households engaged in any multi-household activities are immediately tested, either in pools or as individuals.
- Increase messaging of the risk of serious disease in all age groups with preexisting medical conditions, including obesity, hypertension, and diabetes mellitus.
- Expand testing capacity in public health labs by adding shifts and weekend shifts to reduce turnaround times. Institute 3:1 or 2:1 pooling of test specimens to increase testing access and reduce turnaround times.
- Require all universities with RNA detection platforms to use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

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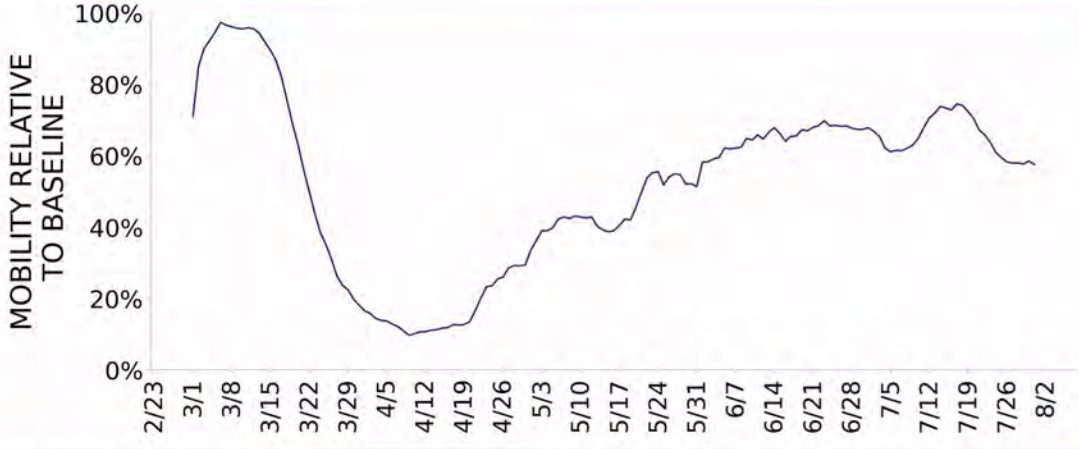
	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	68,074 (317)	-9.3%	158,298 (237)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	15.3%	-0.4%*	13.6%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	521,043** (2,426)	-20.2%**	1,078,189** (1,611)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	1,190 (6)	+39.8%	2,494 (4)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	36.0%	-0.6%*	22.5%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

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DATA SOURCES

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Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	**19** Top 12 shown (full list below)	Miami-Fort Lauderdale-Pompano Beach Orlando-Kissimmee-Sanford Tampa-St. Petersburg-Clearwater Jacksonville Pensacola-Ferry Pass-Brent Lakeland-Winter Haven Ocala Tallahassee Port St. Lucie Panama City Crestview-Fort Walton Beach-Destin Lake City	**10**	North Port-Sarasota-Bradenton Cape Coral-Fort Myers Deltona-Daytona Beach-Ormond Beach Naples-Marco Island Palm Bay-Melbourne-Titusville Gainesville Sebastian-Vero Beach Punta Gorda Key West The Villages
COUNTY LAST WEEK	**41** Top 12 shown (full list below)	Miami-Dade Broward Palm Beach Orange Hillsborough Duval Pinellas Polk Osceola Escambia Manatee Marion	**24** Top 12 shown (full list below)	Lee Collier Volusia Sarasota Pasco Seminole Brevard Leon Alachua St. Johns Indian River Jackson

All Red CBSAs: Miami-Fort Lauderdale-Pompano Beach, Orlando-Kissimmee-Sanford, Tampa-St. Petersburg-Clearwater, Jacksonville, Pensacola-Ferry Pass-Brent, Lakeland-Winter Haven, Ocala, Tallahassee, Port St. Lucie, Panama City, Crestview-Fort Walton Beach-Destin, Lake City, Homosassa Springs, Sebring-Avon Park, Palatka, Clewiston, Arcadia, Okeechobee, Wauchula
All Red Counties: Miami-Dade, Broward, Palm Beach, Orange, Hillsborough, Duval, Pinellas, Polk, Osceola, Escambia, Manatee, Marion, Bay, St. Lucie, Santa Rosa, Lake, Columbia, Okaloosa, Clay, Martin, Hernando, Gadsden, Citrus, Highlands, Putnam, Hendry, DeSoto, Suwannee, Okeechobee, Washington, Madison, Gulf, Hardee, Baker, Taylor, Bradford, Hamilton, Jefferson, Union, Liberty, Lafayette
All Yellow Counties: Lee, Collier, Volusia, Sarasota, Pasco, Seminole, Brevard, Leon, Alachua, St. Johns, Indian River, Jackson, Charlotte, Monroe, Walton, Nassau, Sumter, Wakulla, Flagler, Levy, Gilchrist, Dixie, Calhoun, Franklin

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.
Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."
Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
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FLORIDA

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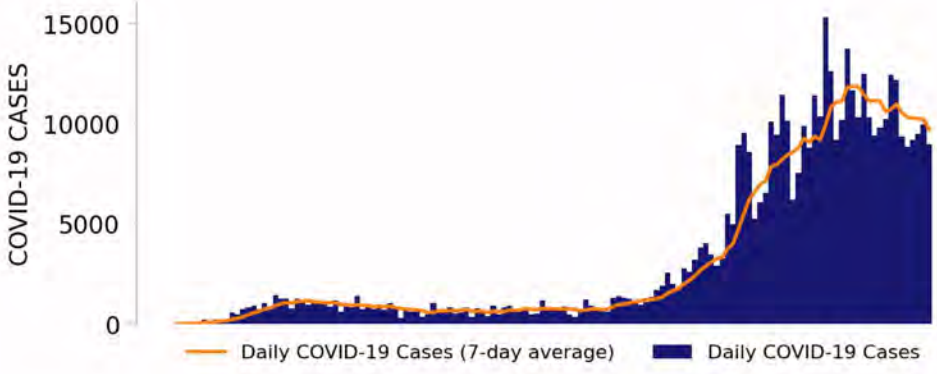
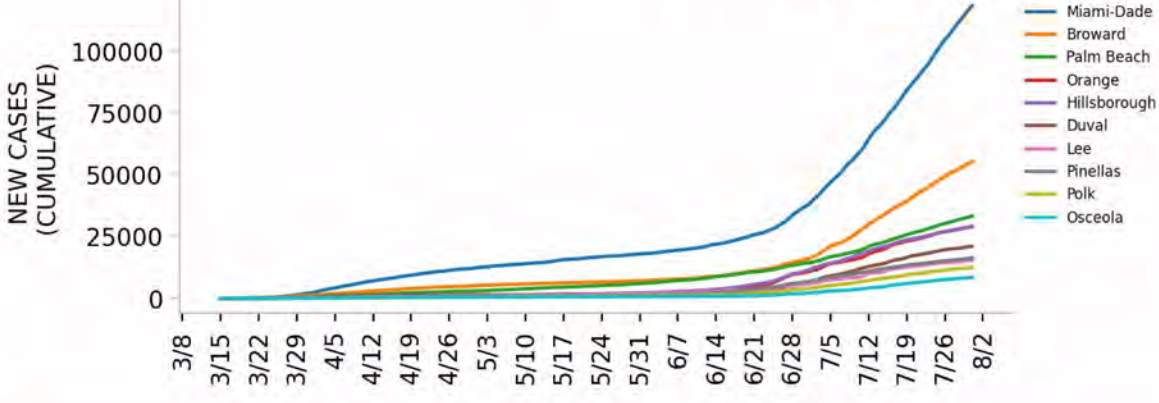
NEW CASES



TESTING

TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)



DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

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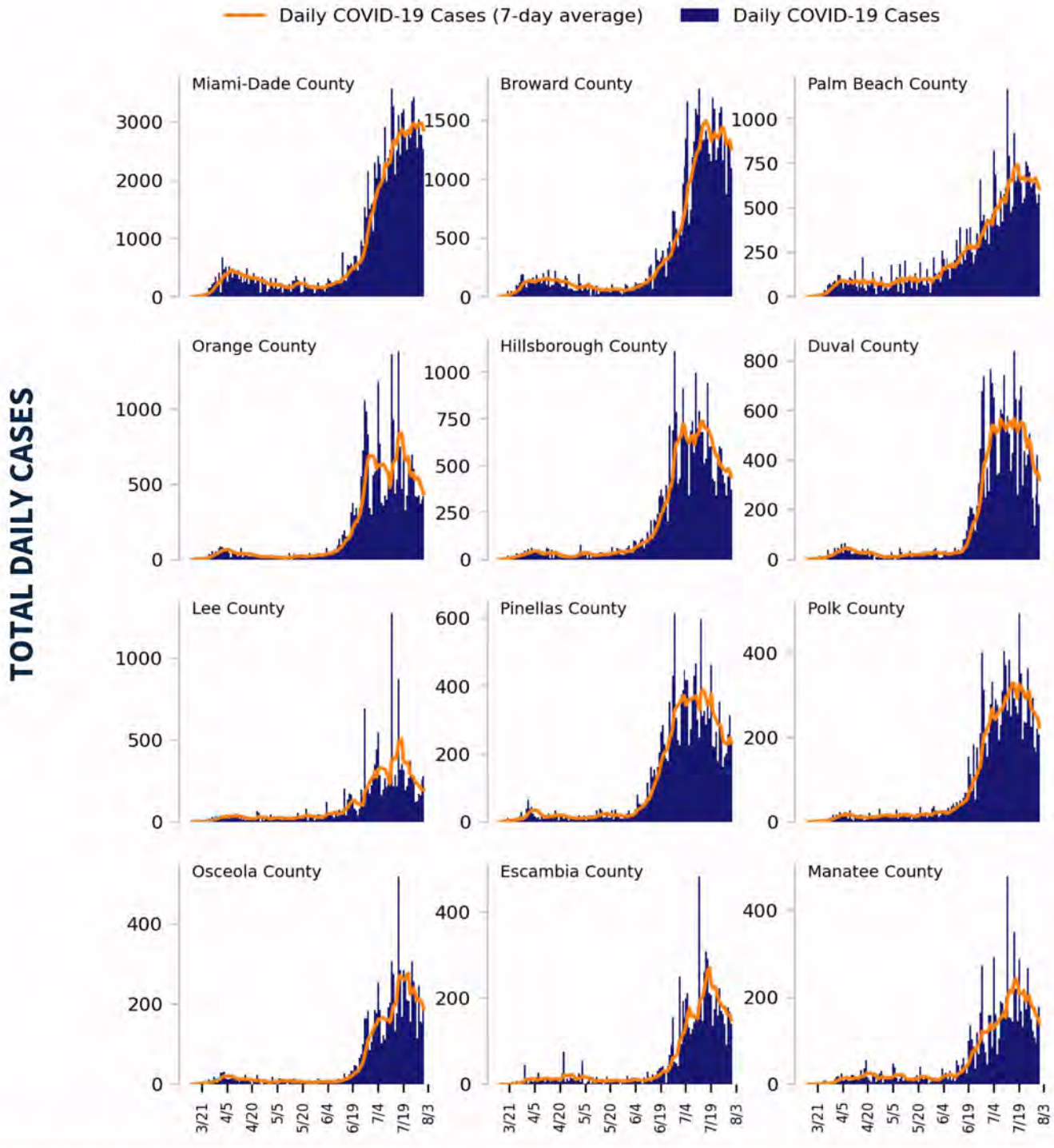
Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

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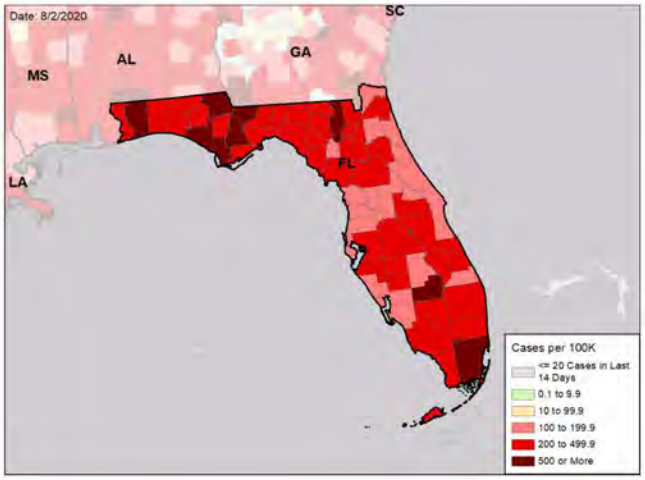
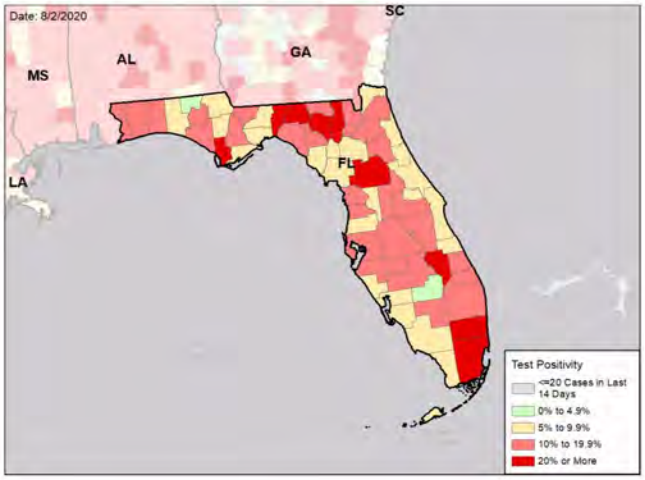
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

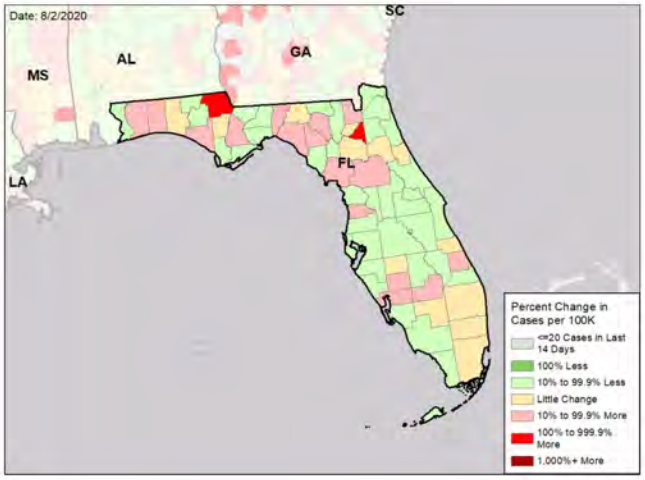
NEW CASES PER 100,000 DURING LAST WEEK



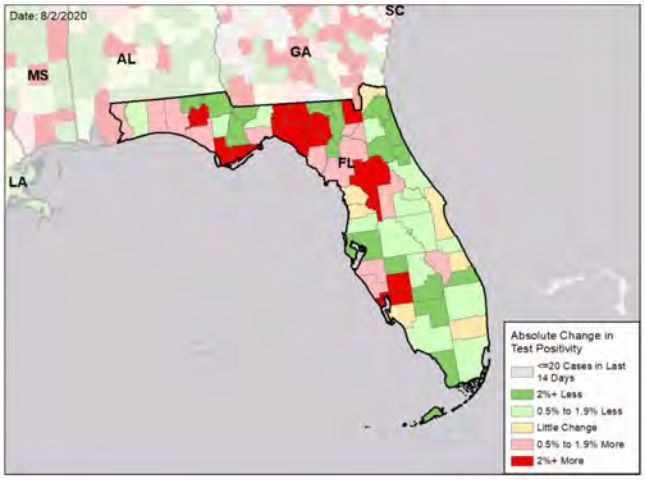
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

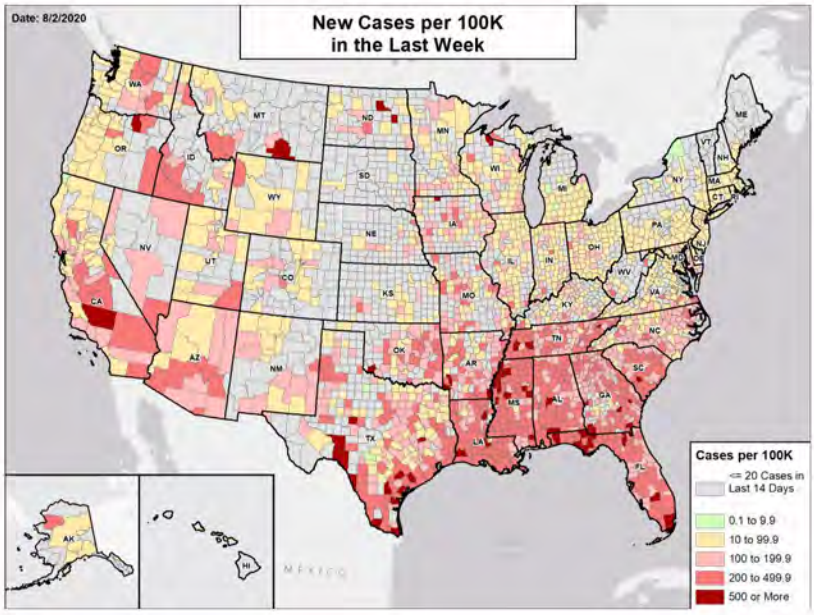


DATA SOURCES

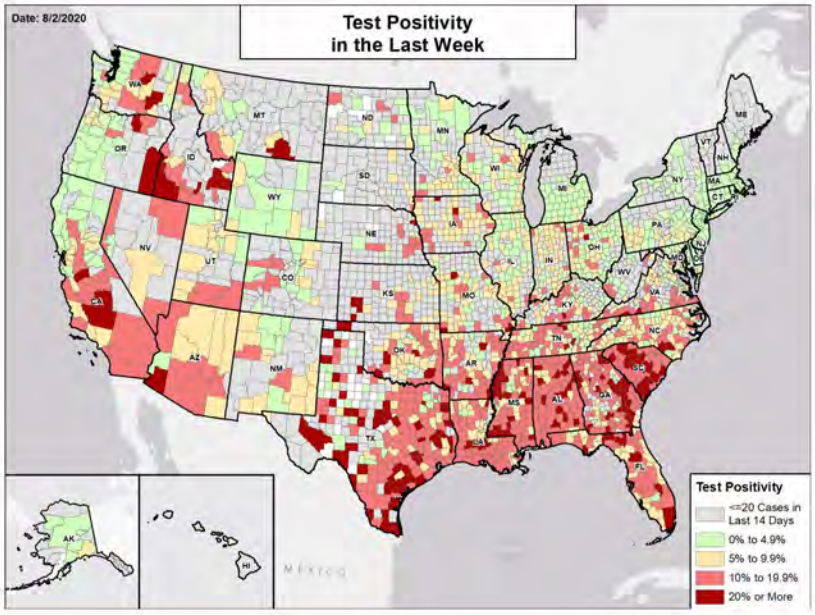
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

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COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

GEORGIA

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SUMMARY

- Georgia is in the red zone for COVID-19 cases, indicating more than 100 new cases per 100,000 population last week, and the red zone for COVID-19 test positivity, indicating a rate above 10%.
- Georgia continues to experience a high plateau of case incidence and saw an increase in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Fulton County, 2. Gwinnett County, and 3. Cobb County. These counties represent 24.5 percent of new cases in Georgia.
- There is significant community spread throughout the state in metro areas and their surrounding counties, as well as some rural counties.
- Georgia had 235 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 102 to support operations activities from FEMA; 10 to support operations activities from ASPR; 22 to support epidemiology activities from CDC; 1 to support operations activities from USCG; 3 to support medical activities from VA; and 1 to support operations activities from VA.
- Between Jul 25 - Jul 31, on average, 337 patients with confirmed COVID-19 and 323 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Georgia. An average of 76 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- With expanding community spread, ensure weekly testing of all workers in assisted living and long-term care facilities, and require masks and social distancing for all visitors.
- Consider a statewide mask mandate due to increased cases across the state.
- In counties in the red zone, close establishments where social distancing and mask use cannot occur, such as bars, nightclubs, and entertainment venues.
- Consider further limitations to indoor dining, including restricting indoor dining to less than 25% occupancy. Expand outdoor dining.
- Ask every citizen to limit social gatherings to fewer than 10 people.
- Increase messaging of the risk of serious disease in all age groups with preexisting medical conditions, including obesity, hypertension, and diabetes mellitus.
- Continue the scale-up of testing, moving to community-led neighborhood testing. Work with local communities to implement and provide clear guidance for households that test positive, including individual isolation and quarantining procedures.
- Continue to enhance contact tracing and ensure the ability of cases and contacts to quarantine or isolate safely.
- Continue to monitor testing data to identify additional sites of increased transmission and focus public health resources there.
- Ensure every public health lab is fully staffed and running 24/7 and utilizing all platforms to reduce turnaround times. Institute 2:1 pooling of specimens on all high throughput machines as long as turnaround times are greater than 36 hours.
- Require all universities with RNA detection platforms to use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

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	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	24,963 (235)	-4.8%	158,298 (237)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	13.9%	+1.1%*	13.6%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	74,459** (701)	-49.1%**	1,078,189** (1,611)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	311 (3)	+0.0%	2,494 (4)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	21.1%	+0.9%*	22.5%	12.3%

MOBILITY

* Indicates absolute change in percentage points.
** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	32 Top 12 shown (full list below)	Atlanta-Sandy Springs-Alpharetta Augusta-Richmond County Savannah Columbus Macon-Bibb County Gainesville Dalton Valdosta Athens-Clarke County Warner Robins Waycross Rome	6	Brunswick Albany Chattanooga St. Marys Moultrie Americus
COUNTY LAST WEEK	110 Top 12 shown (full list below)	Fulton Gwinnett Chatham Richmond Clayton Hall Muscogee Bibb Whitfield Henry Lowndes Columbia	27 Top 12 shown (full list below)	Cobb Cherokee Clarke Glynn Coweta Dougherty Camden Colquitt Catoosa Walker Lumpkin Butts

All Red CBSAs: Atlanta-Sandy Springs-Alpharetta, Augusta-Richmond County, Savannah, Columbus, Macon-Bibb County, Gainesville, Dalton, Valdosta, Athens-Clarke County, Warner Robins, Waycross, Rome, Dublin, Douglas, Calhoun, Statesboro, LaGrange, Jesup, Hinesville, Jefferson, Thomasville, Vidalia, Cedartown, Milledgeville, Bainbridge, Cornelia, Tifton, Toccoa, Fitzgerald, Summerville, Thomaston, Eufaula

All Red Counties: Fulton, Gwinnett, Chatham, Richmond, Clayton, Hall, Muscogee, Bibb, Whitfield, Henry, Lowndes, Columbia, Douglas, Houston, Forsyth, Newton, Carroll, Bartow, Paulding, Floyd, Gordon, Bulloch, Rockdale, Ware, Barrow, Troup, Wayne, Fayette, Jackson, Coffee, Liberty, Walton, Thomas, Laurens, Effingham, Polk, Decatur, Spalding, Bryan, Baldwin, Toombs, Habersham, Charlton, Tift, Gilmer, Stephens, Appling, Murray, Jefferson, Burke, Washington, Tattnall, Jeff Davis, Emanuel, Harris, Monroe, Peach, Pickens, Madison, Putnam, Evans, Cook, Oconee, Hart, Elbert, Grady, Fannin, Brooks, Chattahoochee, Pierce, Candler, Greene, Jones, Rabun, Dawson, Morgan, Bacon, Ben Hill, Franklin, Chattooga, Johnson, Jenkins, Brantley, Upson, Berrien, Haralson, Banks, Seminole, Oglethorpe, Pike, Montgomery, Worth, Miller, Lincoln, Screven, Clinch, Twiggs, Hancock, Irwin, Long, Lanier, Terrell, Randolph, Treutlen, Bleckley, Marion, Early, Taylor, Turner, Jasper

All Yellow Counties: Cobb, Cherokee, Clarke, Glynn, Coweta, Dougherty, Camden, Colquitt, Catoosa, Walker, Lumpkin, Butts, White, Mitchell, Sumter, Meriwether, Union, Lee, Wilkes, Telfair, Lamar, Wilkinson, Heard, Towns, Macon, Dade, Dooly

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

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POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
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POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
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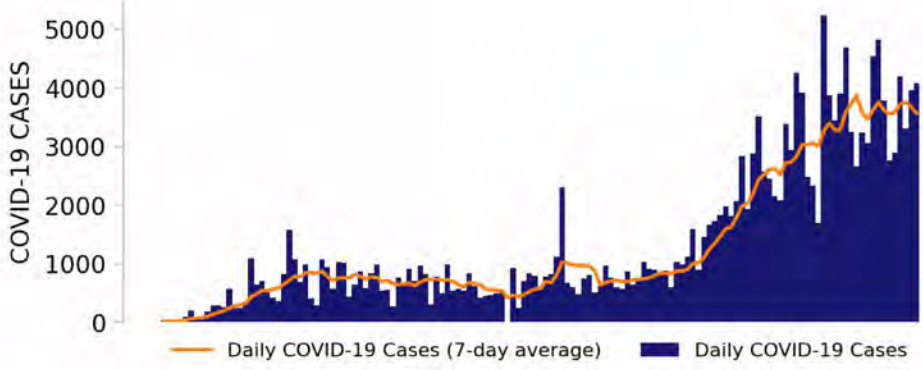
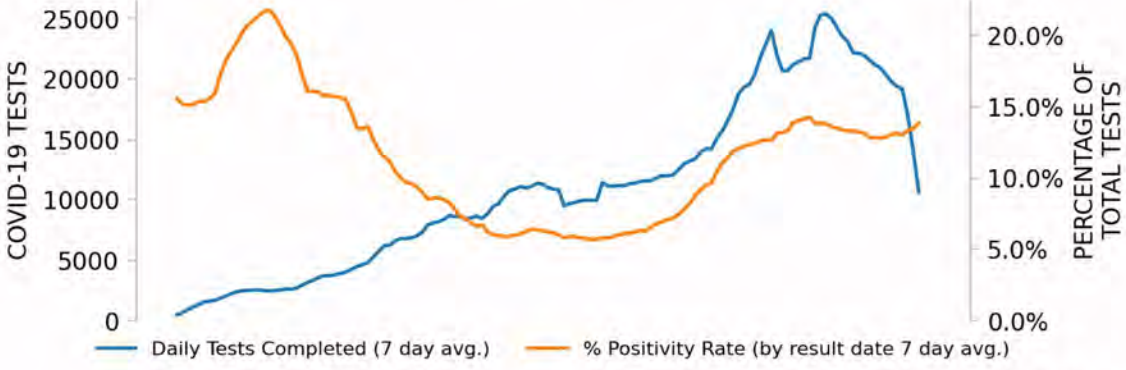
NEW CASES

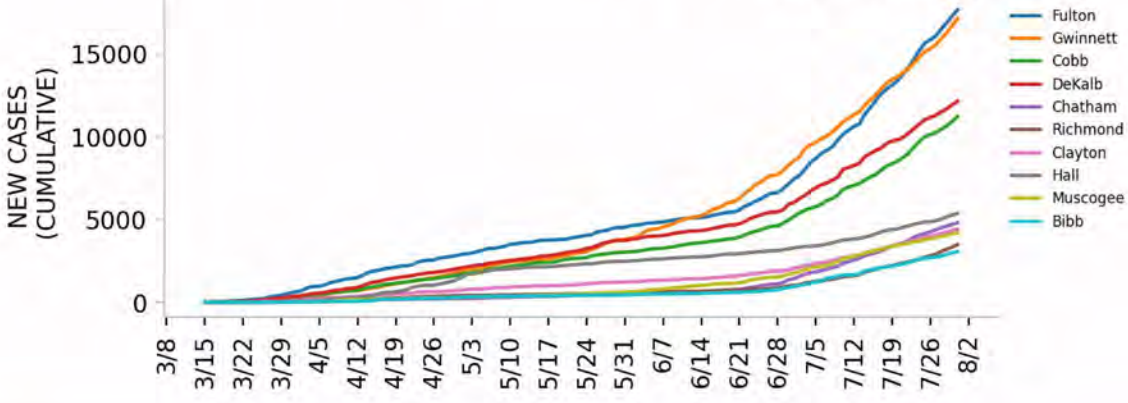


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)



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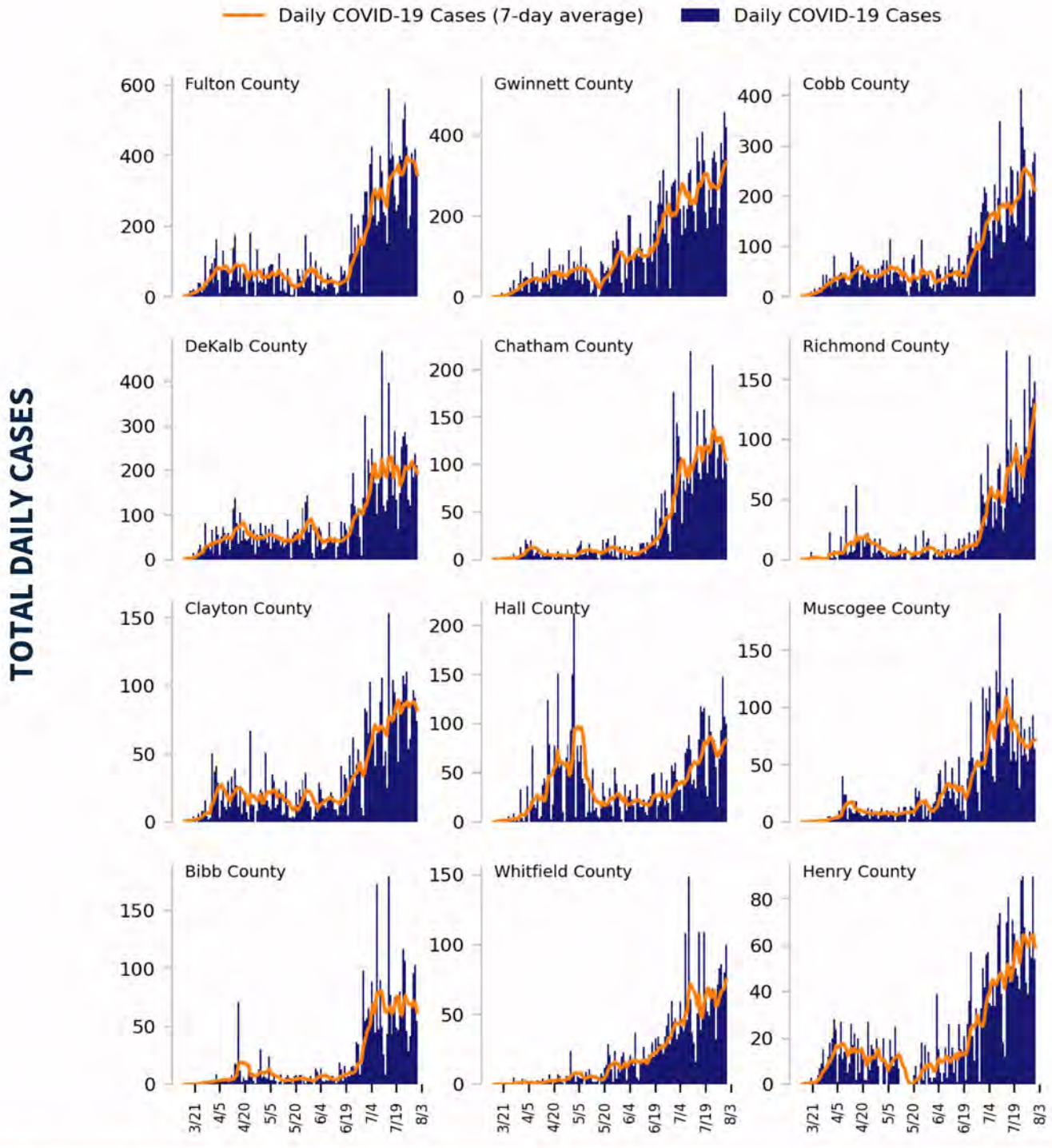
Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

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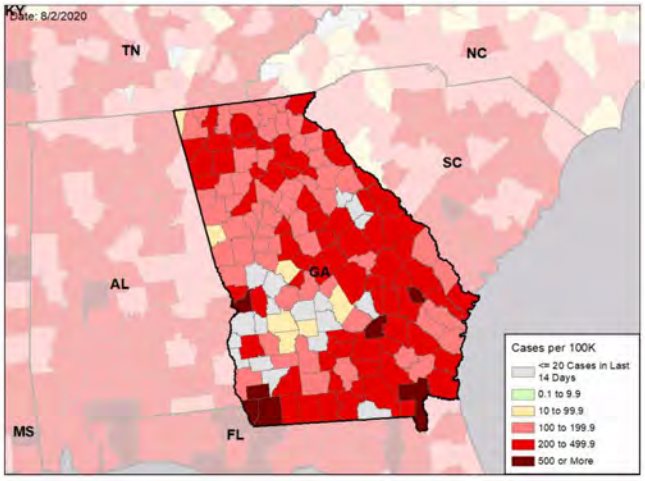
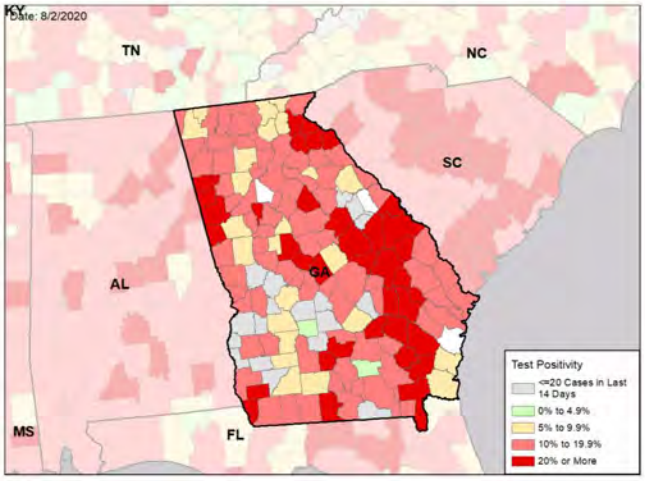
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

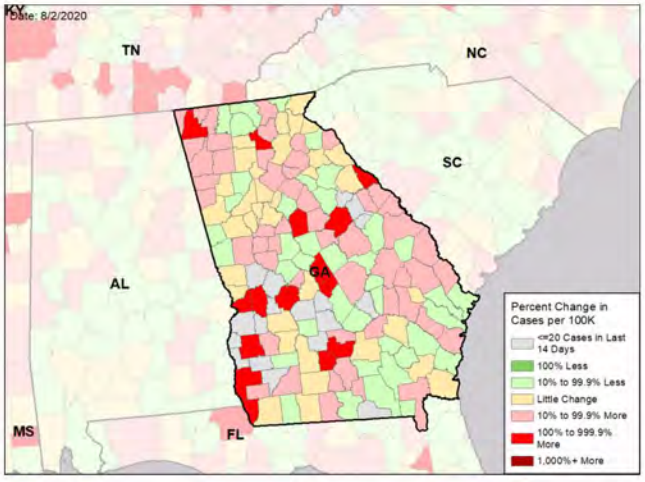
NEW CASES PER 100,000 DURING LAST WEEK



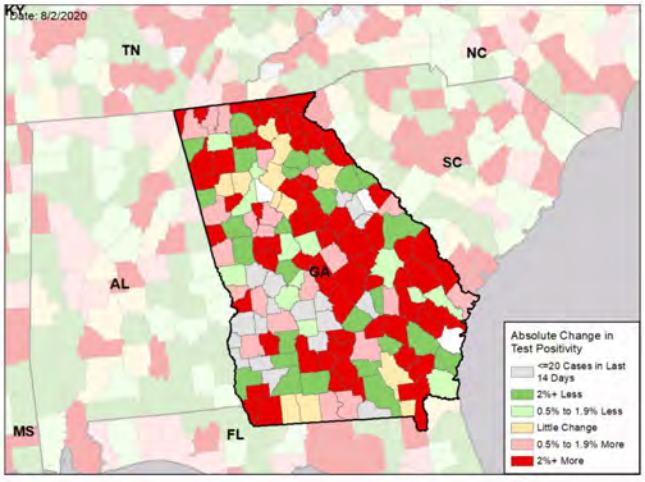
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

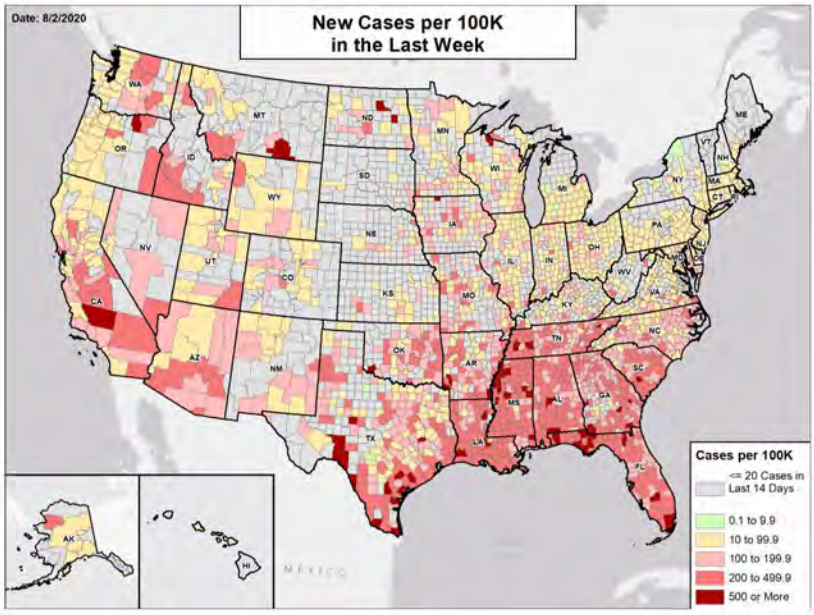


DATA SOURCES

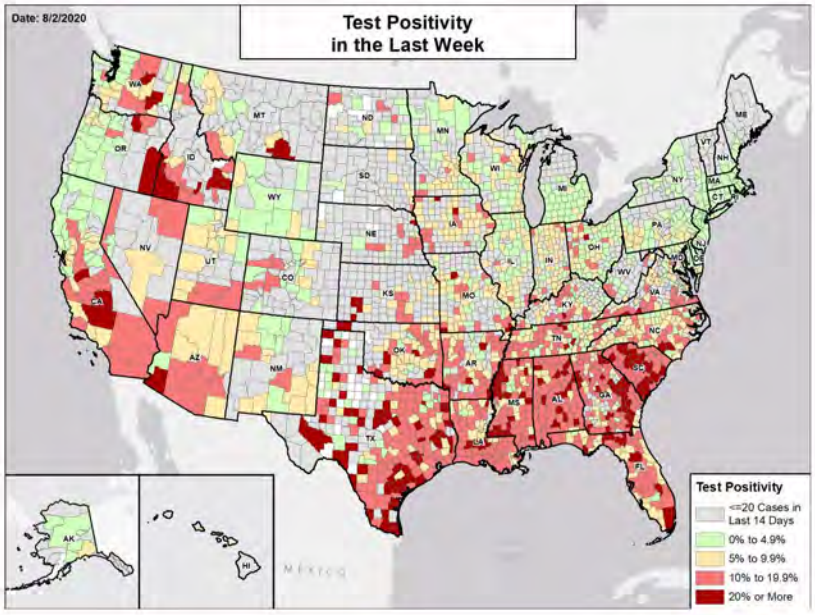
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
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Methods

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COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

HAWAII

STATE REPORT | 08.02.2020

SUMMARY

- Hawaii is in the yellow zone for cases, indicating between 10 to 100 new cases per 100,000 population last week, and the yellow zone for test positivity, indicating a rate between 5% to 10%.
- Hawaii has seen an increase in new cases and an increase in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Honolulu County, 2. Maui County, and 3. Hawaii County. These counties represent 99.2 percent of new cases in Hawaii.
- Hawaii had 40 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 16 to support operations activities from FEMA and 14 to support operations activities from USCG.
- Between Jul 25 - Jul 31, on average, 9 patients with confirmed COVID-19 and 41 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Hawaii. An average of 67 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Given steep increase in cases in Honolulu, intensify restrictions there, including closing of indoor bars, gyms and indoor dining.
- Given the increase in case rates and test positivity, consider surge testing and intensifying restrictions in Honolulu and Maui.
- In areas with insufficient testing and long turnaround times, increase testing capacity by implementing pooled testing as described below, ensure all public health labs are staffed and running 24/7, and require all universities with suitable platforms to use their equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Implement strong public messaging on limiting social gatherings.
- Monitor wearing of cloth face masks and enforce use of face masks in all indoor spaces outside of the home. Consider fines for persons not wearing face masks in indoor settings in Honolulu.
- Continue intensified contact tracing efforts, coupled with early quarantine of all contacts and isolation of cases. Focus resources in areas with increasing case rates or test positivity, such as Honolulu and Maui.
- Continue to ensure that nursing home residents are protected by requiring testing at admission and testing in the event that any resident or staff are diagnosed with COVID-19. Staff should be tested periodically and required to wear face masks at all times when at work.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

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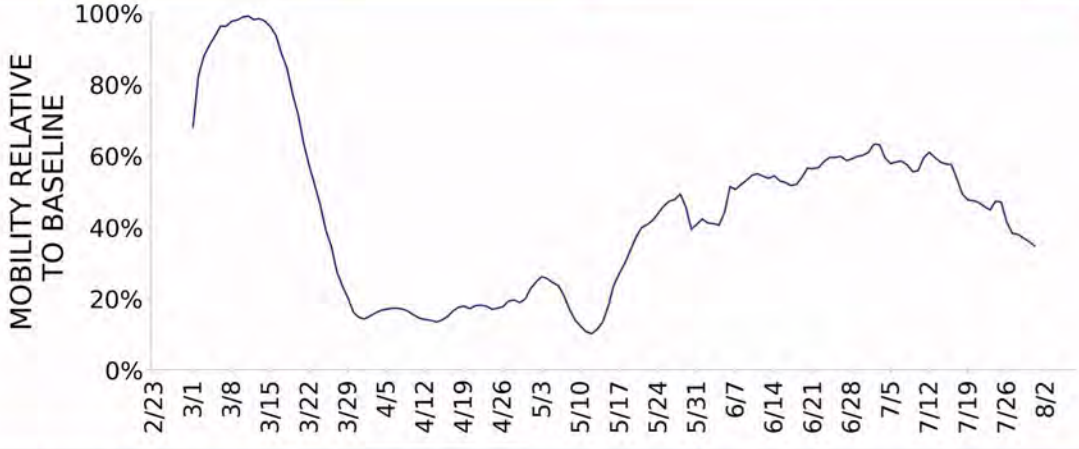
	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	563 (40)	+164.3%	87,028 (170)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	5.3%	+2.6%*	11.0%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	14,038** (991)	-5.5%**	958,730** (1,869)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	0 (0)	-100.0%	1,403 (3)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	2.3%	+0.0%*	15.7%	12.3%

MOBILITY



* Indicates absolute change in percentage points.
** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

HAWAII

STATE REPORT | 08.02.2020

COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	1	Urban Honolulu
COUNTY LAST WEEK	0	N/A	1	Honolulu

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

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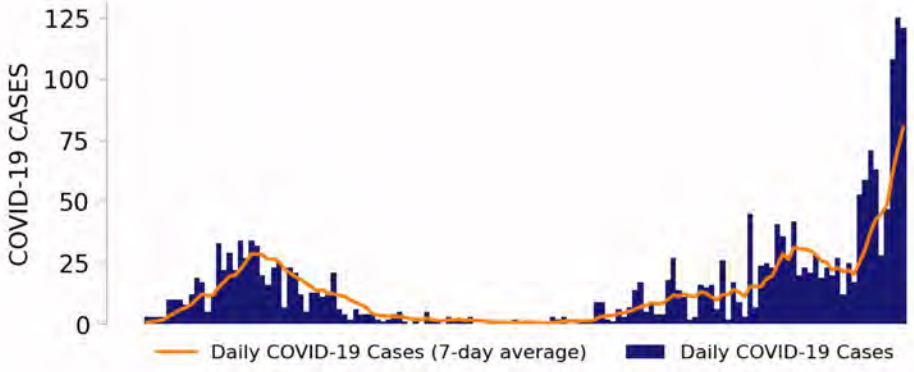
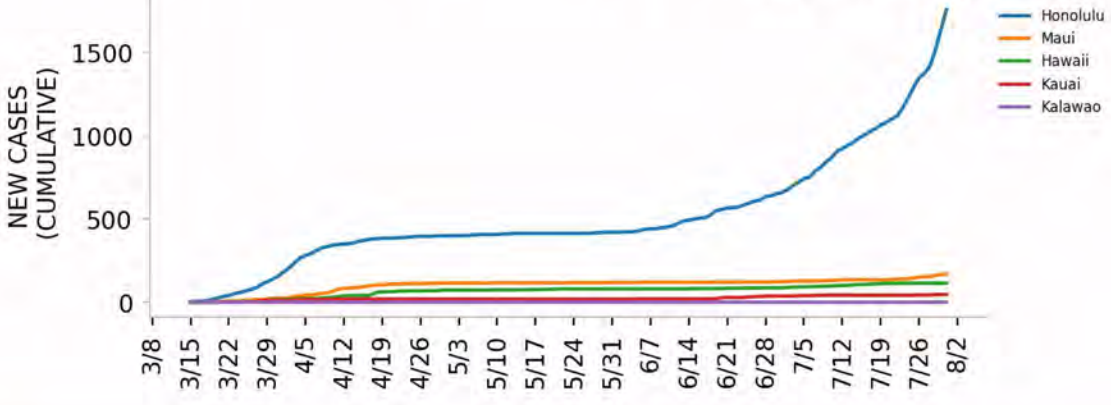
NEW CASES



TESTING

TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)



DATA SOURCES

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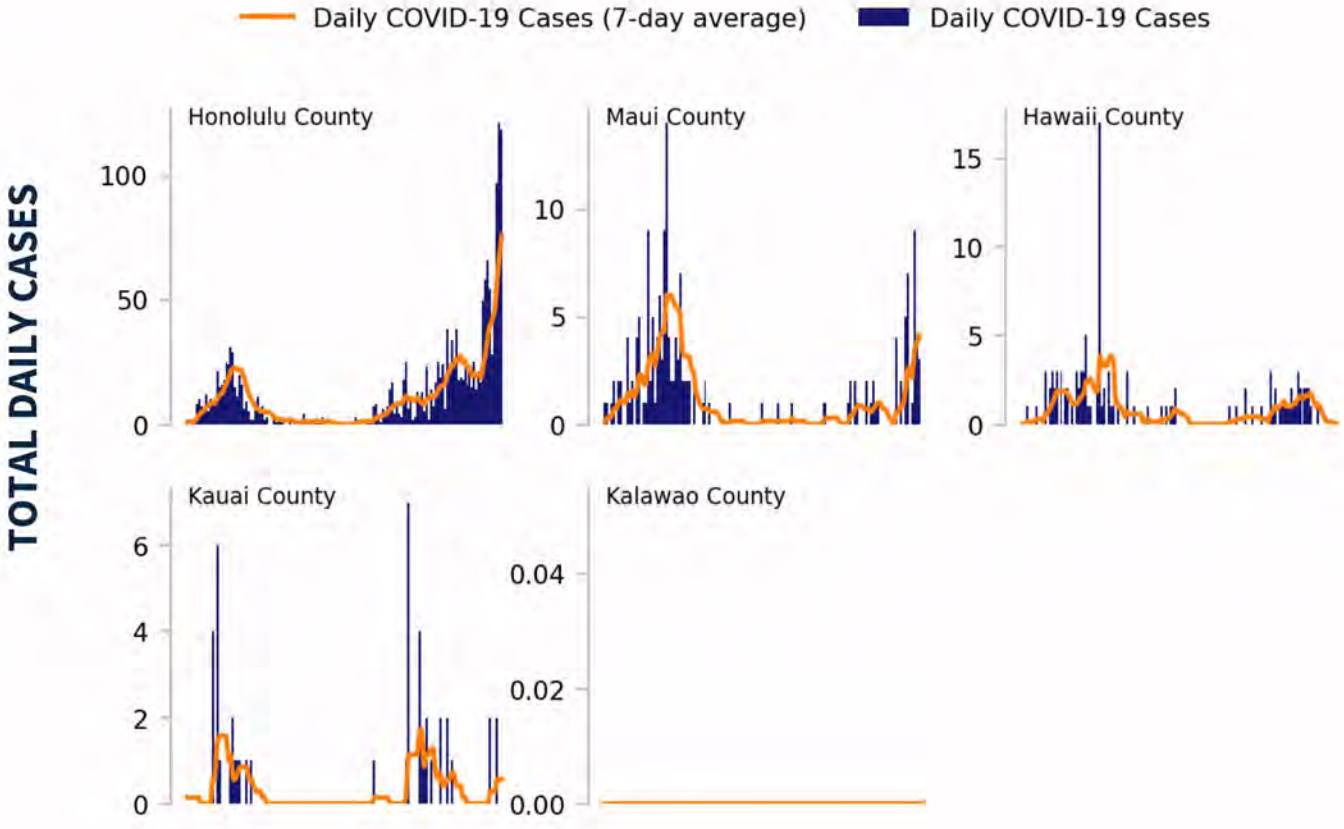
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

HAWAII

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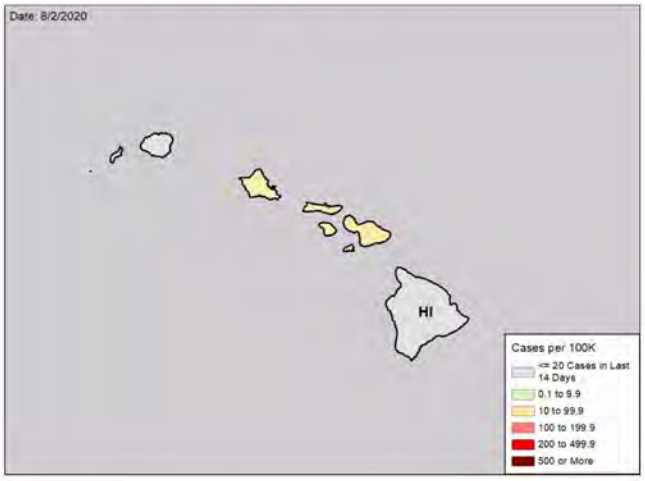
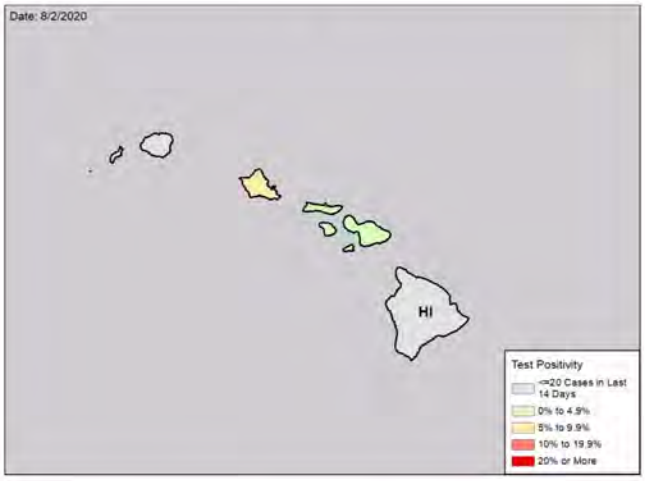
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

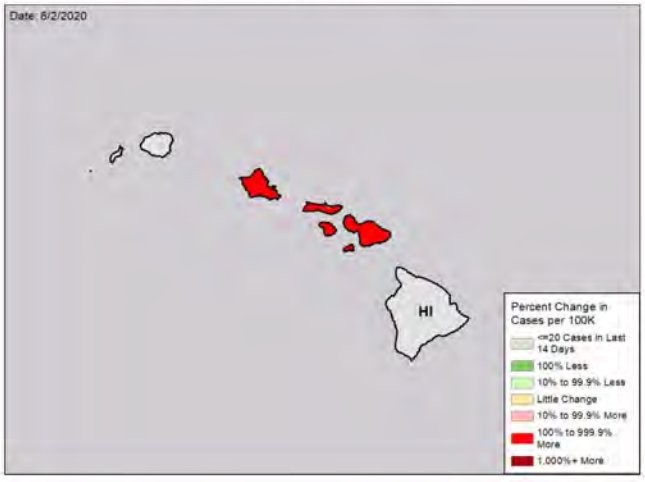
NEW CASES PER 100,000 DURING LAST WEEK



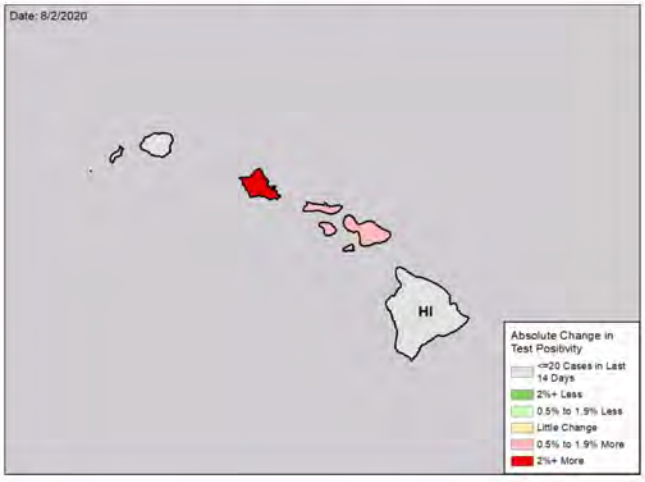
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



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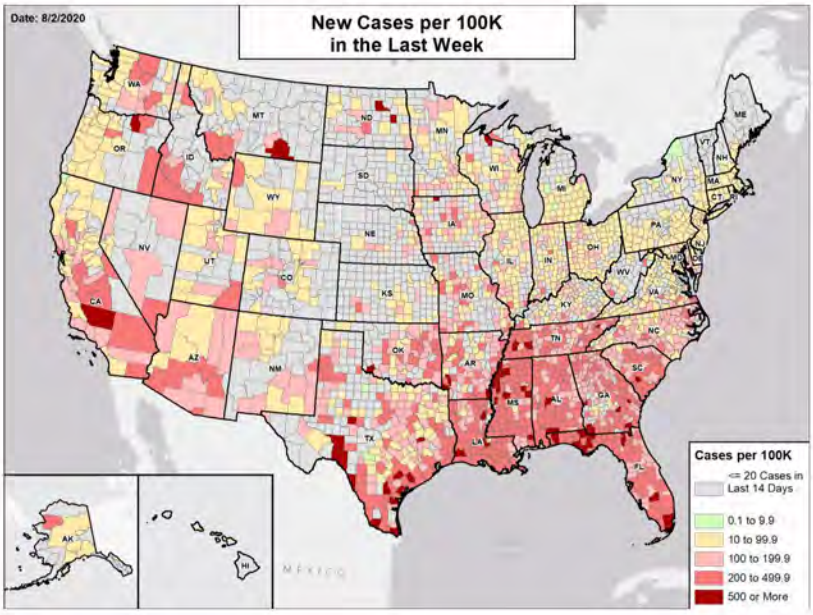
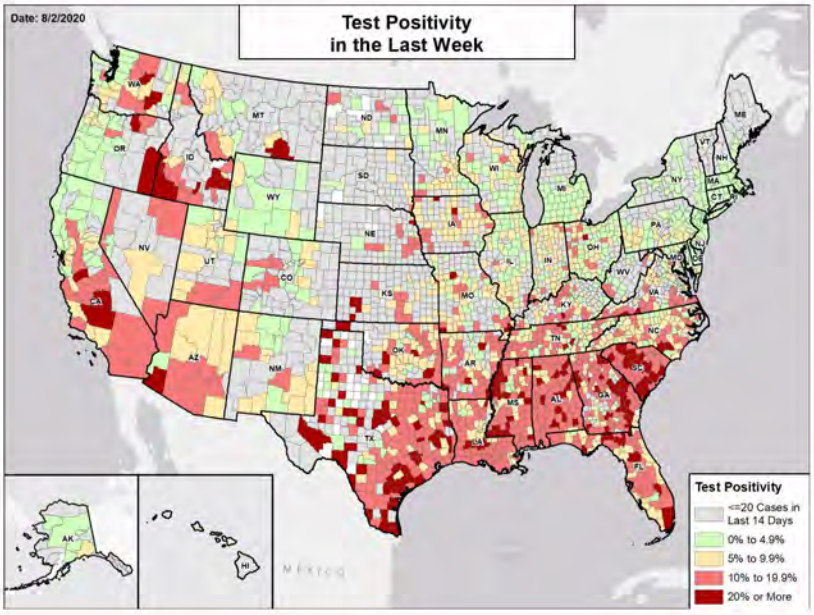
National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



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Methods

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Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

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IDAHO

STATE REPORT | 08.02.2020

SUMMARY

- Idaho is in the red zone for cases, indicating more than 100 new cases per 100,000 population last week, and the yellow zone for COVID-19 test positivity, indicating a rate between 5% to 10%.
- Idaho has seen stability in new cases and stability in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Ada County, 2. Canyon County, and 3. Kootenai County. These counties represent 73.0 percent of new cases in Idaho.
- Idaho had 194 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 10 to support operations activities from FEMA and 1 to support epidemiology activities from CDC.
- Between Jul 25 - Jul 31, on average, 22 patients with confirmed COVID-19 and 7 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Idaho. An average of 58 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Strongly encourage mandates mask use, especially in indoor environments, in all red-zone counties and metro areas; consider fines for violations. Continue moving forward with efforts to develop and launch comprehensive marketing statewide on the importance of wearing masks.
- Intensify restrictions in all red-zone counties by closing bars, gyms, and indoor dining establishments. Prohibit gatherings of more than 10 people.
- In areas with insufficient testing and long turnaround times, increase testing capacity by: implementing pooled testing as described below, ensuring all public health labs are staffed and running 24/7, and requiring all universities with suitable platforms to use their equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Intensify contact tracing, quarantine, and isolation efforts; if resources are limited, focus on yellow- and red-zone counties. Continue to deploy ancillary staffing, such as DMAT, retirees, volunteers, and university staff to ensure sufficient human resources.
- Ensure all crowded work environments, such as meat-processing facilities, observe social distancing and mask-wearing and have ready access to testing. Consider use of fines for violations of mitigation requirements.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

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STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	3,460 (194)	-1.4%	11,560 (81)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	18.8%	+0.5%*	7.0%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	25,100** (1,405)	-13.9%**	194,557** (1,356)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	45 (3)	+50.0%	165 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	12.7%	+2.8%*	7.8%	12.3%

MOBILITY

* Indicates absolute change in percentage points.
** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	**7**	Boise City Coeur d'Alene Idaho Falls Twin Falls Burley Ontario Mountain Home	**6**	Pocatello Rexburg Blackfoot Sandpoint Moscow Logan
COUNTY LAST WEEK	**17** **Top 12 shown (full list below)**	Ada Canyon Kootenai Bonneville Twin Falls Minidoka Payette Owyhee Cassia Jerome Elmore Jefferson	**6**	Bannock Gem Bingham Bonner Madison Latah

All Red Counties: Ada, Canyon, Kootenai, Bonneville, Twin Falls, Minidoka, Payette, Owyhee, Cassia, Jerome, Elmore, Jefferson, Shoshone, Washington, Gooding, Benewah, Power

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

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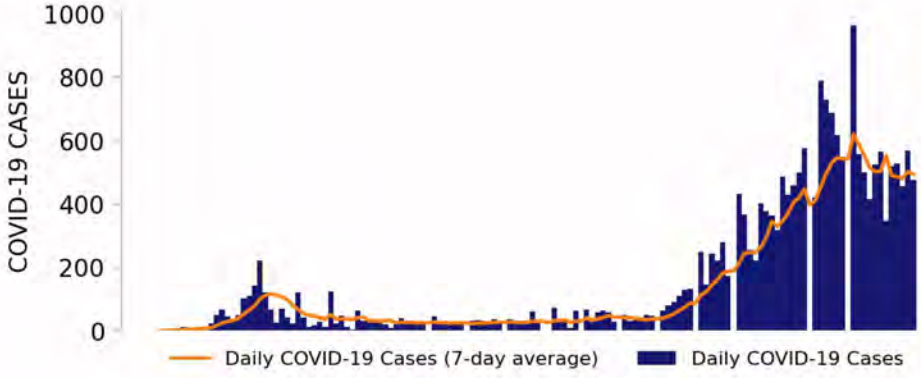
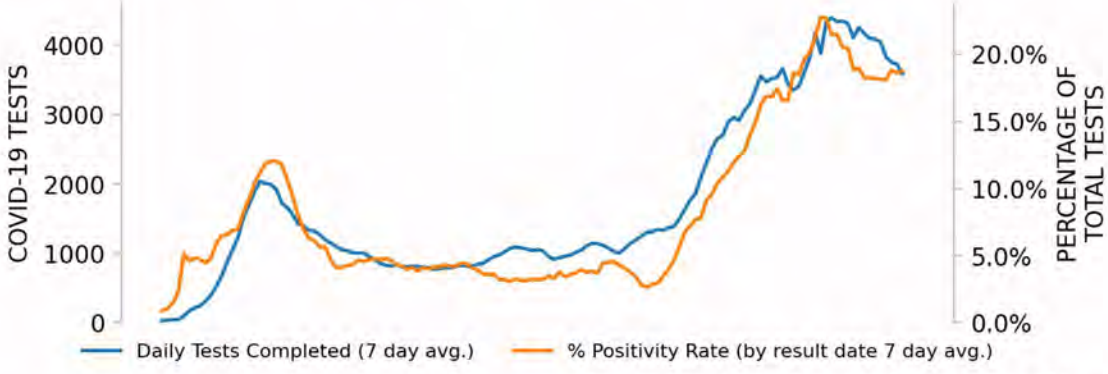
NEW CASES

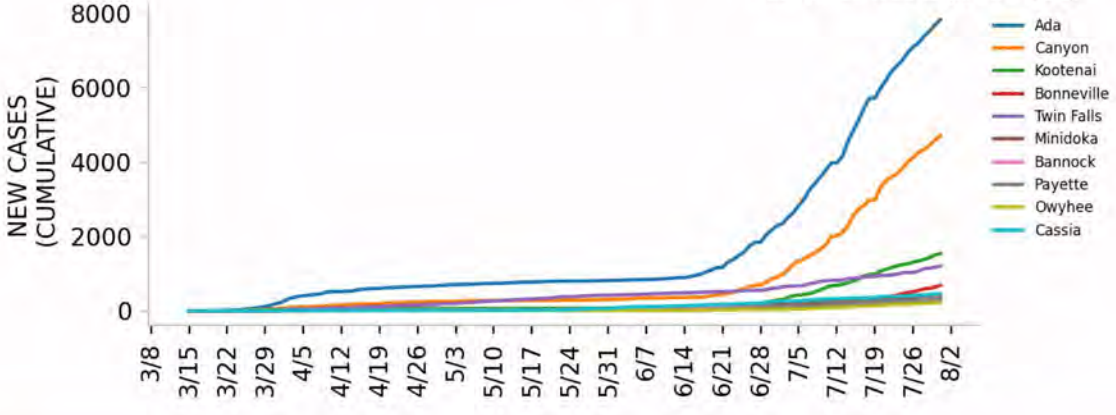


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

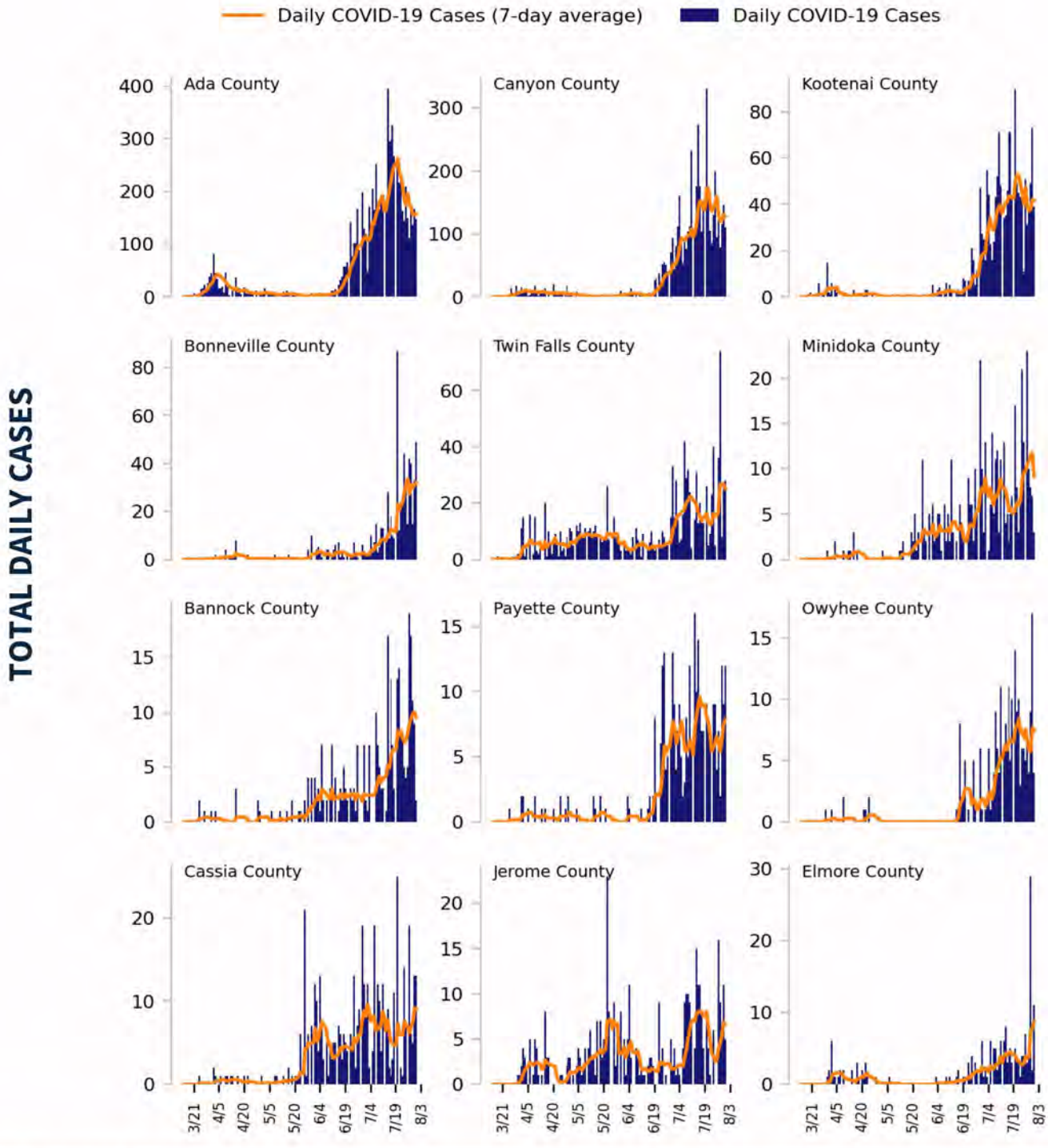


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

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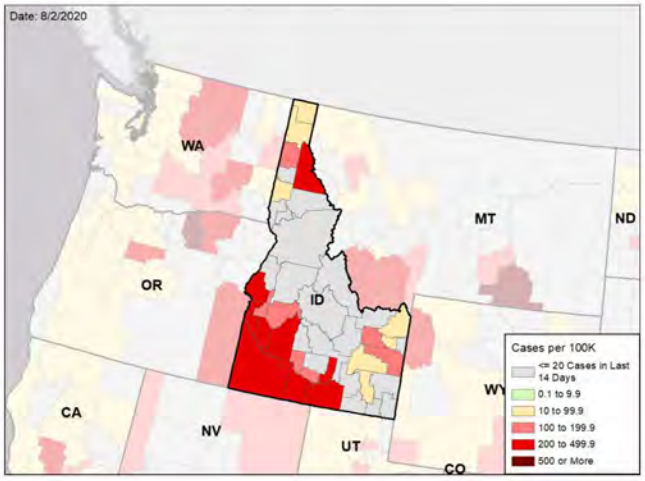
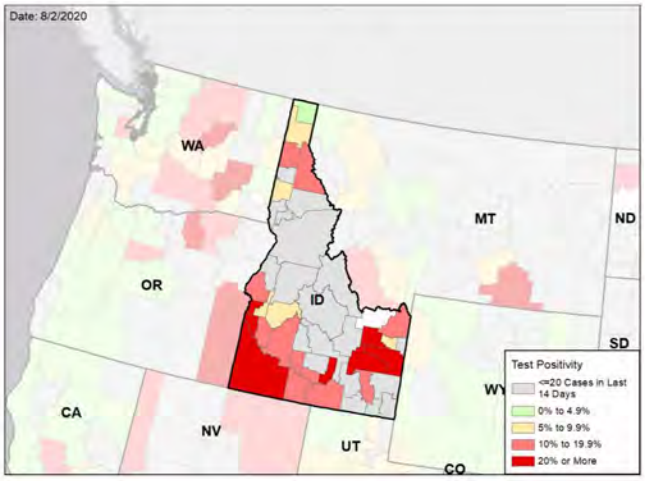
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

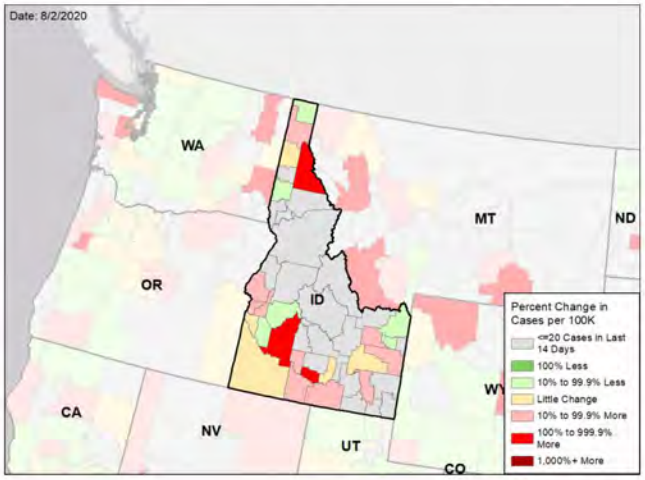
NEW CASES PER 100,000 DURING LAST WEEK



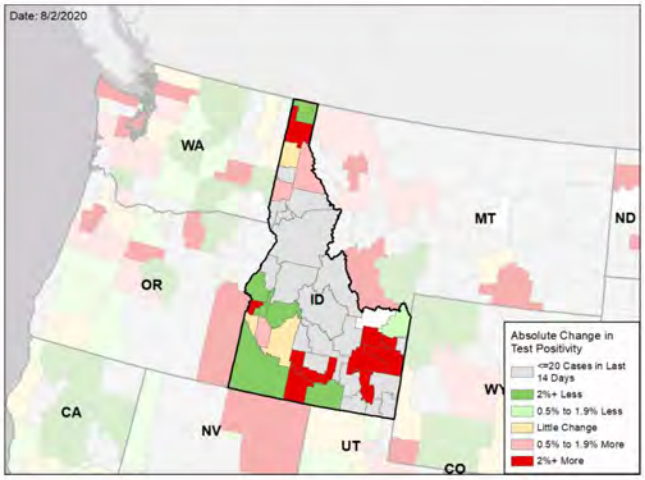
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

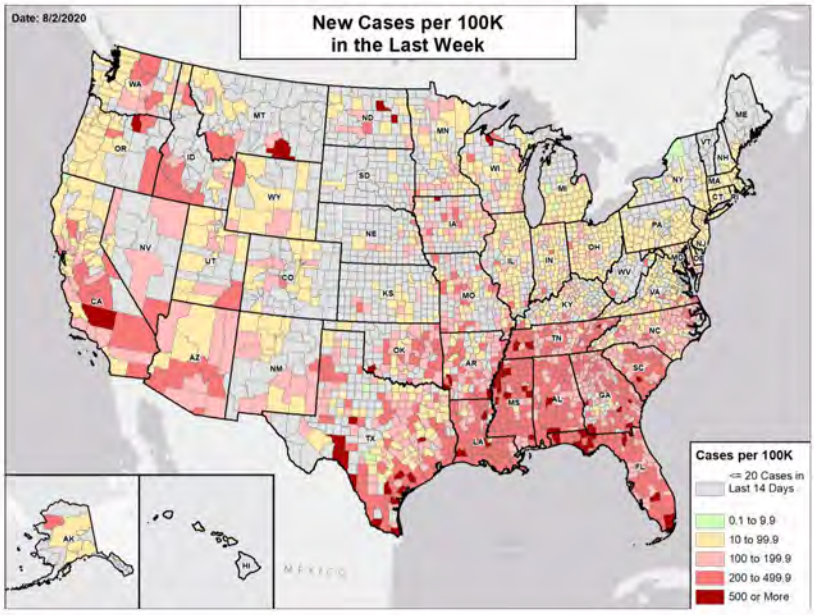


DATA SOURCES

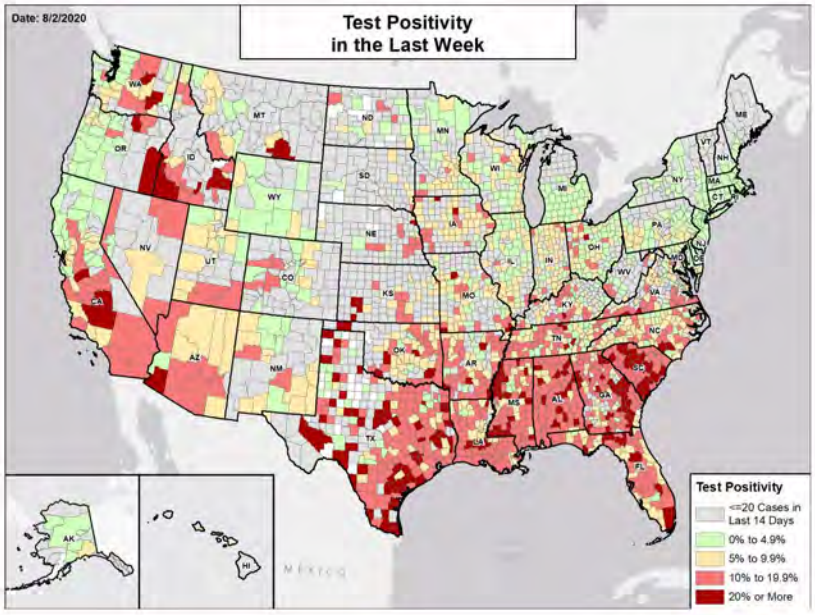
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

STATE REPORT | 08.02.2020

COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

ILLINOIS

STATE REPORT | 08.02.2020

SUMMARY

- Illinois is in the yellow zone for cases, indicating between 10 to 100 new cases per 100,000 population last week, and the green zone for test positivity, indicating a rate below 5%.
- Illinois has seen an increase in new cases and stability in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Cook County, 2. DuPage County, and 3. Lake County. These counties represent 52.4 percent of new cases in Illinois.
- There are more counties in the yellow zone this week.
- Illinois had 82 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 87 to support operations activities from FEMA; 8 to support operations activities from ASPR; 2 to support epidemiology activities from CDC; and 7 to support operations activities from USCG.
- Between Jul 25 - Jul 31, on average, 287 patients with confirmed COVID-19 and 517 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Illinois. An average of 82 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Consider closing bars in yellow zone counties to prevent further spread. In red zones, limit the size of social gatherings to 10 people or fewer; in the yellow zones limit social gatherings to fewer than 25 people.
- Keep mask requirement in place statewide. Identify mechanisms to assess compliance with local regulations.
- Message to residents that if they have vacationed in, or had visitors from, areas with high COVID-19 prevalence including the South and West of the United States, they should: avoid vulnerable individuals; remain socially distanced and masked when around others for a minimum of 14 days; avoid indoor gatherings where social distancing and masks cannot be maintained; and get tested if anyone in their family develops symptoms. Also, message that they can transmit the virus even when asymptomatic.
- The nursing home facilities with more than 2 confirmed or suspected COVID-19 cases are in yellow zones. Preventing further spread in these areas is critical to protect the vulnerable nursing home population. Protect vulnerable populations in assisted living and long-term care facilities through weekly testing of all workers and requiring masks. In facilities with workers who tested positive, ensure all residents have been promptly tested and appropriate cohorting measures are in place. Conduct on-site inspections to ensure COVID-19 safety guidance and considerations are being implemented.
- Providing timely test results to individuals so they can isolate and stop the spread is critical. Implement the following to increase testing capacity and decrease turnaround times:
    - (1) For family and cohabitating households, screen entire households in a single test by pooling a sample of each member's specimen. For households that test positive, isolate and conduct follow-up individual tests.
    - (2) Expand testing capacity in public health labs by adding shifts, including weekend shifts, to reduce turnaround times.
    - (3) Require all universities with RNA detection platforms to use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Consider expanding public messaging to younger demographics using social media and other messaging platforms as the beginning of the school year nears.
- Conduct tracking and accountability tracing for home-bound elderly, disabled, and vulnerable populations to ensure vulnerable populations are tested and appropriate measures are in place for medical care.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

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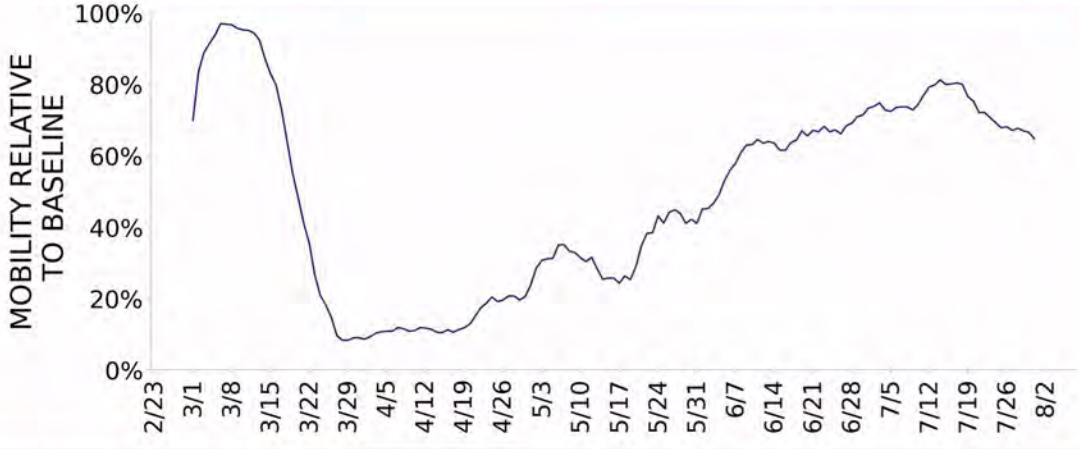
ILLINOIS

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	10,381 (82)	+13.8%	41,885 (80)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	4.9%	+0.3%*	5.4%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	214,824** (1,695)	-3.7%**	945,428** (1,799)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	111 (1)	-1.8%	548 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	6.9%	-0.8%*	6.5%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

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Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

ILLINOIS

STATE REPORT | 08.02.2020

COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	18 Top 12 shown (full list below)	Chicago-Naperville-Elgin St. Louis Peoria Rockford Davenport-Moline-Rock Island Springfield Carbondale-Marion Ottawa Kankakee Quincy Charleston-Mattoon Decatur
COUNTY LAST WEEK	3	Cass White Gallatin	35 Top 12 shown (full list below)	Lake St. Clair Will Kane Madison Peoria Sangamon Rock Island Jackson Kankakee Adams LaSalle

All Yellow CBSAs: Chicago-Naperville-Elgin, St. Louis, Peoria, Rockford, Davenport-Moline-Rock Island, Springfield, Carbondale-Marion, Ottawa, Kankakee, Quincy, Charleston-Mattoon, Decatur, Mount Vernon, Jacksonville, Effingham, Centralia, Paducah, Cape Girardeau

All Yellow Counties: Lake, St. Clair, Will, Kane, Madison, Peoria, Sangamon, Rock Island, Jackson, Kankakee, Adams, LaSalle, Kendall, Macon, Coles, Williamson, Randolph, Monroe, Boone, Bureau, Saline, Clinton, Union, Iroquois, Jefferson, Effingham, Marion, Morgan, Perry, Mercer, Warren, Washington, Clark, Fayette, Carroll

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
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ILLINOIS

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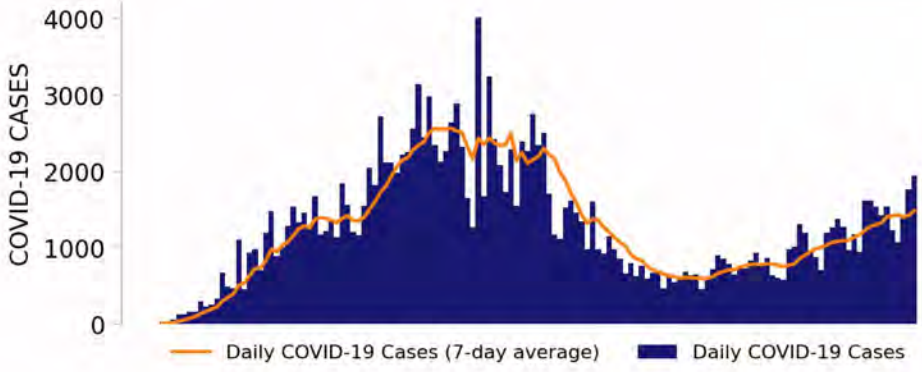
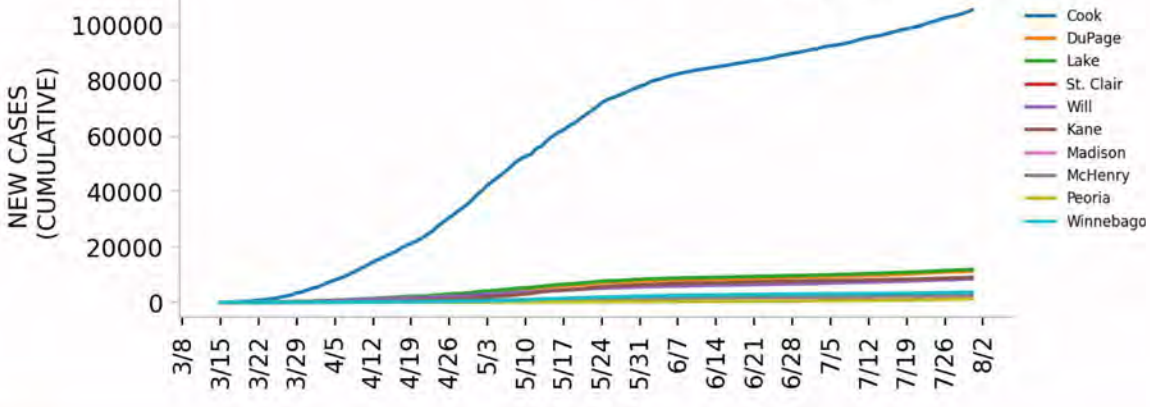
NEW CASES



TESTING

TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)



DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

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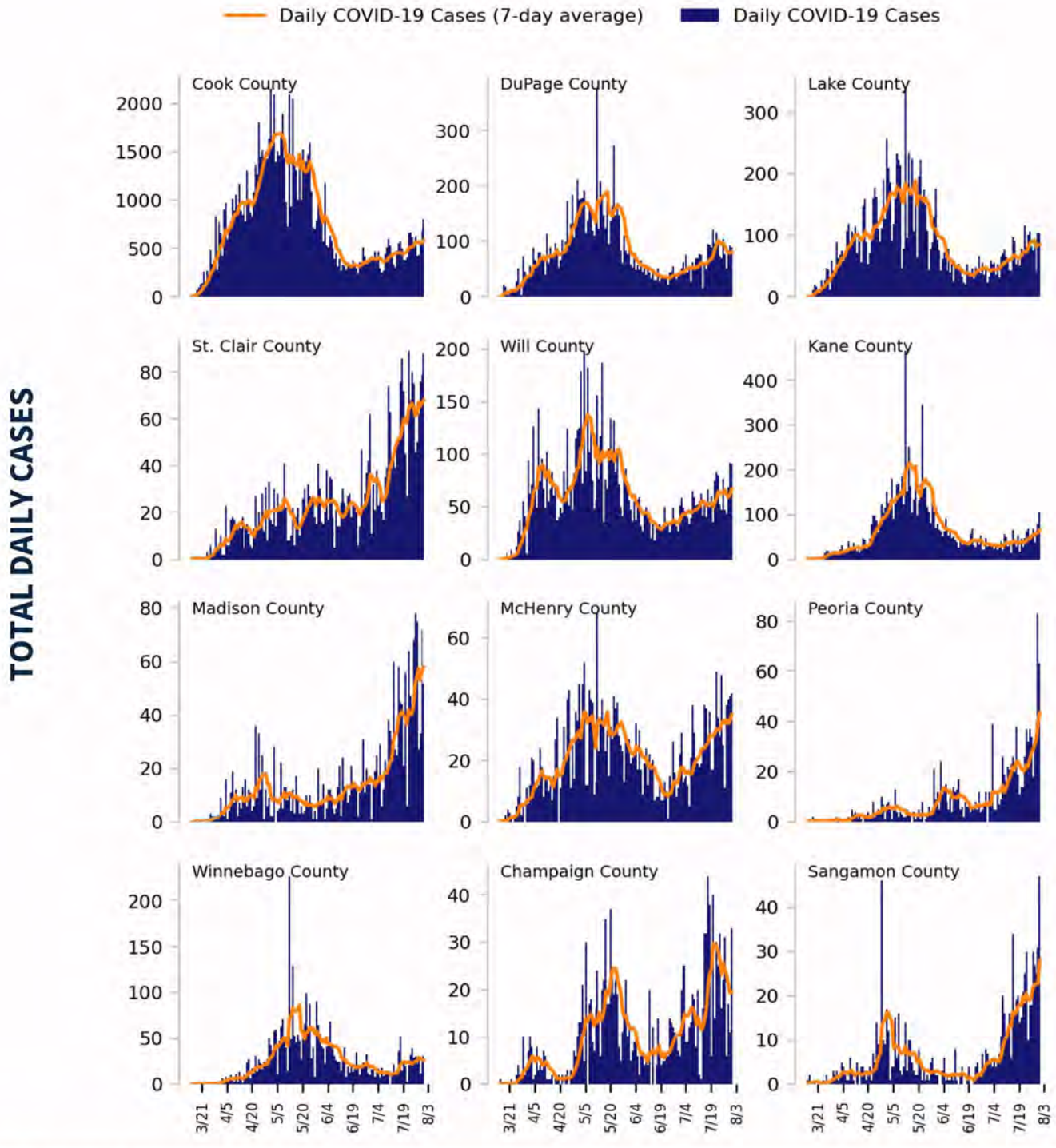
Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

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ILLINOIS

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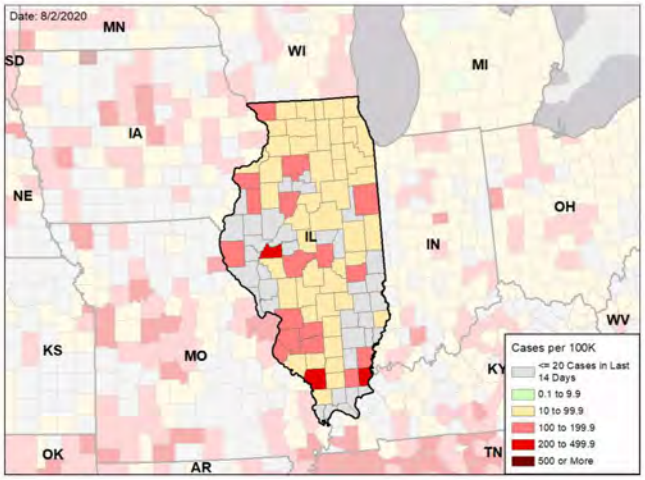
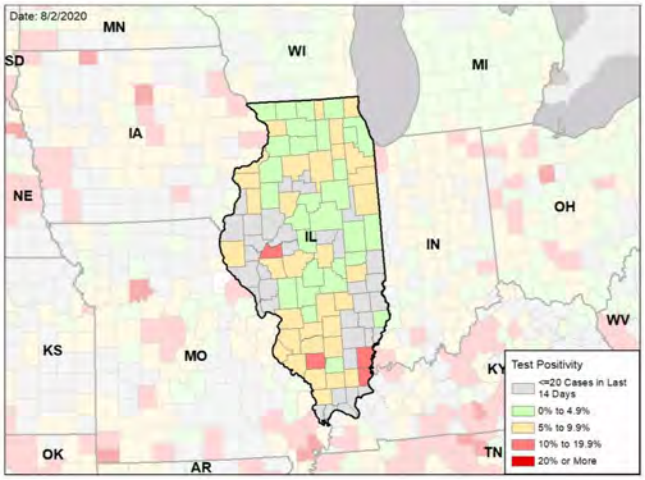
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

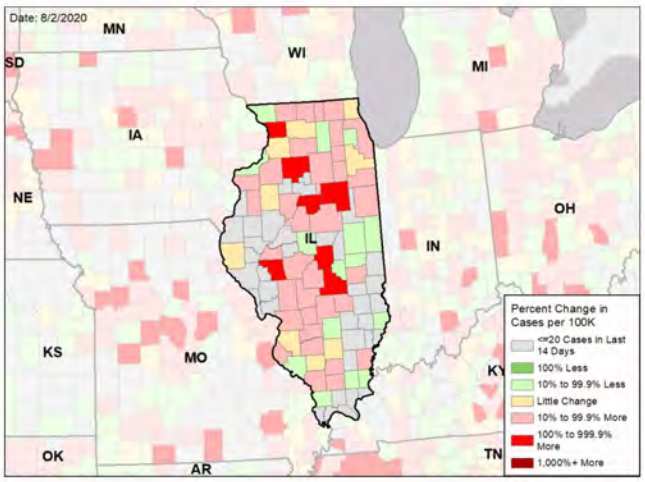
NEW CASES PER 100,000 DURING LAST WEEK



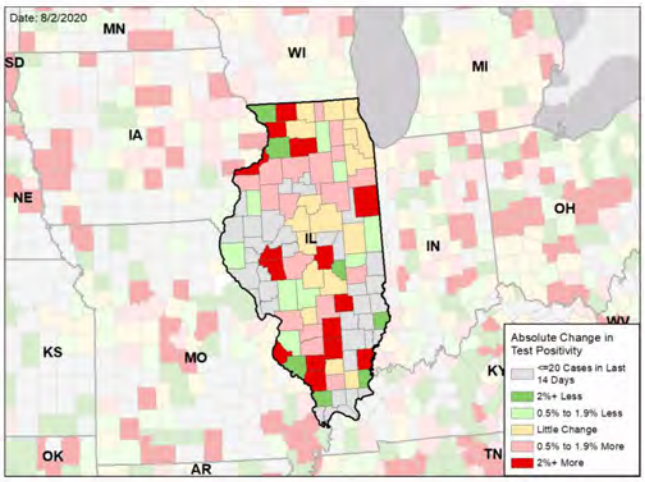
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



DATA SOURCES

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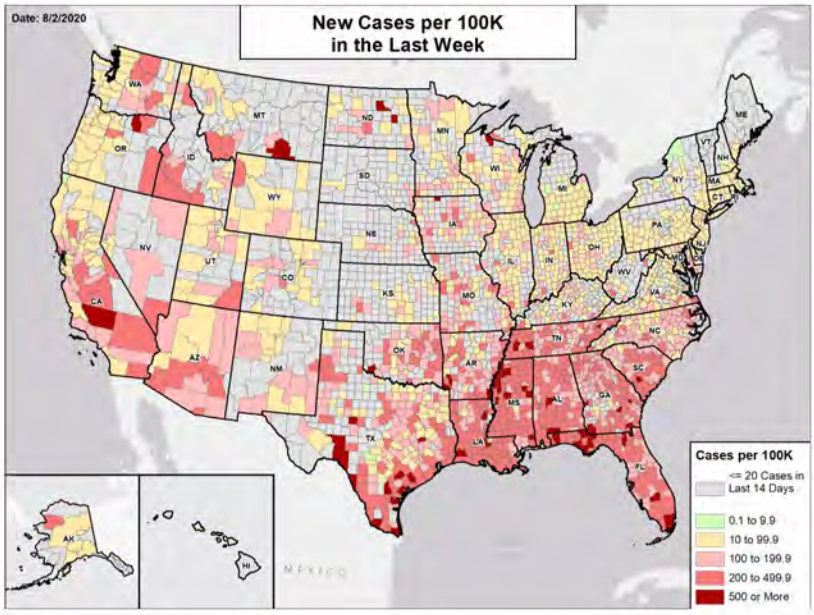
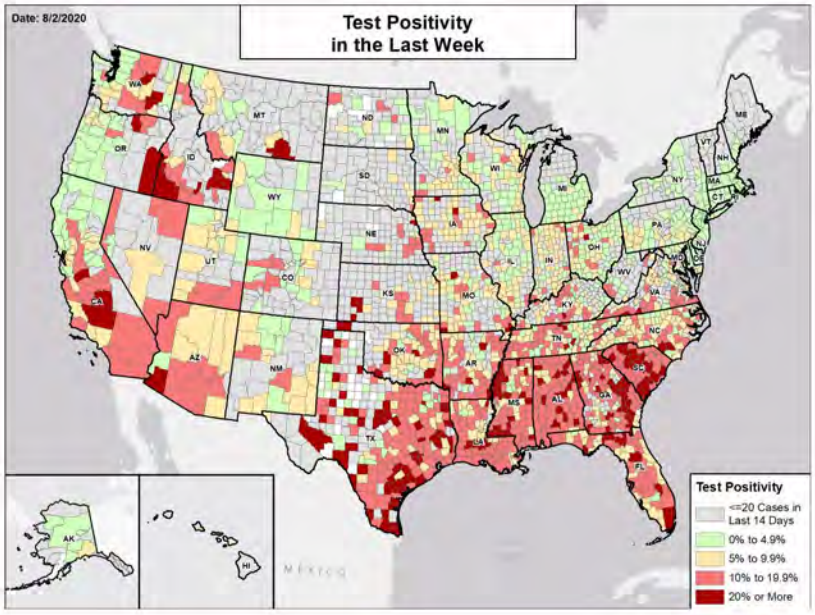
National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

STATE REPORT | 08.02.2020

COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

INDIANA

STATE REPORT | 08.02.2020

SUMMARY

- Indiana is in the yellow zone for COVID-19 cases, indicating between 10 to 100 new cases per 100,000 population last week. There is an opportunity to prevent logarithmic increases in cases with aggressive mitigation methods.
- Indiana has seen stability in new cases and testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Marion County, 2. Lake County, and 3. Elkhart County. These counties represent 31.6 percent of new cases in Indiana.
- There is significant community spread throughout Indiana in metro areas and their surrounding counties, as well as some rural counties.
- Indiana had 82 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 8 to support operations activities from FEMA; 1 to support epidemiology activities from CDC; and 2 to support operations activities from CDC.
- Between Jul 25 - Jul 31, on average, 27 patients with confirmed COVID-19 and 54 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Indiana. An average of 40 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Continue your teams' visits to long-term care facilities with residents and providers who are suspected to have COVID-19 and continue testing suspected cases. Conduct facility-wide testing on a regular or weekly basis. Continue to encourage social distancing and universal mask wearing for providers and residents.
- Maintain the state-wide face covering mandate as ordered for the next 30 days.
- Consider additional mitigation efforts, such as closing establishments where social distancing and mask use cannot occur, including bars, nightclubs, and entertainment venues.
- Move to outdoor dining and limit indoor dining to less than 25% occupancy.
- Continue the extended the pause on phase 4.5 of the state re-opening plan through August 27.
- Ask citizens to limit social gatherings to fewer than 10 people.
- Increase messaging of the risk of serious disease in all age groups with preexisting medical conditions, including obesity, hypertension, and diabetes mellitus.
- Continue the scale-up of testing, moving to community-led neighborhood testing. Work with local communities to implement and provide clear guidance for households that test positive, including individual isolation and quarantining procedures.
- Continue to enhance contact tracing and ensure the ability of cases and contacts to quarantine or isolate safely.
- Ensure every public health lab is fully staffed and running 24/7, utilizing all platforms to reduce turnaround times. Institute 4:1 pooling of test specimens on all high throughput machines as long as turnaround times are greater than 36 hours.
- Require all universities with RNA detection platforms to use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

INDIANA

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	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	5,536 (82)	-4.3%	41,885 (80)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	7.4%	+0.3%*	5.4%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	109,224** (1,622)	-8.0%**	945,428** (1,799)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	84 (1)	+9.1%	548 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	4.7%	+0.2%*	6.5%	12.3%

MOBILITY

* Indicates absolute change in percentage points.
** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

INDIANA

STATE REPORT | 08.02.2020

COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	3	Evansville Louisville/Jefferson County Jasper	27 Top 12 shown (full list below)	Indianapolis-Carmel-Anderson Chicago-Naperville-Elgin Elkhart-Goshen South Bend-Mishawaka Fort Wayne Lafayette-West Lafayette Cincinnati Terre Haute Warsaw Plymouth Kokomo Marion
COUNTY LAST WEEK	3	Vanderburgh Dubois Franklin	52 Top 12 shown (full list below)	Marion Lake Elkhart St. Joseph Hamilton Allen Clark Porter Tippecanoe Johnson Hendricks Floyd

All Yellow CBSAs: Indianapolis-Carmel-Anderson, Chicago-Naperville-Elgin, Elkhart-Goshen, South Bend-Mishawaka, Fort Wayne, Lafayette-West Lafayette, Cincinnati, Terre Haute, Warsaw, Plymouth, Kokomo, Marion, Muncie, Columbus, Kendallville, Logansport, Washington, Scottsburg, Seymour, Bedford, New Castle, Angola, Peru, Greensburg, Auburn, Crawfordsville, Wabash

All Yellow Counties: Marion, Lake, Elkhart, St. Joseph, Hamilton, Allen, Clark, Porter, Tippecanoe, Johnson, Hendricks, Floyd, Warrick, Kosciusko, Marshall, Dearborn, Howard, Grant, Vigo, Delaware, Madison, Boone, Hancock, Bartholomew, Noble, Posey, Cass, Daviess, Gibson, Scott, Morgan, White, Lawrence, Jackson, Tipton, Jasper, Fulton, Henry, Starke, Steuben, Miami, LaGrange, Decatur, Harrison, DeKalb, Wells, Whitley, Montgomery, Wabash, Washington, Clay, Fountain

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

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POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
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POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
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- Reduce your public interactions and activities to 50% of your normal activity

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INDIANA

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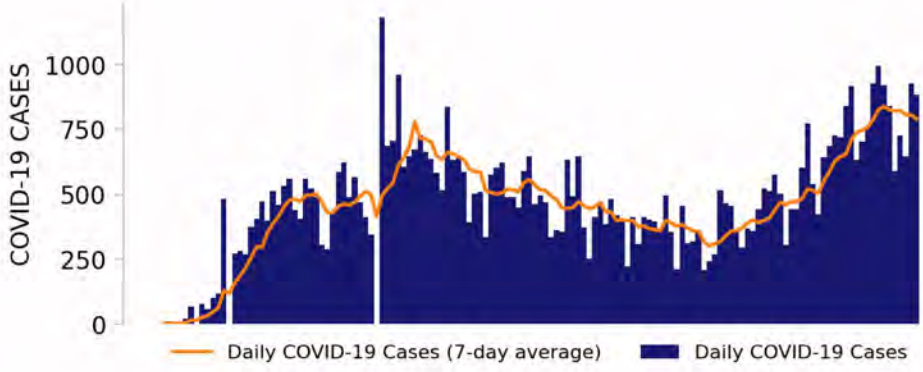
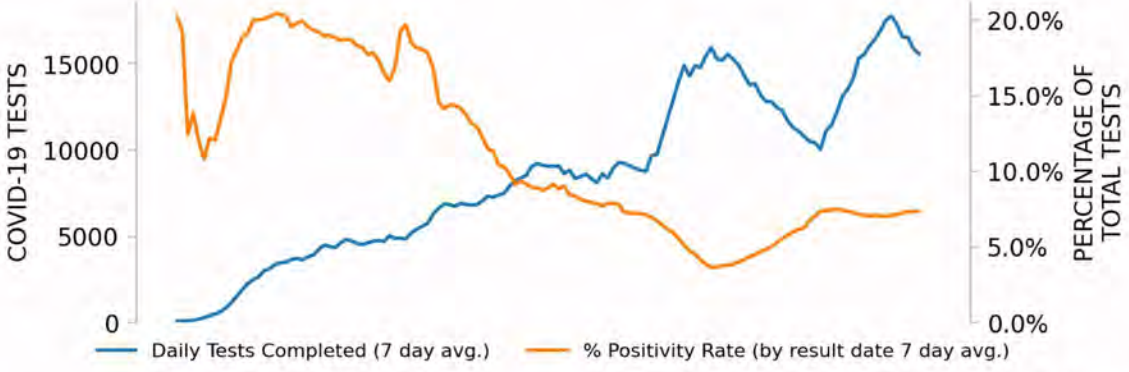
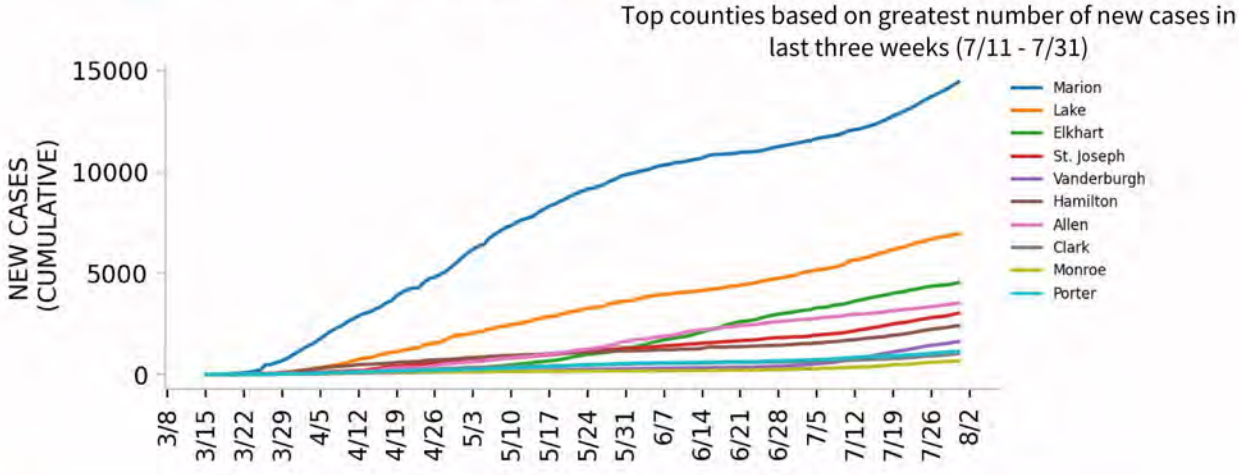
NEW CASES



TESTING



TOP COUNTIES



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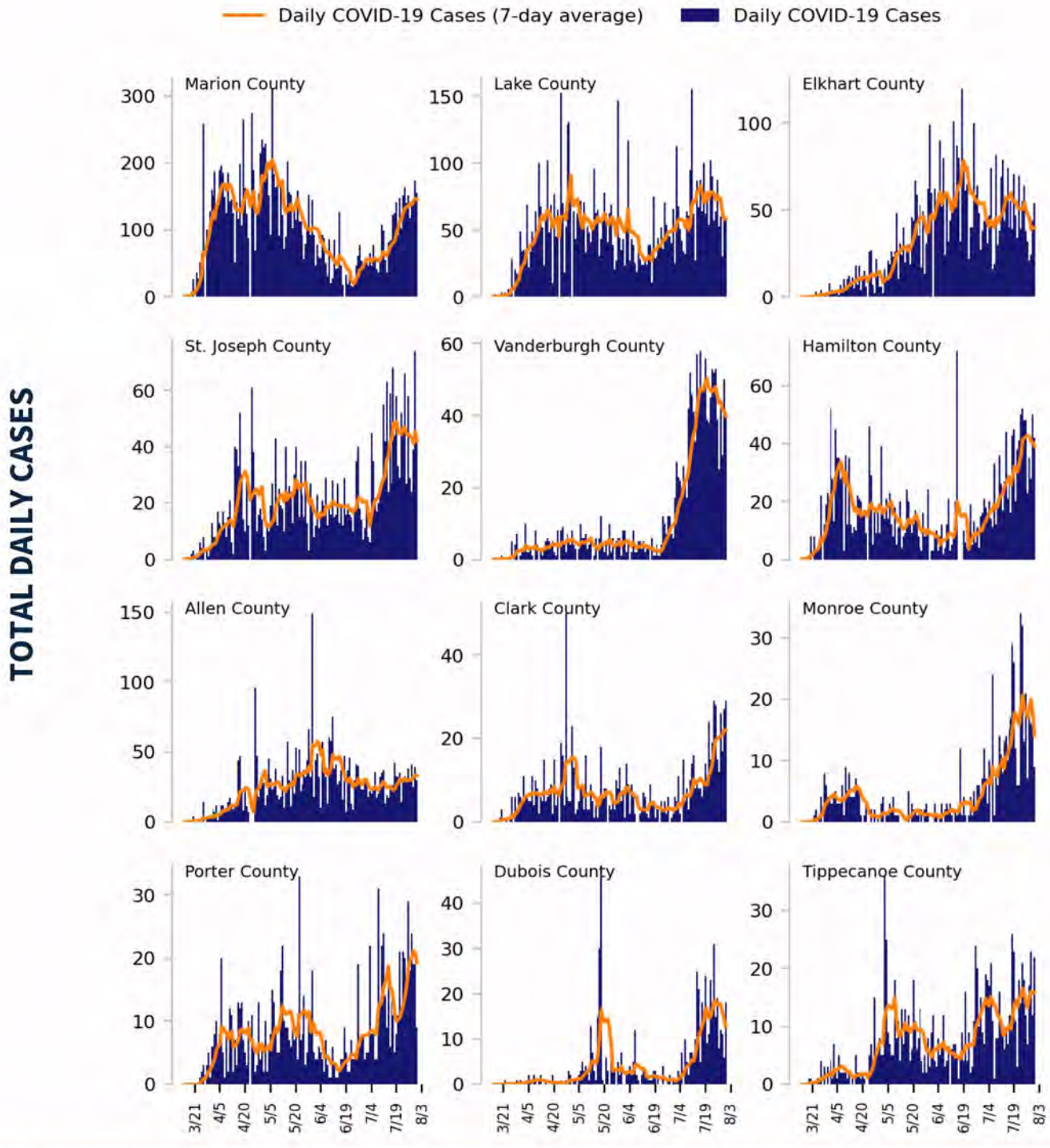
Top 12 counties based on number of new cases in the last 3 weeks



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INDIANA

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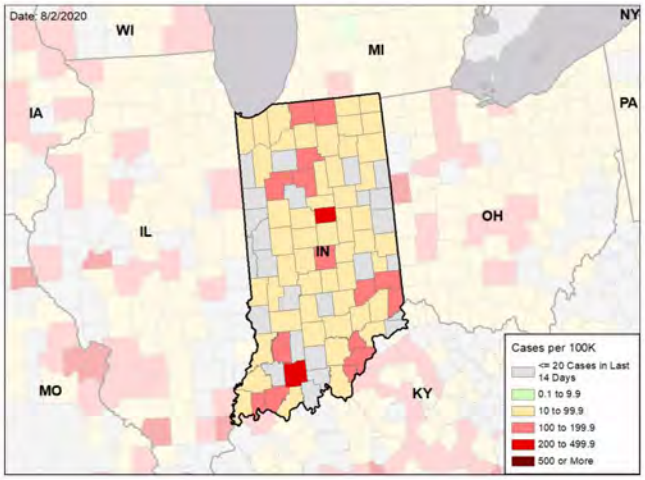
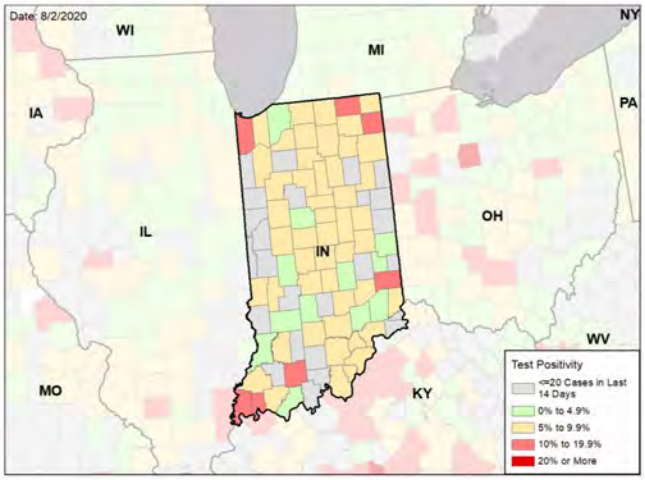
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

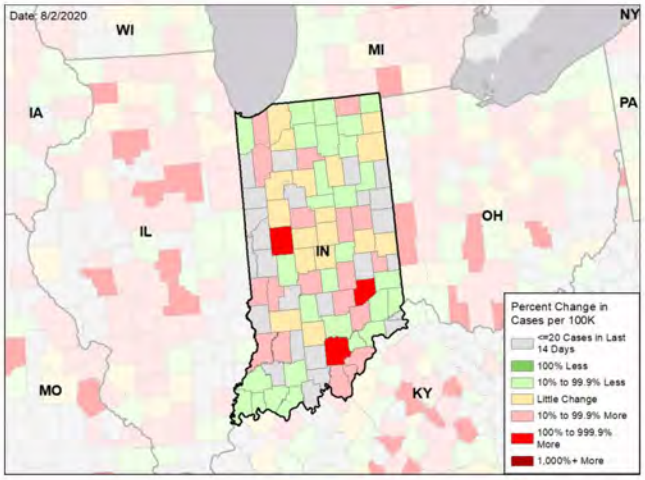
NEW CASES PER 100,000 DURING LAST WEEK



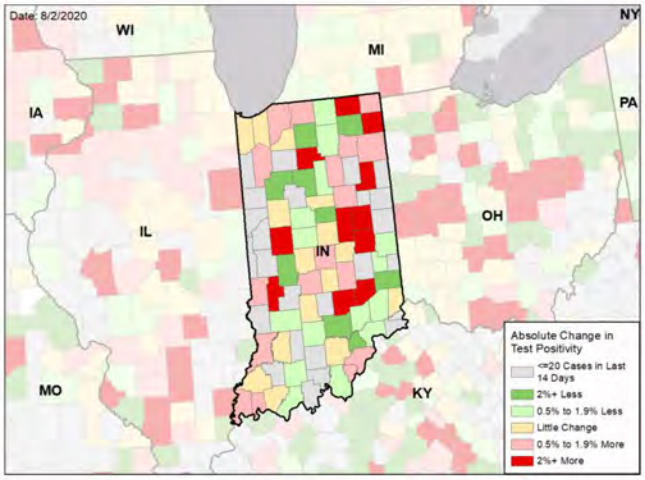
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



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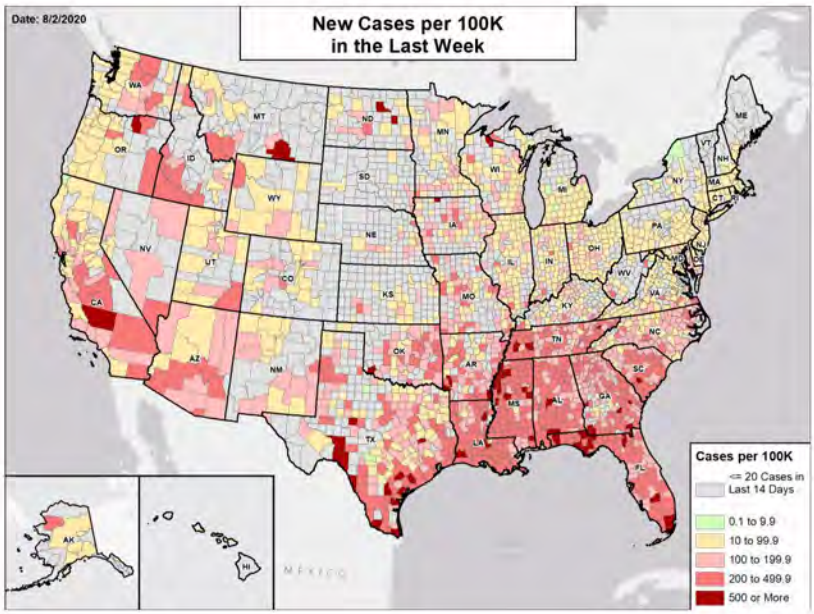
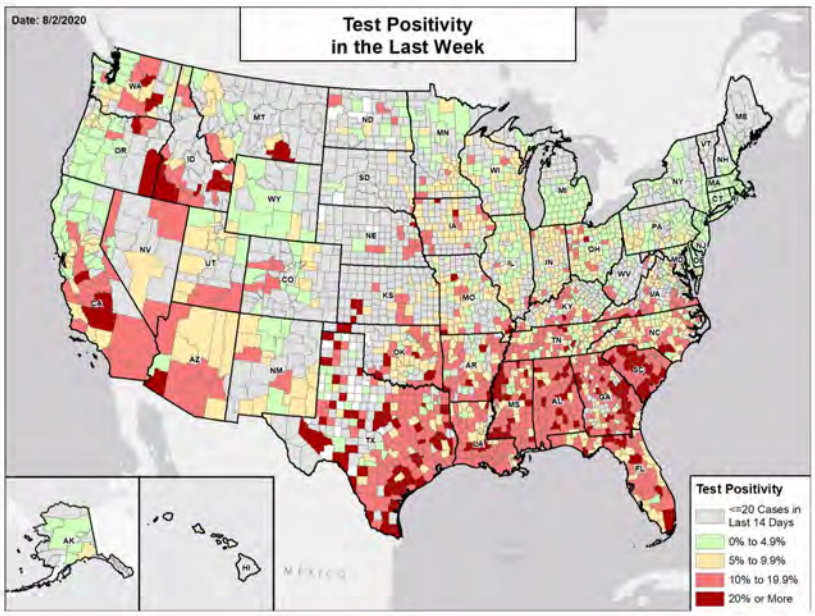
National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

STATE REPORT | 08.02.2020

COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
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- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
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IOWA

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SUMMARY

- Iowa is in the red zone for cases, indicating more than 100 new cases per 100,000 population last week, and the yellow zone for test positivity, indicating a rate between 5% to 10%.
- Iowa has seen stability in new cases and an increase in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Polk County, 2. Linn County, and 3. Dubuque County. These counties represent 33.1 percent of new cases in Iowa.
- Iowa had 110 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 23 to support medical activities from VA.
- Between Jul 25 - Jul 31, on average, 38 patients with confirmed COVID-19 and 53 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Iowa. An average of 87 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Recommend intensifying restrictions in all counties and cities with case rates over 100 per 100,000 population and test positivity over 10%. Interventions include mandating use of cloth face masks outside of the home; closing bars, gyms, and indoor dining areas; and restricting gatherings to no more than 10 people.
- Emphasize and reiterate public messaging around the need for social distancing and use of face masks, especially in yellow- and red-zone counties and metro areas.
- Ensure sufficient capacity for contact tracing, with early quarantine and isolation; if needed, focus resources in red zones and areas of increasing transmission, where case rates and test positivity are increasing.
- Enforce effective social distancing and use of face masks in all crowded indoor work environments, such as meat-packing plants; consider fining facilities that violate mandates.
- Ensure residents of long-term facilities are protected by requiring tests on all new admissions and periodic testing of staff, especially in facilities located in red-zone areas. Enforce mask use by all staff at all times.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

COVID-19

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	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	3,482 (110)	+4.7%	19,158 (135)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	7.7%	+0.7%*	8.6%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	50,264** (1,593)	-21.1%**	176,924** (1,251)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	45 (1)	+18.4%	156 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	4.6%	-0.9%*	5.6%	12.3%

MOBILITY

* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	5	Dubuque Omaha-Council Bluffs Marshalltown Clinton Ottumwa	14 Top 12 shown (full list below)	Des Moines-West Des Moines Cedar Rapids Waterloo-Cedar Falls Davenport-Moline-Rock Island Iowa City Mason City Fort Dodge Sioux City Ames Muscatine Spirit Lake Pella
COUNTY LAST WEEK	16 Top 12 shown (full list below)	Dubuque Pottawattamie Marshall Clinton Wapello Franklin Emmet Hardin Page Lyon Clayton Shelby	33 Top 12 shown (full list below)	Polk Linn Scott Black Hawk Johnson Dallas Webster Cerro Gordo Woodbury Story Warren Muscatine

All Yellow CBSAs: Des Moines-West Des Moines, Cedar Rapids, Waterloo-Cedar Falls, Davenport-Moline-Rock Island, Iowa City, Mason City, Fort Dodge, Sioux City, Ames, Muscatine, Spirit Lake, Pella, Carroll, Storm Lake
All Red Counties: Dubuque, Pottawattamie, Marshall, Clinton, Wapello, Franklin, Emmet, Hardin, Page, Lyon, Clayton, Shelby, Harrison, Montgomery, Clarke, Fremont
All Yellow Counties: Polk, Linn, Scott, Black Hawk, Johnson, Dallas, Webster, Cerro Gordo, Woodbury, Story, Warren, Muscatine, Jasper, Plymouth, Sioux, Jackson, Dickinson, Bremer, Marion, Carroll, Boone, Benton, Buena Vista, Hancock, Tama, Jones, Butler, Wright, Madison, Buchanan, Crawford, Delaware, Poweshiek

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.
Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."
Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
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Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

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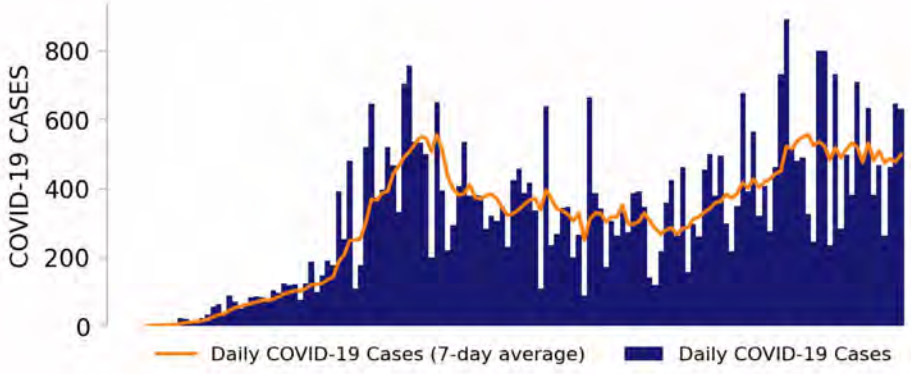
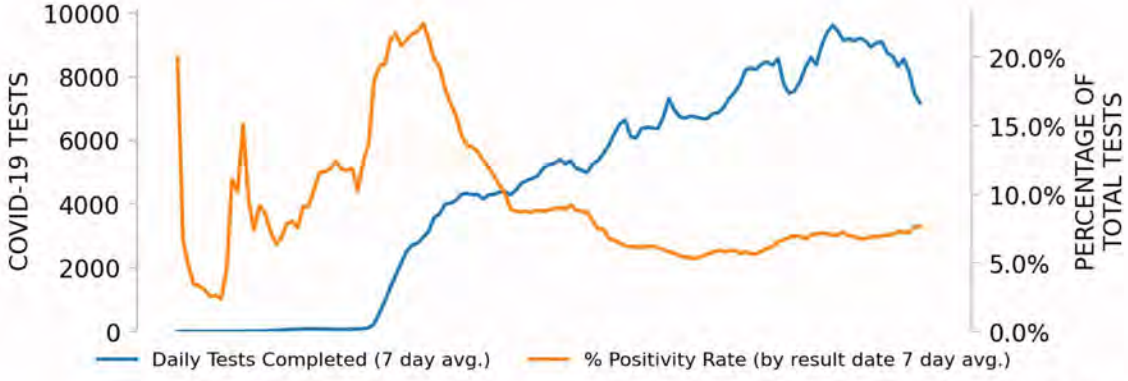
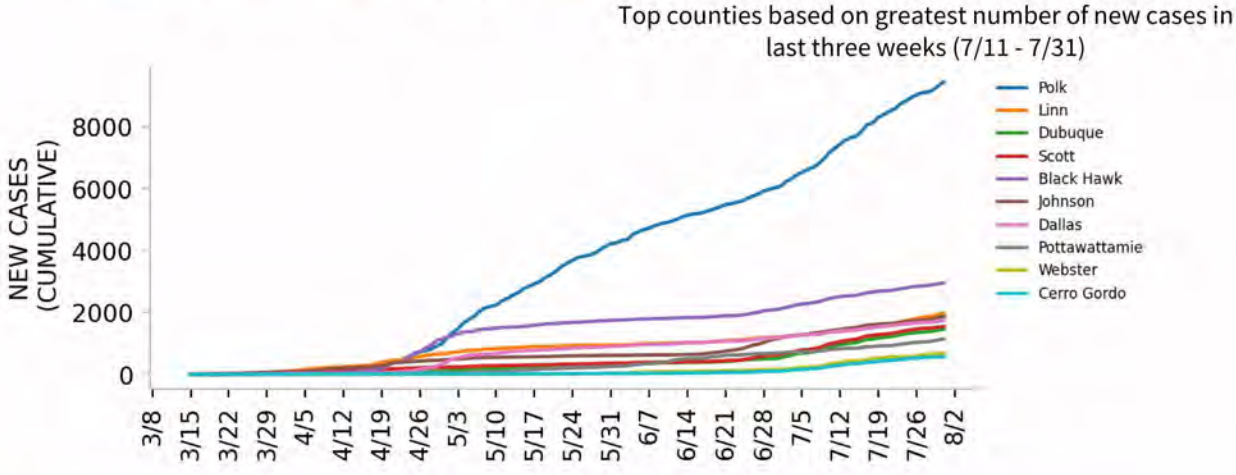
NEW CASES



TESTING



TOP COUNTIES

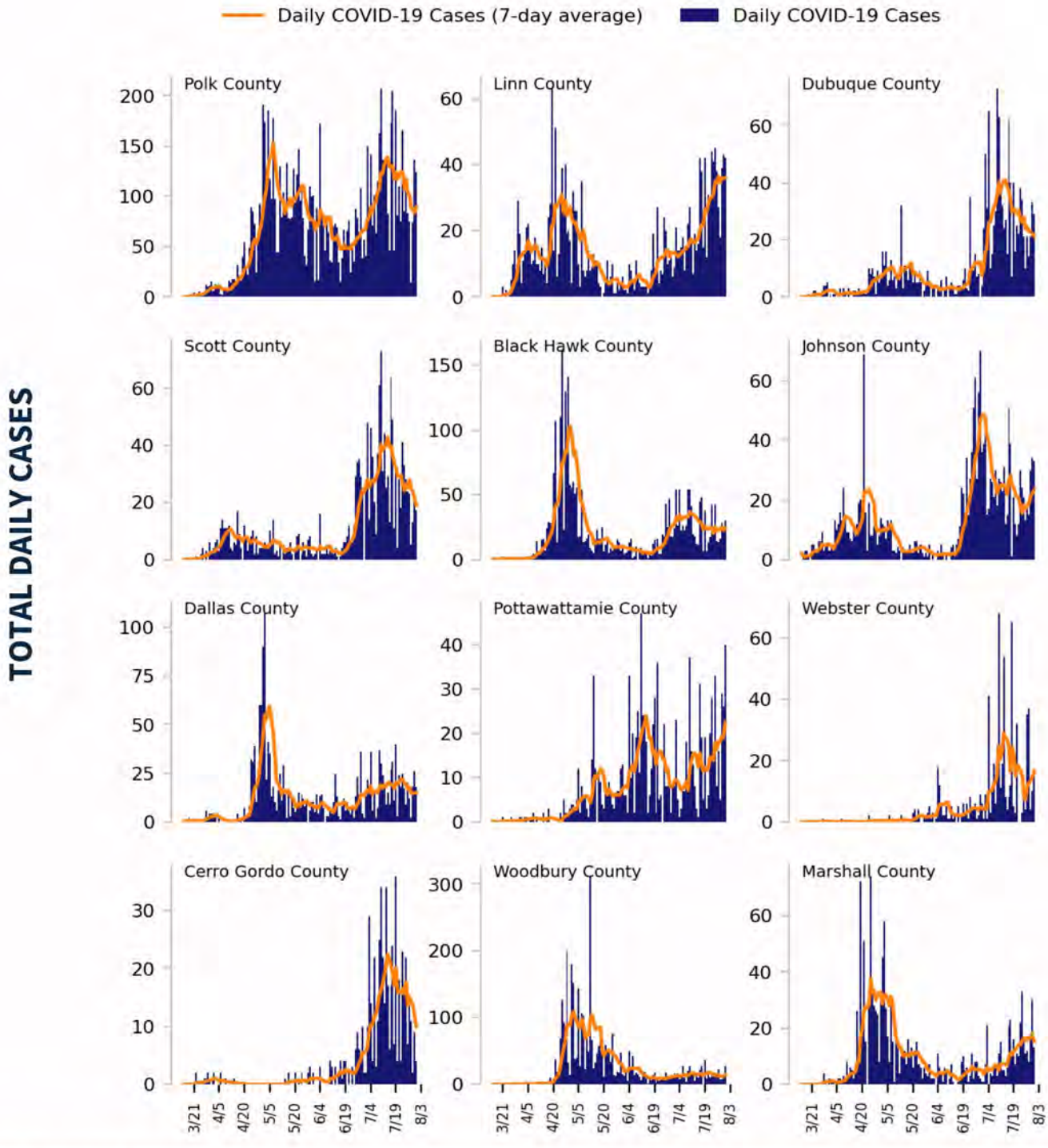


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

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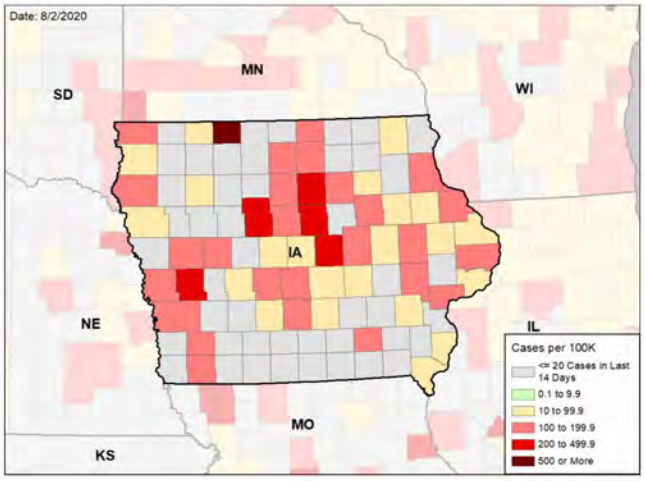
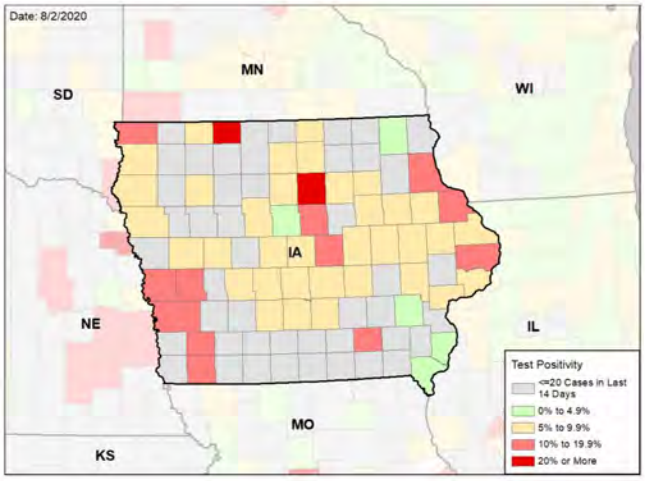
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

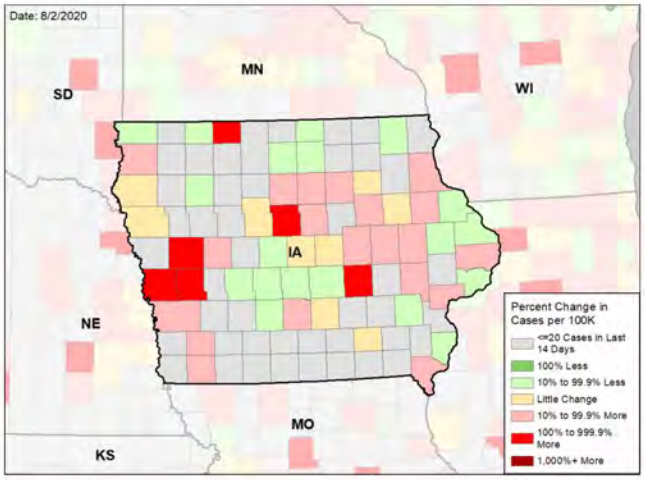
NEW CASES PER 100,000 DURING LAST WEEK



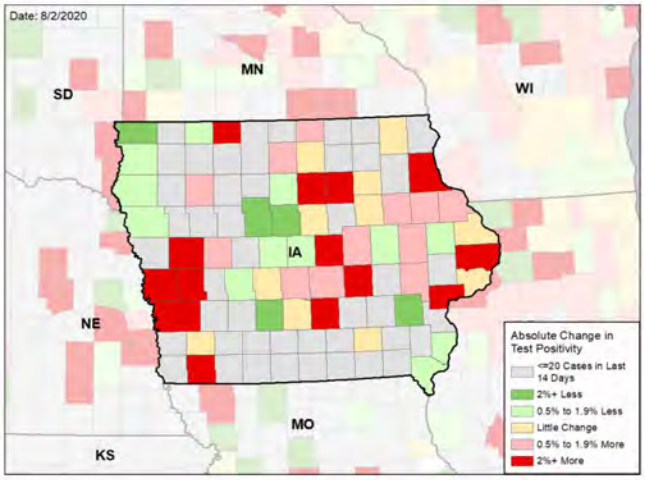
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



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National Picture

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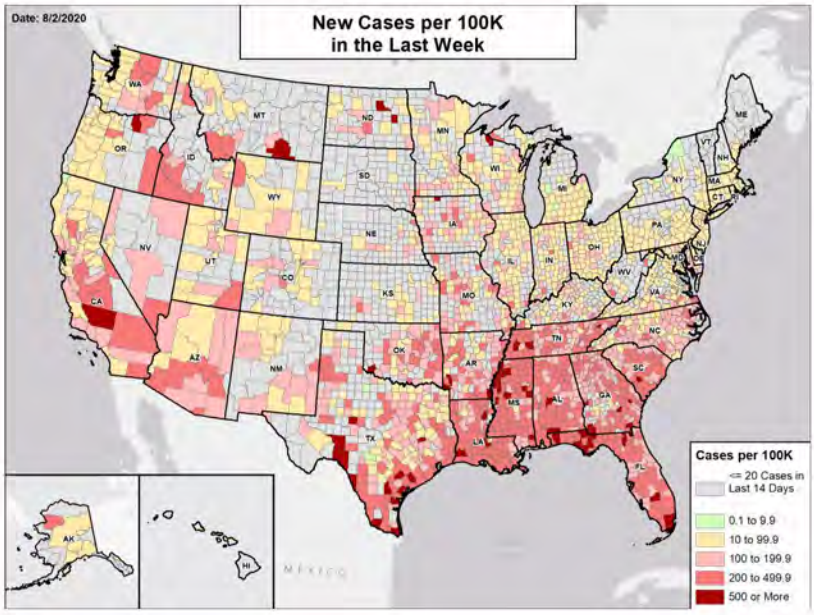
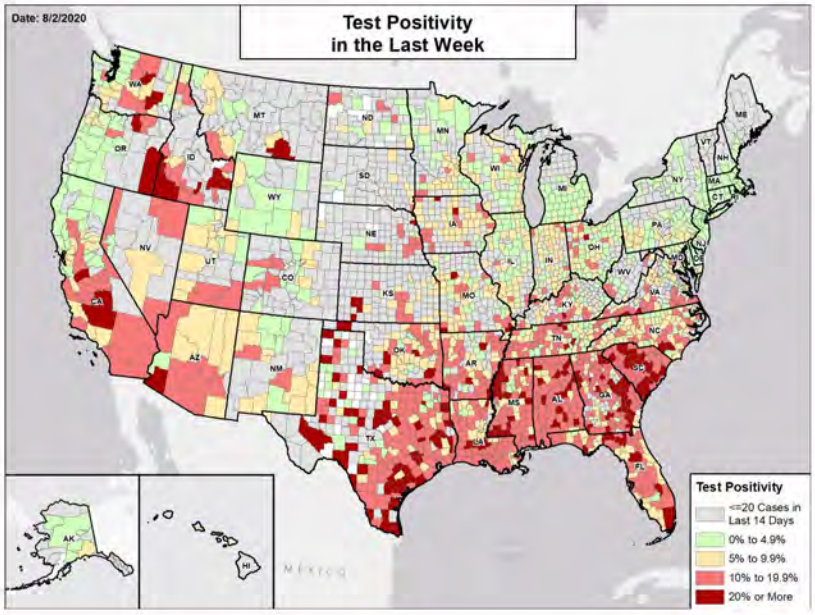


TEST POSITIVITY LAST WEEK



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Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

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KANSAS

STATE REPORT | 08.02.2020

SUMMARY

- Kansas is at the upper boundary of the yellow zone for cases and in the yellow zone for test positivity, indicating a rate between 5% to 10%.
- Kansas has seen a decrease in new cases and stability in testing positivity over the past week.
- Cases continue to be concentrated in the Kansas City and Wichita CBSAs. Most rural counties have lower incidence, but counties in southwestern Kansas (Finney, Gray, Seward) continue to report elevated incidence and test positivity.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Johnson County, 2. Sedgwick County, and 3. Wyandotte County. These counties represent 64.2 percent of new cases in Kansas.
- Kansas had 93 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 1 to support operations activities from FEMA and 7 to support operations activities from ASPR.
- Between Jul 25 - Jul 31, on average, 26 patients with confirmed COVID-19 and 60 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Kansas. An average of 70 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Continue communication around the state masking mandate, especially with counties that have rising cases and that have opted out of requiring masks, regarding the risks if cases continue to rise of decreased business activity and difficulties with school operations.
- In counties with rising test percent positivity, close all bars, increase outdoor dining opportunities, decrease indoor dining to 25%, and limit social gatherings to 10 or fewer people. Consider closing bars at 11pm in other yellow and red counties.
- Continue the scale-up of testing, moving to community-led neighborhood testing and working with local community groups to increase household testing of multigenerational households, with clear guidance on test positive isolation procedures and mask use.
- Increase messaging of the risk of serious disease in all age groups with preexisting medical conditions, including obesity, hypertension, and diabetes mellitus.
- Expand testing capacity in Public Health labs, adding shifts and weekend shifts to decrease turnaround times.
- Work with university students to identify and disseminate messaging that resonates with students.
- Identify universities with RNA detection platforms; consider efforts to use this equipment to expand surveillance testing for university students and schools (K-12, community colleges).
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

KANSAS

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	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	2,697 (93)	-18.1%	19,158 (135)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	9.2%	-0.5%*	8.6%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	38,681** (1,328)	-13.3%**	176,924** (1,251)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	29 (1)	+26.1%	156 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	4.2%	-0.1%*	5.6%	12.3%

MOBILITY

* Indicates absolute change in percentage points.
** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	2	Wichita Garden City	14 Top 12 shown (full list below)	Kansas City Topeka Salina Emporia Liberal Hutchinson Hays Coffeyville Pittsburg Dodge City Winfield Ottawa
COUNTY LAST WEEK	4	Sedgwick Wyandotte Finney Gray	21 Top 12 shown (full list below)	Johnson Shawnee Leavenworth Riley Lyon Saline Butler Seward Reno Harvey Ellis Montgomery

All Yellow CBSAs: Kansas City, Topeka, Salina, Emporia, Liberal, Hutchinson, Hays, Coffeyville, Pittsburg, Dodge City, Winfield, Ottawa, McPherson, Great Bend

All Yellow Counties: Johnson, Shawnee, Leavenworth, Riley, Lyon, Saline, Butler, Seward, Reno, Harvey, Ellis, Montgomery, Crawford, Ford, Cowley, Sumner, Miami, Franklin, McPherson, Barton, Jefferson

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
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- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

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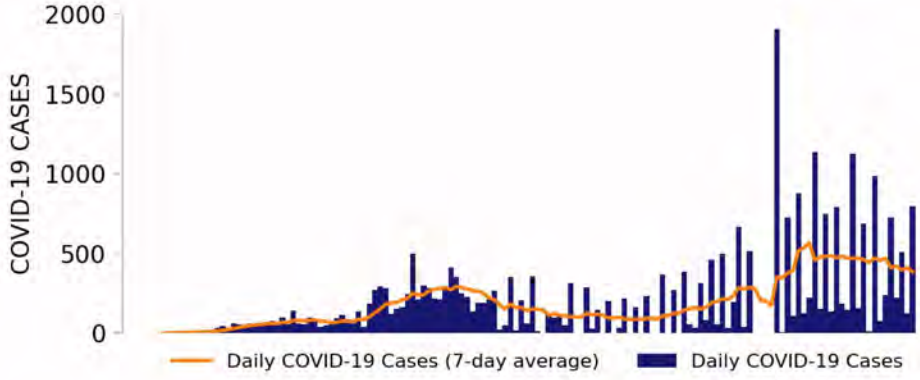
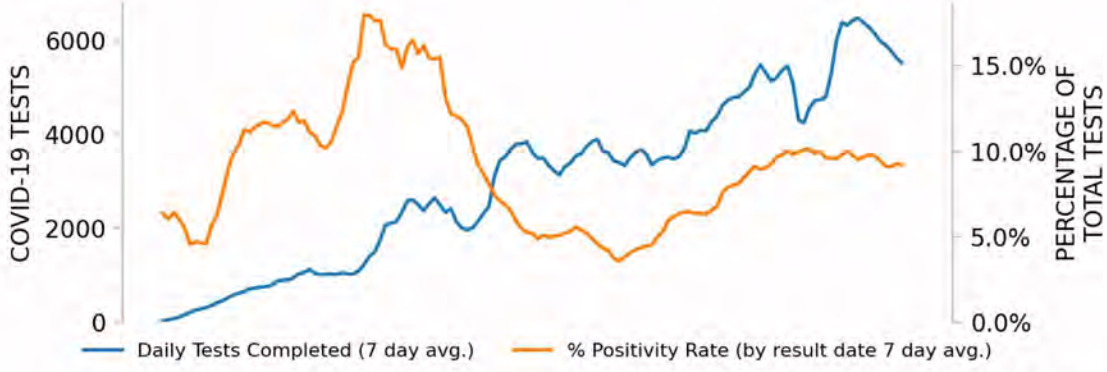
NEW CASES

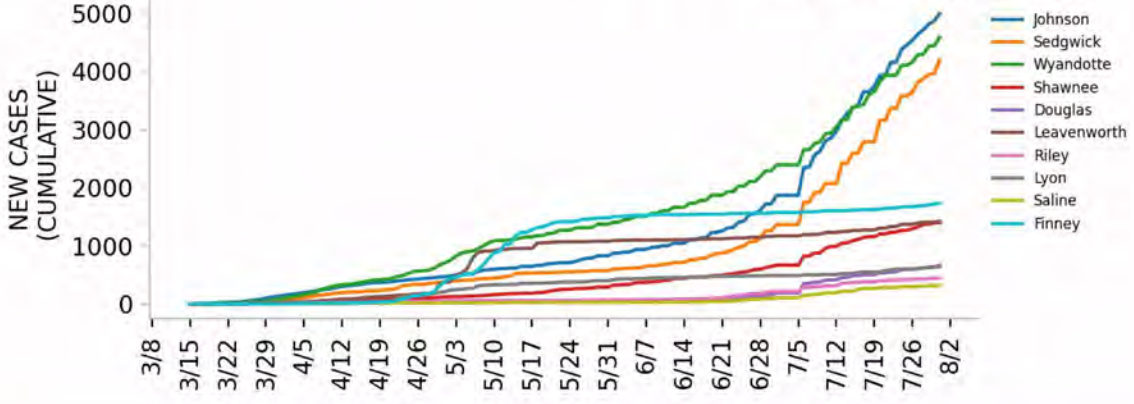


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

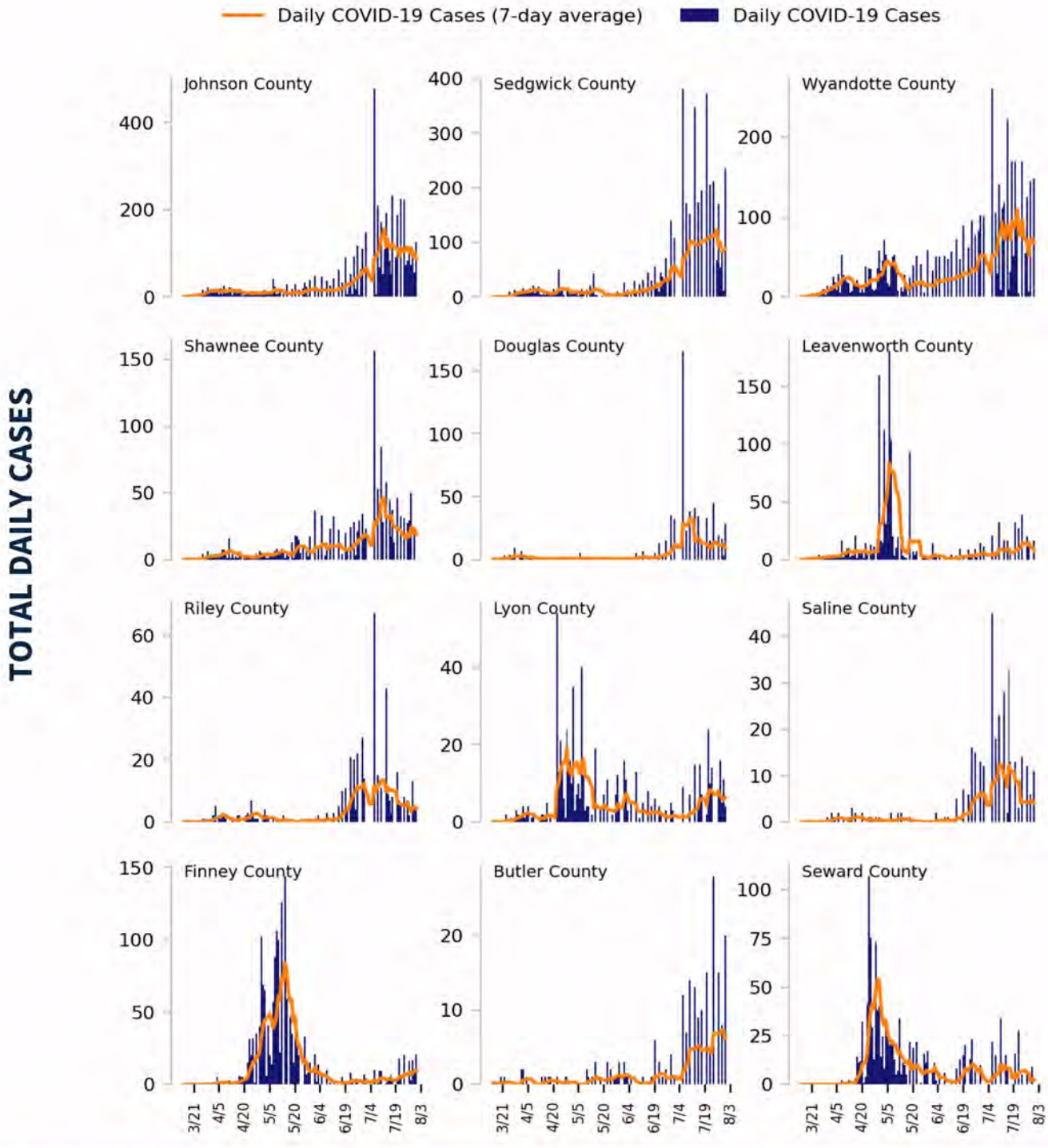


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

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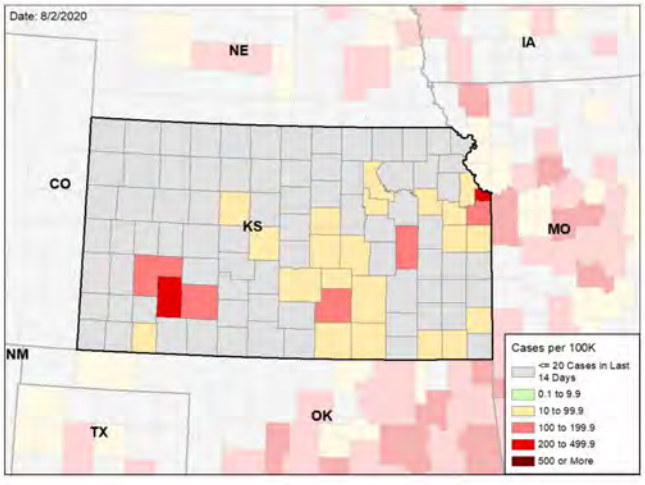
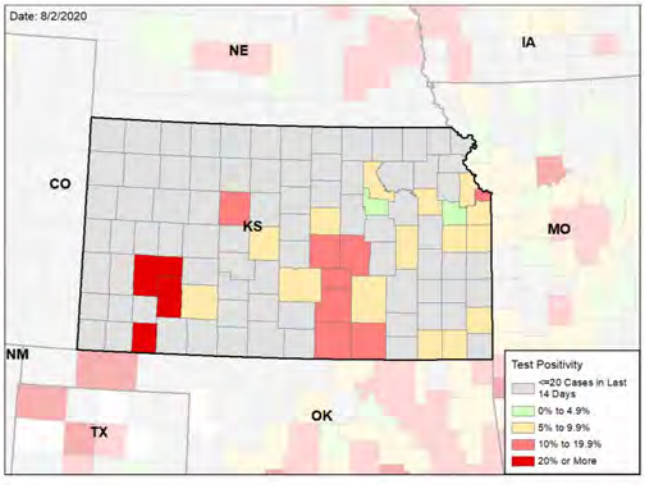
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

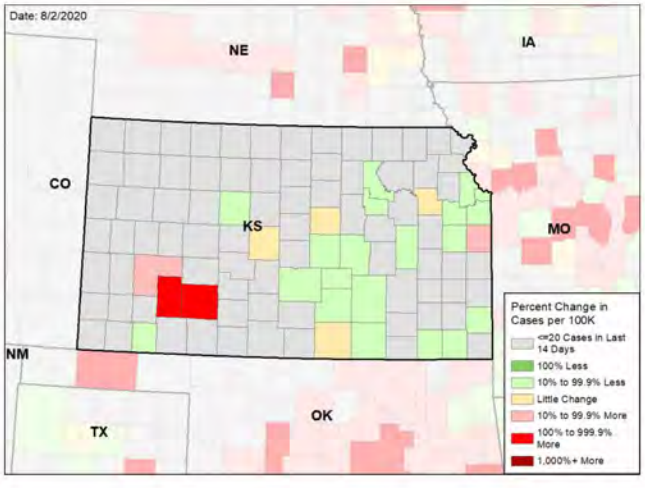
NEW CASES PER 100,000 DURING LAST WEEK



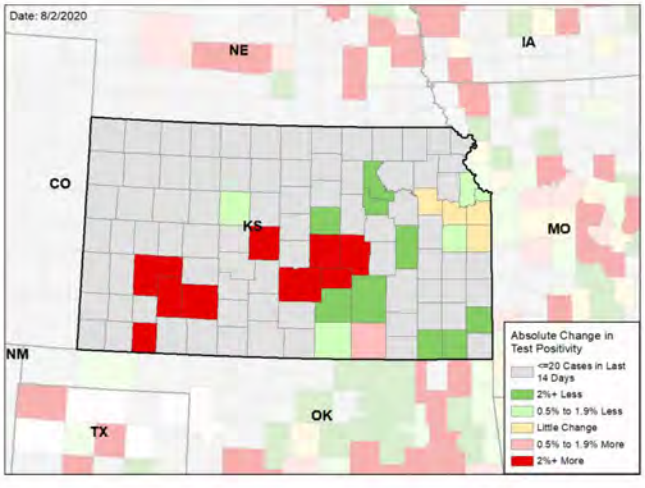
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

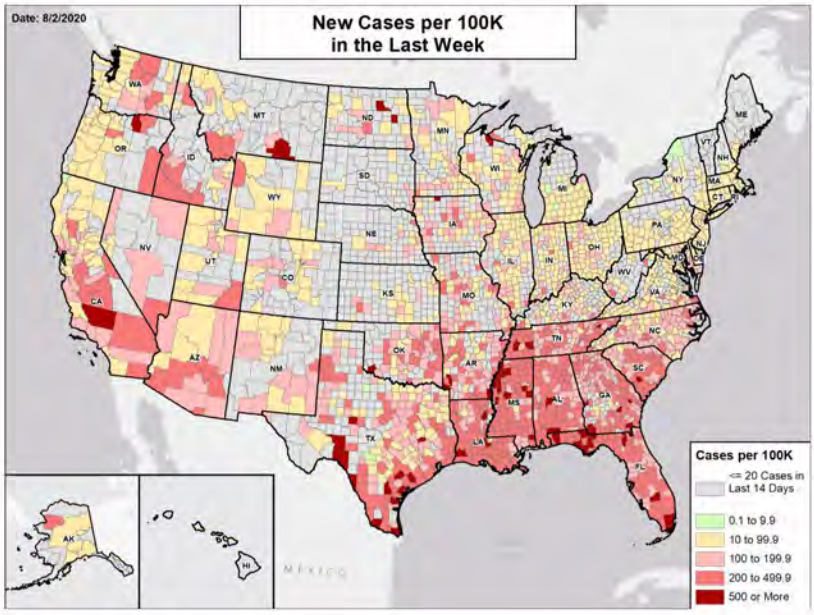


DATA SOURCES

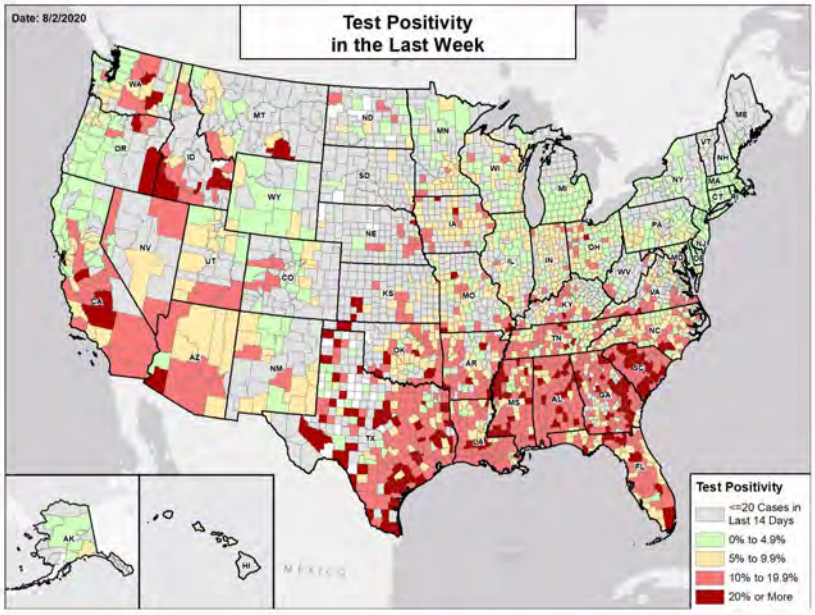
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

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COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

KENTUCKY

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SUMMARY

- Kentucky remains in the yellow zone for cases, indicating between 10 to 100 new cases per 100,000 population last week, and the yellow zone for test positivity, indicating a rate between 5% to 10%.
- Kentucky has seen stability in new cases and stability in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Jefferson County, 2. Fayette County, and 3. Warren County. These counties represent 34.6 percent of new cases in Kentucky.
- Kentucky had 95 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 5 to support operations activities from FEMA.
- Between Jul 25 - Jul 31, on average, 146 patients with confirmed COVID-19 and 127 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Kentucky. An average of 77 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Keep mask requirement in place statewide. Work with local communities to ensure high usage rates. Identify mechanisms to assess compliance with local regulations.
- Message to residents that if they vacation in an area with high COVID prevalence and return to an area with low COVID prevalence, they should: remain socially distanced, stay masked in all public spaces, and avoid all indoor gatherings where social distancing and masks cannot be maintained.
- The nursing home facilities with more than 2 confirmed or suspected COVID-19 cases are largely in red and yellow zones. Preventing further spread in these areas is critical to protect the vulnerable nursing home population. Protect vulnerable populations in assisted living and long-term care facilities through weekly testing of all workers and requiring masks. In facilities with workers who tested positive, ensure all residents have been promptly tested and appropriate cohorting measures are in place. Conduct on-site inspections to ensure COVID-19 safety guidance and considerations are being implemented.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

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	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	4,222 (95)	-2.4%	158,298 (237)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	8.4%	-0.3%*	13.6%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	69,044** (1,545)	-5.0%**	1,078,189** (1,611)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	44 (1)	+29.4%	2,494 (4)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	7.2%	+0.6%*	22.5%	12.3%

MOBILITY

* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	5	Louisville/Jefferson County Bowling Green Glasgow Mayfield Evansville	17 Top 12 shown (full list below)	Lexington-Fayette Cincinnati London Elizabethtown-Fort Knox Clarksville Owensboro Middlesborough Paducah Danville Frankfort Somerset Madisonville
COUNTY LAST WEEK	18 Top 12 shown (full list below)	Jefferson Warren Oldham Graves Barren Scott Laurel Henderson Casey Knox Adair Spencer	34 Top 12 shown (full list below)	Fayette Kenton Boone Hardin Christian Daviess Bell Campbell Harlan Shelby Jessamine Ohio

All Yellow CBSAs: Lexington-Fayette, Cincinnati, London, Elizabethtown-Fort Knox, Clarksville, Owensboro, Middlesborough, Paducah, Danville, Frankfort, Somerset, Madisonville, Bardstown, Mount Sterling, Central City, Campbellsville, Murray

All Red Counties: Jefferson, Warren, Oldham, Graves, Barren, Scott, Laurel, Henderson, Casey, Knox, Adair, Spencer, Henry, Monroe, Anderson, Metcalfe, Cumberland, Fulton

All Yellow Counties: Fayette, Kenton, Boone, Hardin, Christian, Daviess, Bell, Campbell, Harlan, Shelby, Jessamine, Ohio, McCracken, Bullitt, Pulaski, Hopkins, Perry, Nelson, Muhlenberg, Calloway, Whitley, Clay, Taylor, Logan, Meade, Simpson, Lincoln, Montgomery, Marion, Russell, Powell, Owen, Garrard, Lawrence

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
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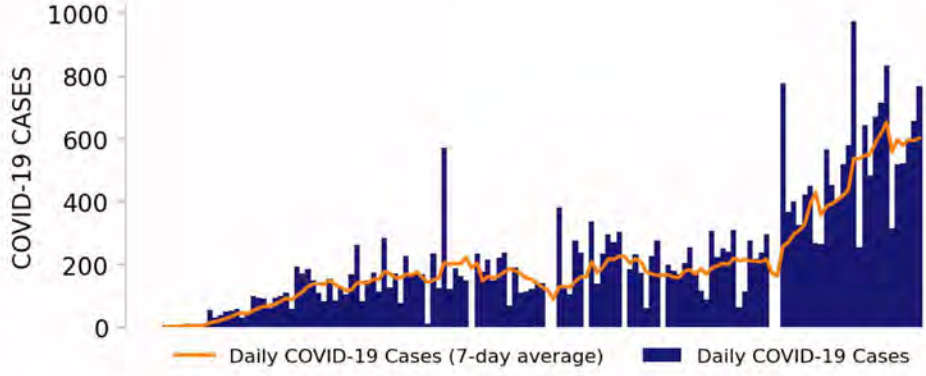
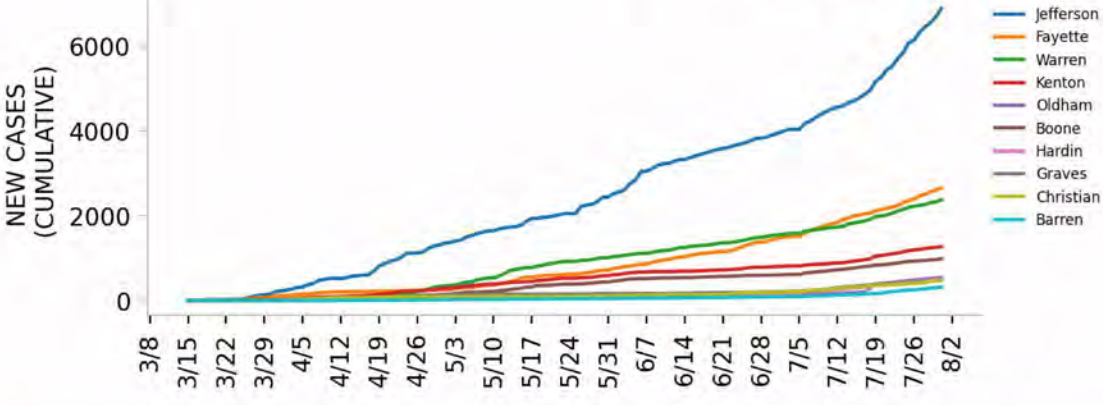
NEW CASES



TESTING

TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

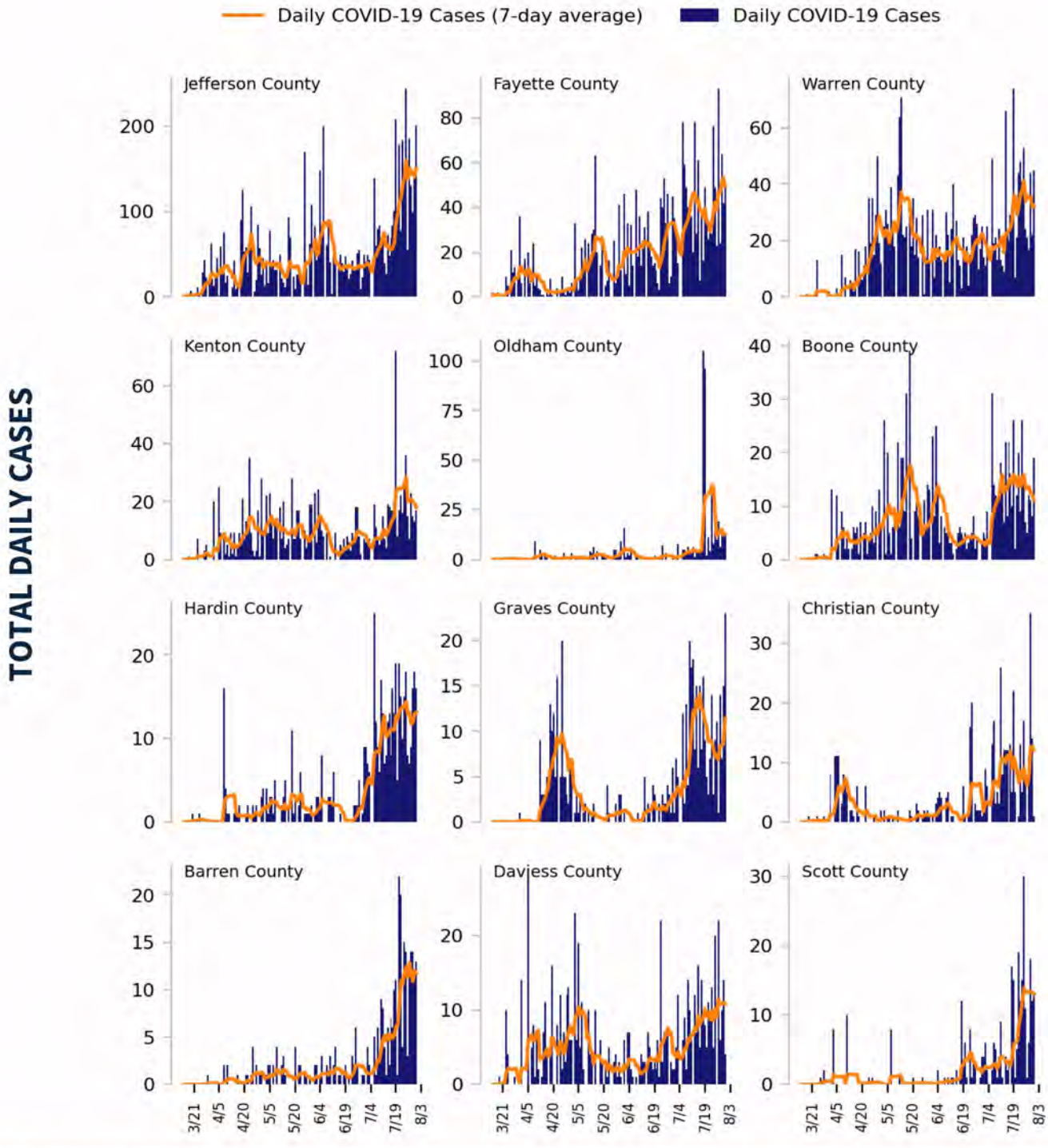


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

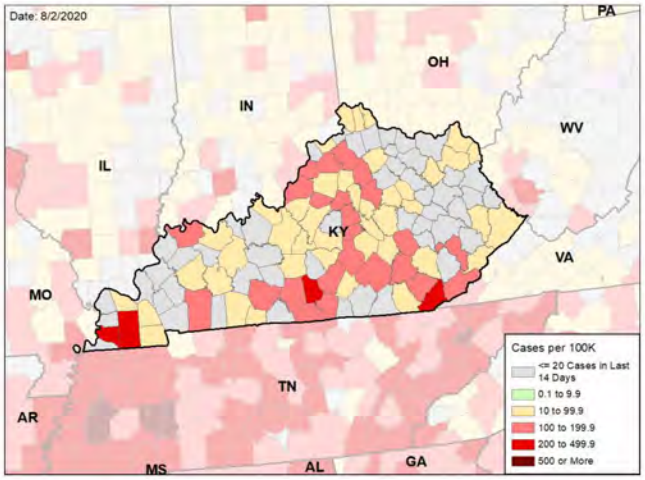
Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

KENTUCKY

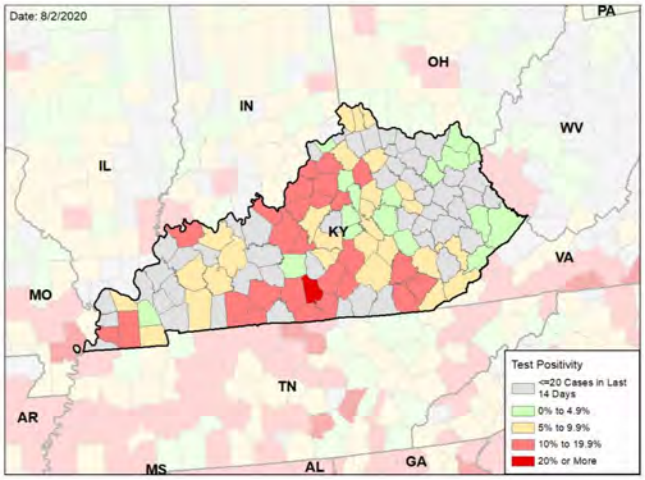
STATE REPORT | 08.02.2020

CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

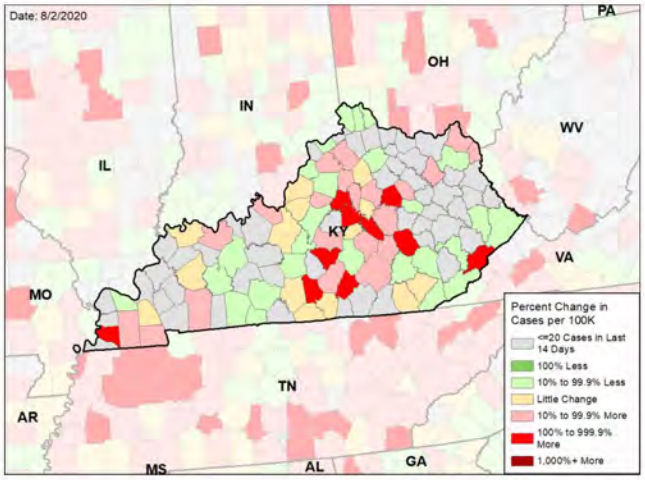
NEW CASES PER 100,000 DURING LAST WEEK



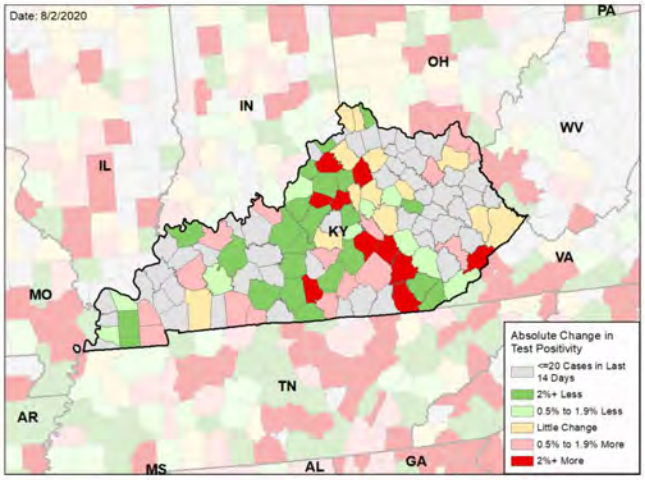
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
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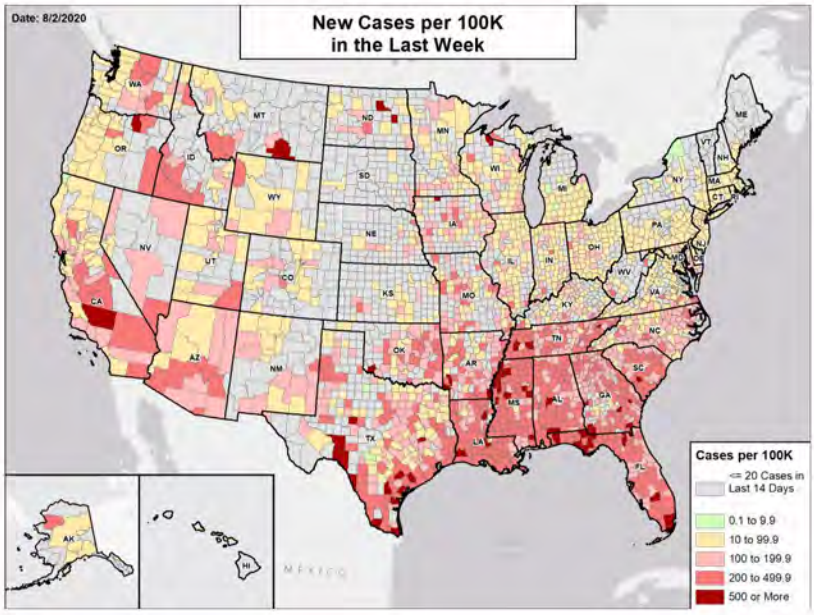
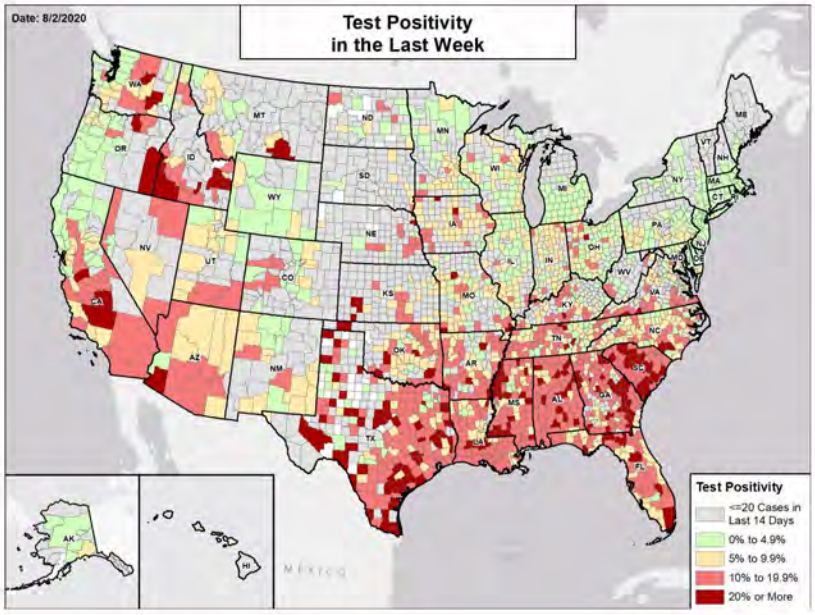
National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

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COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

LOUISIANA

STATE REPORT | 08.02.2020

SUMMARY

- Louisiana is in the red zone for cases, indicating more than 100 new cases per 100,000 population last week, and the red zone for COVID-19 test positivity, indicating a rate above 10%.
- Louisiana has seen a decrease in new cases and a decrease in testing positivity over the past week with evidence of an early impact of mitigation efforts.
- The following three parishes had the highest number of new cases over the past 3 weeks: 1. East Baton Rouge Parish, 2. Jefferson Parish, and 3. Calcasieu Parish. These parishes represent 25.4 percent of new cases in Louisiana.
- Widespread transmission continues to occur from rural to urban areas, and mitigation efforts need to be implemented statewide to stop the continued community spread.
- Louisiana had 270 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 9 to support operations activities from FEMA; 64 to support medical activities from ASPR; 4 to support operations activities from ASPR; 9 to support epidemiology activities from CDC; 1 to support operations activities from CDC; 39 to support operations activities from USCG; and 10 to support medical activities from VA.
- The federal government has supported a surge testing site in Baton Rouge, LA and a surge testing site in New Orleans, LA.
- Between Jul 25 - Jul 31, on average, 180 patients with confirmed COVID-19 and 66 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Louisiana. An average of 81 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Protect those in nursing homes, assisted living, and long-term care facilities by ensuring access to rapid facility-wide testing in response to a resident or staff member with COVID-19 in addition to the current testing approach. Ensure social distancing and universal facemask use.
- Continue the statewide mask mandate.
- Continue the closure of establishments where social distancing and mask use cannot occur, such as bars.
- Consider expanding the outdoor dining approach and implementing further restrictions to limit indoor dining to less than 25% of normal capacity.
- Ask citizens to limit social gatherings to fewer than 10 people.
- Encourage individuals that have participated in any large social gatherings to get tested.
- Increase messaging of the risk of serious disease in all age groups with preexisting medical conditions, including obesity, hypertension, and diabetes mellitus.
- Continue the scale-up of testing, moving to community-led neighborhood testing. Work with local communities to implement and provide clear guidance for households that test positive, including on individual isolation procedures.
- Continue to enhance contact tracing and ensure the ability of cases and contacts to quarantine or isolate safely.
- Ensure all public health labs are fully staffed and running 24/7, utilizing all platforms to reduce turnaround times. Institute 3:1 or 2:1 pooling of test specimens on all high throughput machines as long as turnaround times are greater than 36 hours.
- For families and cohabiting households, screen entire households.
- Require all universities with RNA detection platforms to use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

LOUISIANA

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	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	12,546 (270)	-17.2%	87,300 (204)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	12.0%	-1.3%*	12.2%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	102,757** (2,210)	-11.8%**	317,760** (744)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	232 (5)	+13.2%	2,954 (7)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	34.2%	+1.8%*	21.6%	12.3%

MOBILITY

* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating parish-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a parish; 100% represents the baseline mobility level. Data is anonymized and provided at the parish level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

LOUISIANA

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COVID-19 PARISH AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	**15** Top 12 shown (full list below)	Baton Rouge Lafayette Lake Charles Shreveport-Bossier City Houma-Thibodaux Monroe Hammond Opelousas Morgan City DeRidder Fort Polk South Jennings	**4**	New Orleans-Metairie Alexandria Minden Ruston
PARISH LAST WEEK	**45** Top 12 shown (full list below)	East Baton Rouge Calcasieu Lafayette St. Tammany Ouachita Tangipahoa Terrebonne Livingston Acadia St. Landry Lafourche Iberia	**16** Top 12 shown (full list below)	Jefferson Caddo Orleans Rapides Avoyelles Webster Lincoln Morehouse Madison East Feliciana Plaquemines Concordia

All Red CBSAs: Baton Rouge, Lafayette, Lake Charles, Shreveport-Bossier City, Houma-Thibodaux, Monroe, Hammond, Opelousas, Morgan City, DeRidder, Fort Polk South, Jennings, Bogalusa, Natchitoches, Natchez
All Red Parishes: East Baton Rouge, Calcasieu, Lafayette, St. Tammany, Ouachita, Tangipahoa, Terrebonne, Livingston, Acadia, St. Landry, Lafourche, Iberia, Ascension, Bossier, Vermilion, St. Mary, Allen, St. Martin, St. Charles, Beauregard, Vernon, Evangeline, Jefferson Davis, Pointe Coupee, Washington, Sabine, St. Bernard, Natchitoches, Iberville, St. John the Baptist, West Baton Rouge, Richland, Franklin, De Soto, St. James, Grant, Assumption, Union, St. Helena, Red River, Winn, West Carroll, Caldwell, Cameron, East Carroll
All Yellow Parishes: Jefferson, Caddo, Orleans, Rapides, Avoyelles, Webster, Lincoln, Morehouse, Madison, East Feliciana, Plaquemines, Concordia, Jackson, LaSalle, Claiborne, Catahoula

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and parishes that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.
Yellow Zone: Those core-based statistical areas (CBSAs) and parishes that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."
Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating parish-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.
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POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
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Testing

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- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

LOUISIANA

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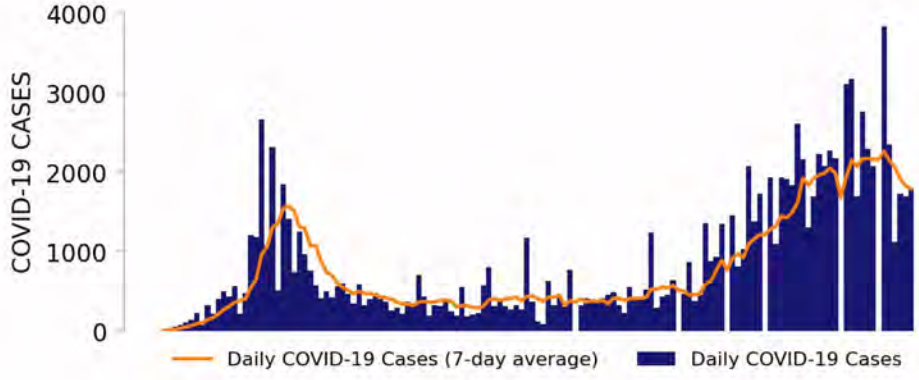
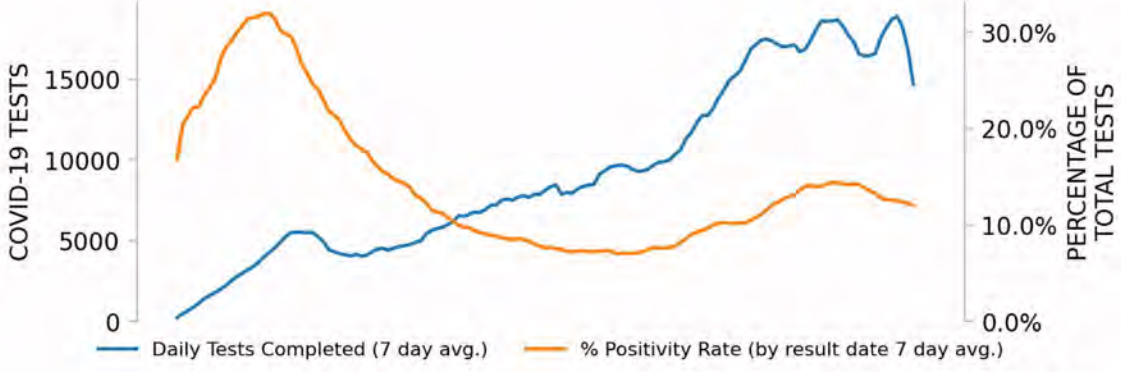
NEW CASES

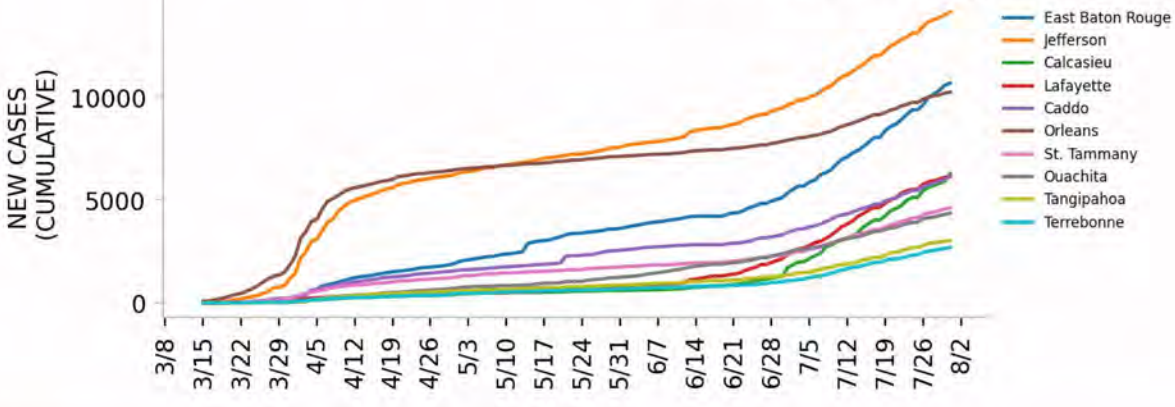


TESTING



TOP PARISHES

Top parishes based on greatest number of new cases in last three weeks (7/11 - 7/31)



DATA SOURCES

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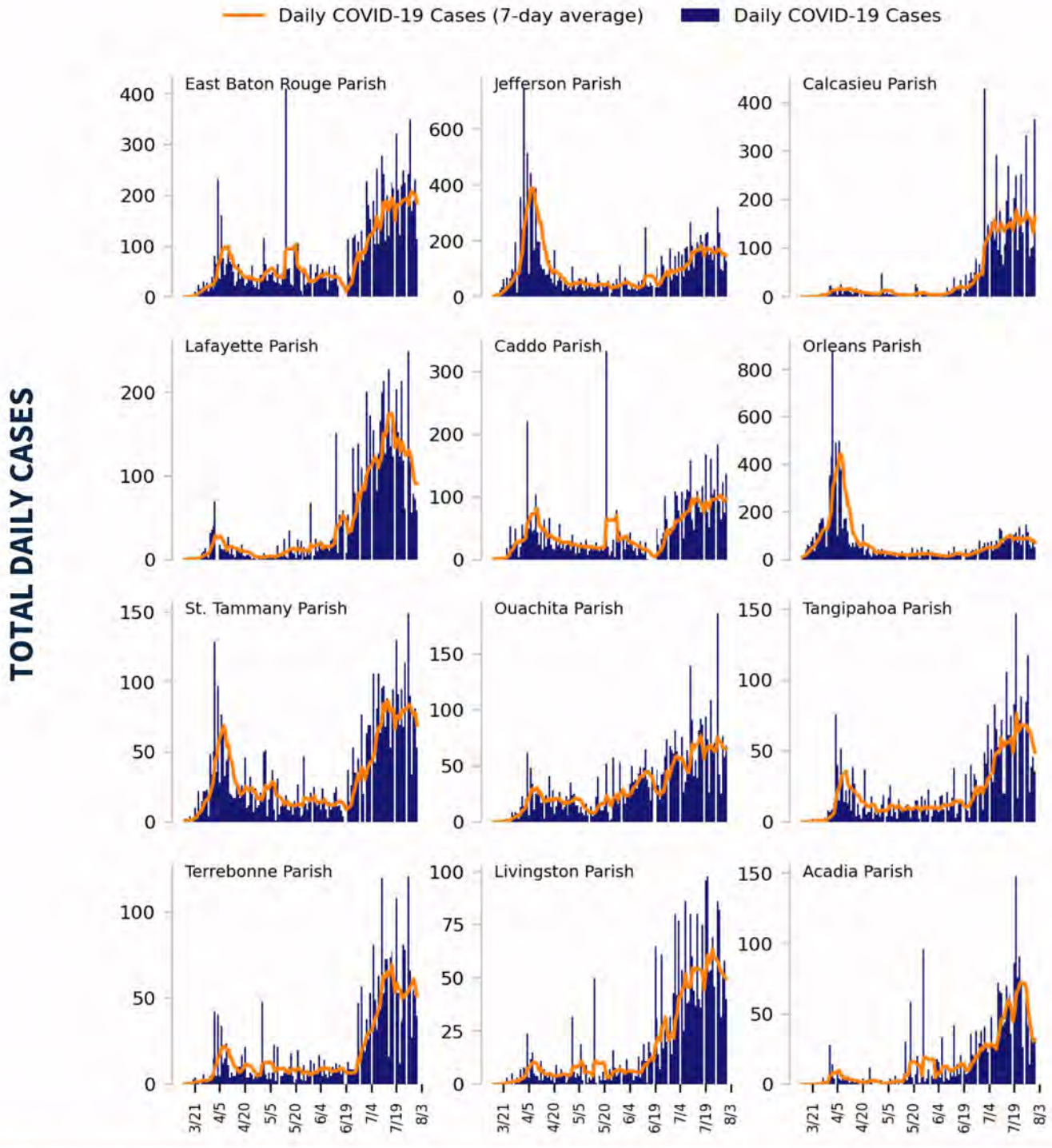
Top 12 parishes based on number of new cases in the last 3 weeks



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LOUISIANA

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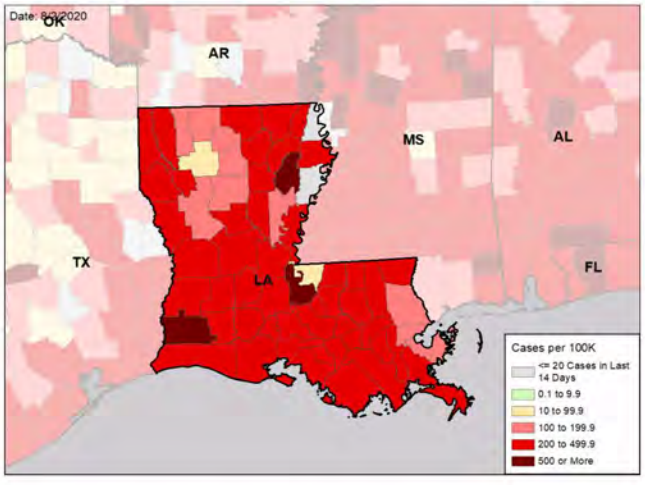
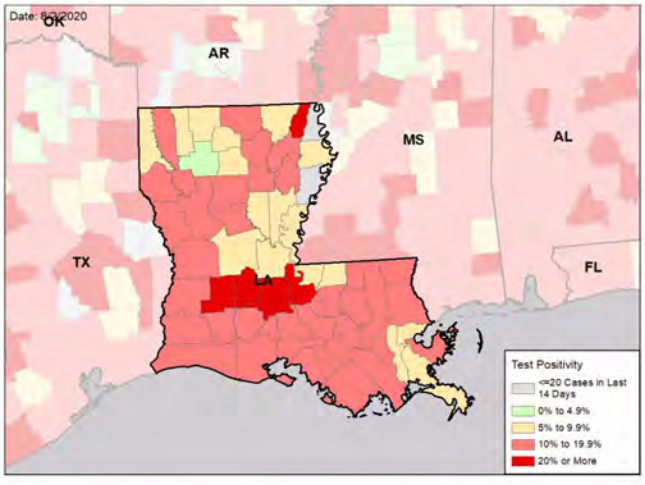
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

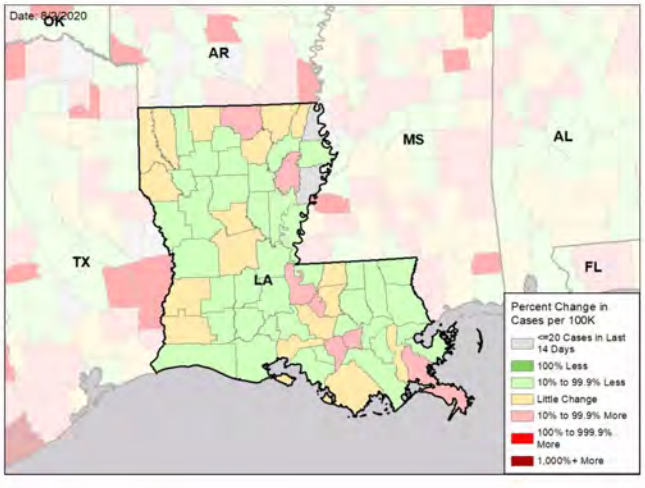
NEW CASES PER 100,000 DURING LAST WEEK



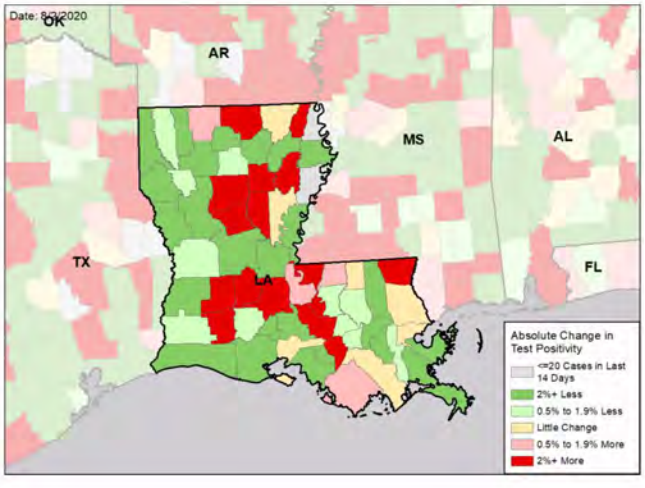
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



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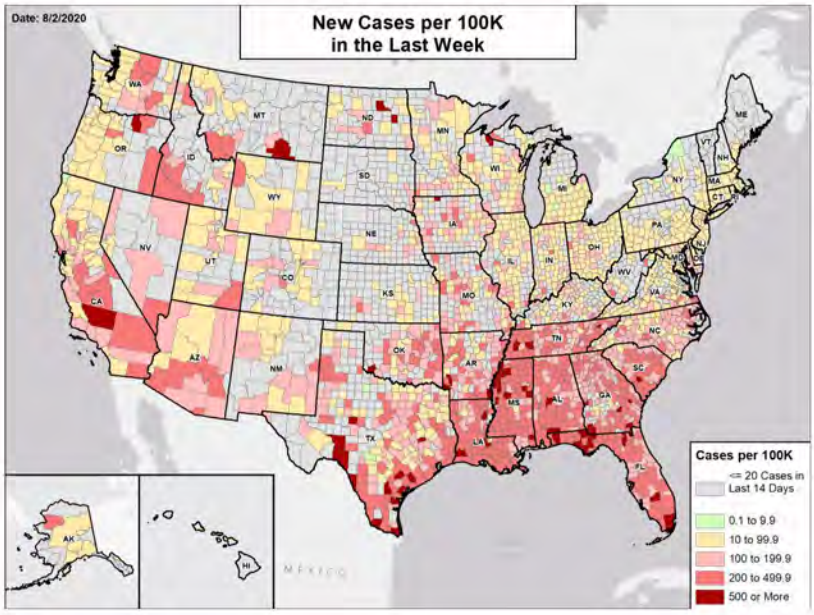
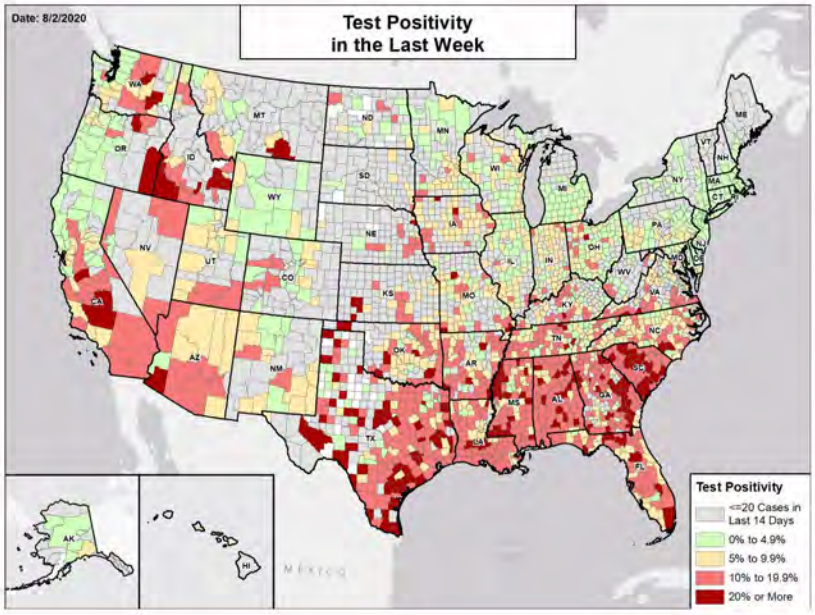
National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



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Methods

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COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

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Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

MAINE

STATE REPORT | 08.02.2020

SUMMARY

- Maine is in the yellow zone for cases, indicating between 10 to 100 new cases per 100,000 population last week, and the green zone for test positivity, indicating a rate below 5%.
- Maine has seen an increase in new cases and stability in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Cumberland County, 2. York County, and 3. Androscoggin County. These counties represent 74.9 percent of new cases in Maine.
- Maine had 12 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 2 to support operations activities from FEMA and 3 to support medical activities from VA.
- Between Jul 25 - Jul 31, on average, 4 patients with confirmed COVID-19 and 28 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Maine. An average of 75 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Continue to enforce social distancing, especially in indoor settings outside of the home and in touristed communities; consider active monitoring and use of fines.
- Cautious reopening and loosening of restrictions is warranted; continue to closely follow case rates and test positivity at the metro area and county level; intensify restrictions and community mitigation efforts early when increases in case rates and test positivity are observed.
- Consider pooled testing to expand test capacity and turnaround times, especially in areas with signs of increasing transmission where testing is low, such as York, Kennebec, and Androscoggin counties.
- Continue current policies to protect nursing home and long-term care facility residents; recommend requiring universal cloth face coverings or face masks, as appropriate, in the indoor environment where residents live.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

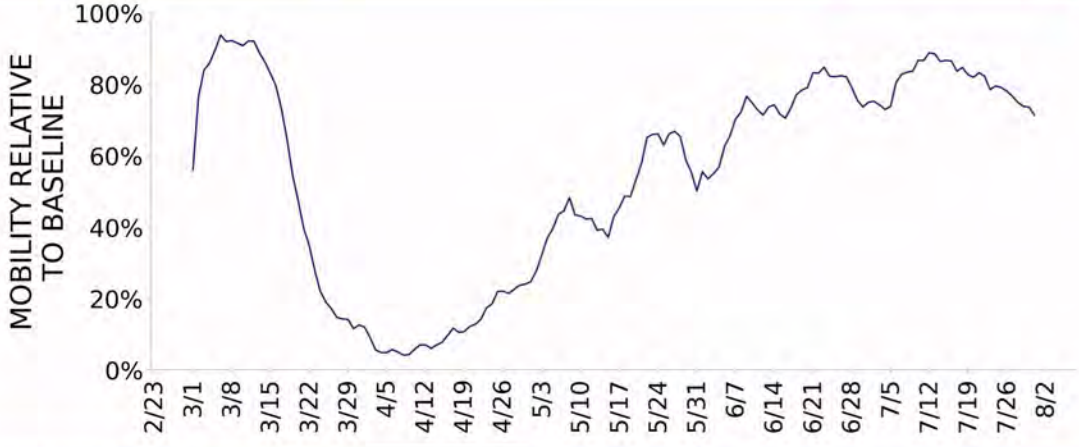
** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

MAINE

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	156 (12)	+36.8%	4,853 (33)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	1.0%	-0.2%*	1.9%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	14,953** (1,112)	+7.8%**	229,303** (1,545)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	5 (0)	+400.0%	144 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	2.3%	+0.1%*	4.3%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

MAINE

STATE REPORT | 08.02.2020

COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	0	N/A
COUNTY LAST WEEK	0	N/A	0	N/A

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

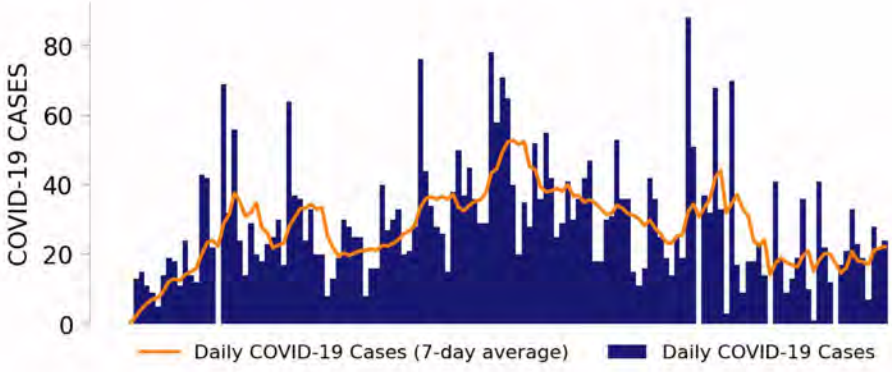
Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

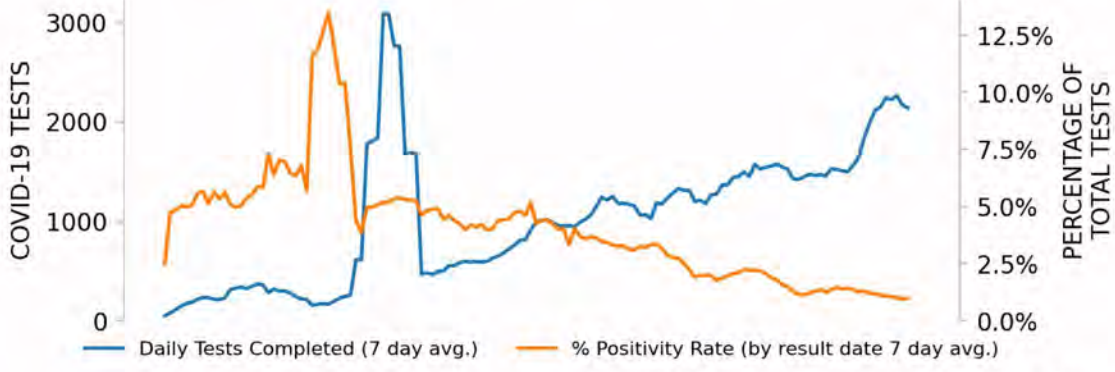
MAINE

STATE REPORT | 08.02.2020

NEW CASES

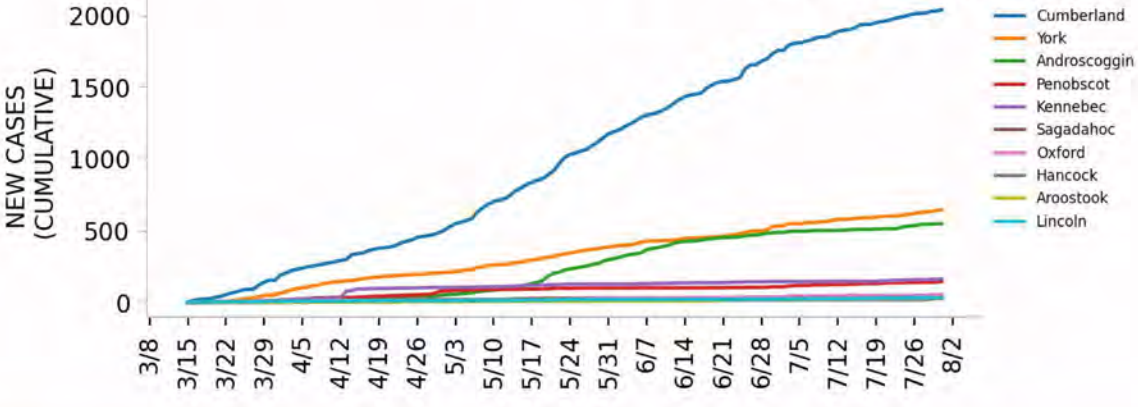


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

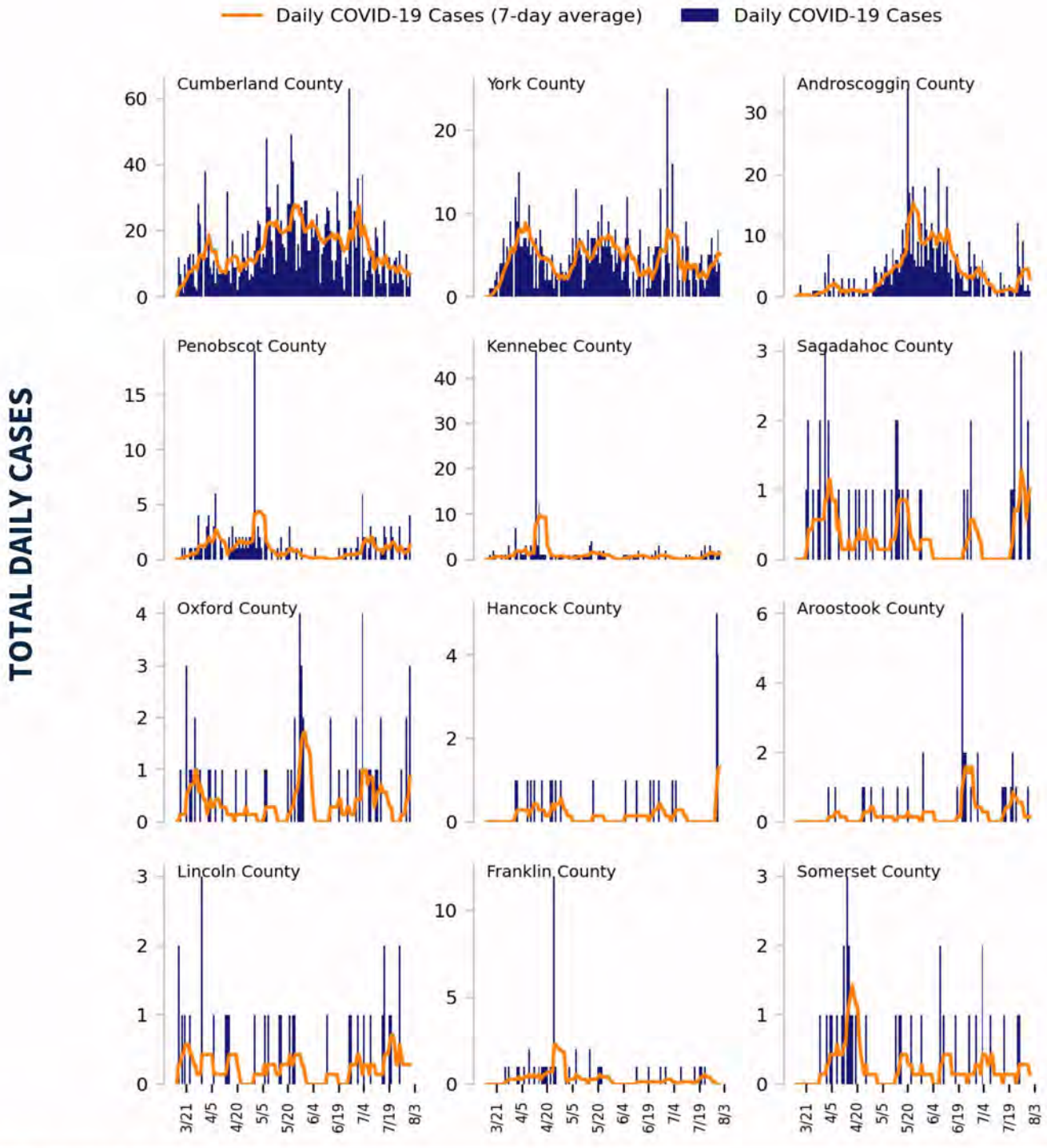


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

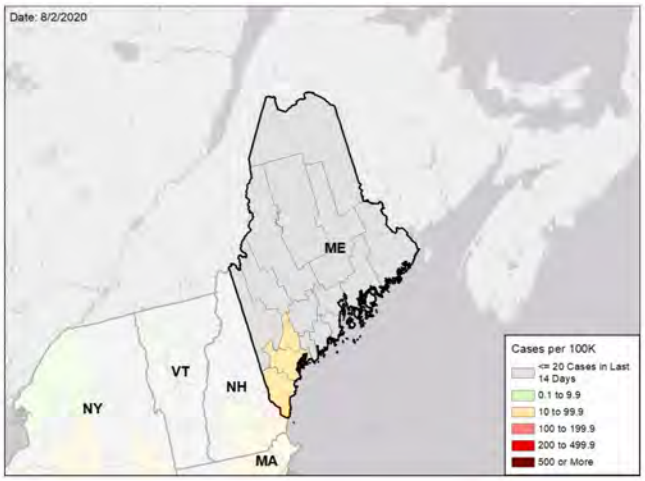
Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

MAINE

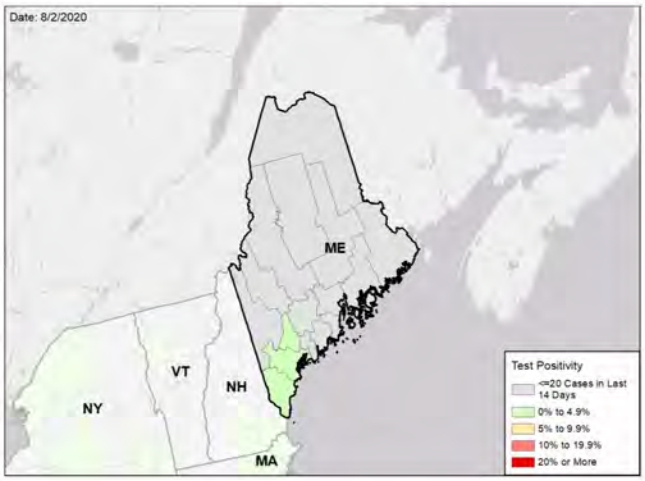
STATE REPORT | 08.02.2020

CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

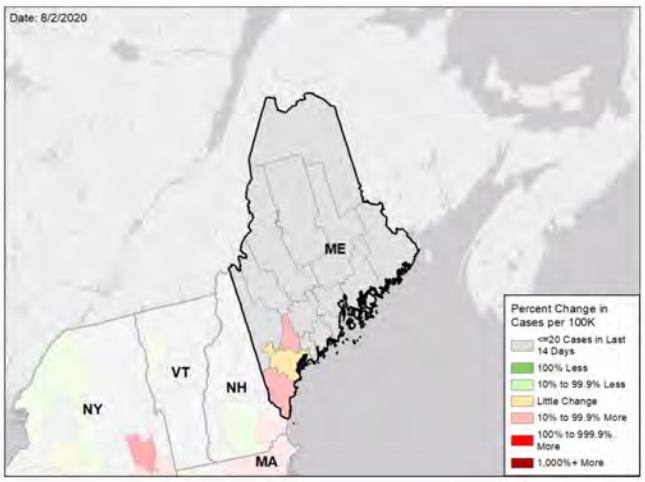
NEW CASES PER 100,000 DURING LAST WEEK



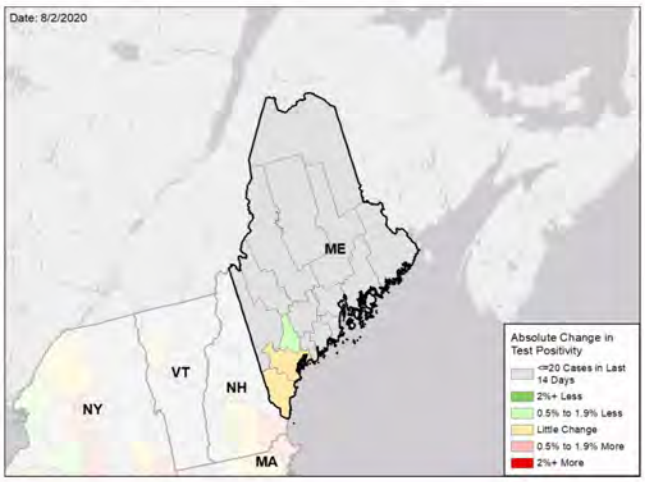
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

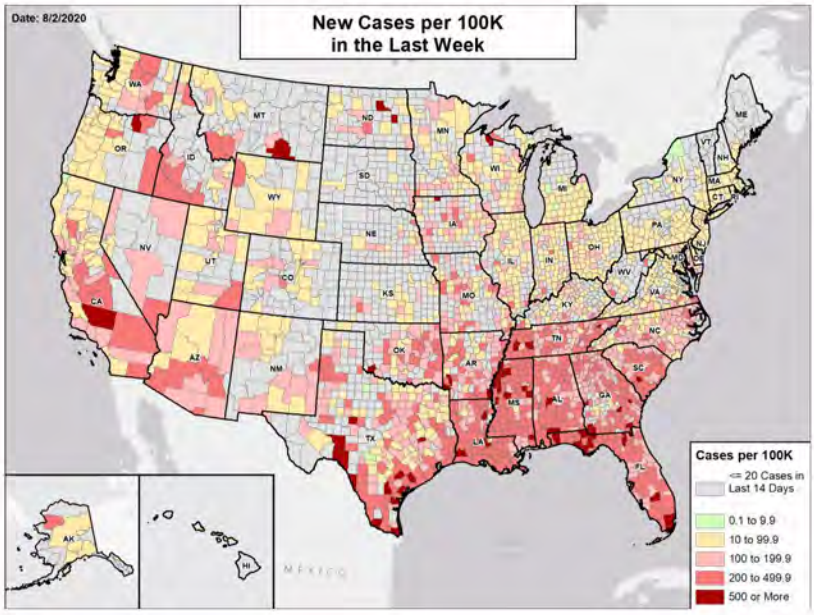


DATA SOURCES

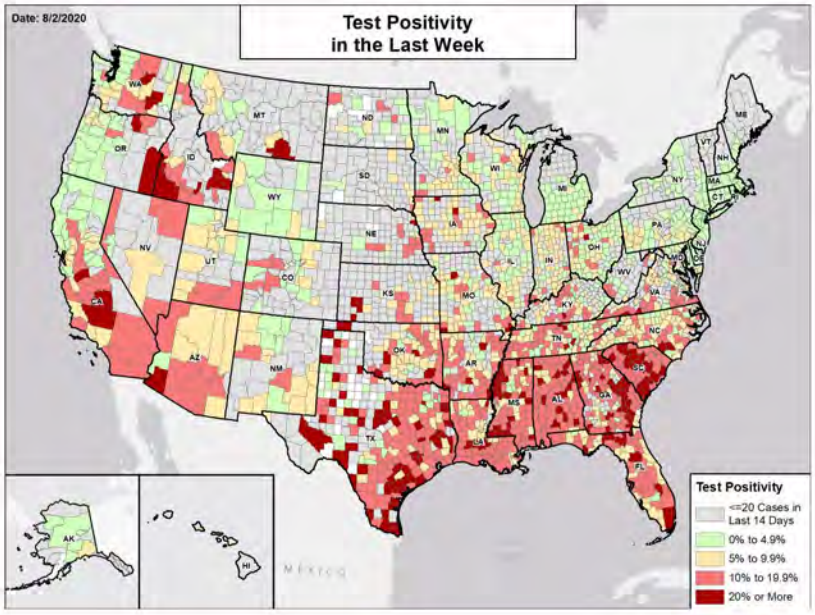
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

STATE REPORT | 08.02.2020

COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
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- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

MARYLAND

STATE REPORT | 08.02.2020

SUMMARY

- Maryland is in the red zone for cases, indicating more than 100 new cases per 100,000 population last week, and the green zone for test positivity, indicating a rate below 5%.
- Maryland has seen an increase in new cases and stability in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Baltimore County, 2. Baltimore City, and 3. Prince George's County. These counties represent 55.5 percent of new cases in Maryland.
- Maryland had 109 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 20 to support operations activities from FEMA; 28 to support operations activities from ASPR; 4 to support epidemiology activities from CDC; 14 to support operations activities from USCG; and 1 to support medical activities from VA.
- Between Jul 25 - Jul 31, on average, 205 patients with confirmed COVID-19 and 383 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Maryland. An average of 94 percent of hospitals reported each day during this period.*

RECOMMENDATIONS

- In localities in yellow zones, close bars and limit the size of social gatherings to 25 people or fewer.
- Keep mask requirement in place statewide. Work with local communities to ensure high usage rates. Identify mechanisms to assess compliance with local regulations.
- Message to residents that if they have vacationed in, or had visitors from, areas with high COVID-19 prevalence including the South and West of the United States, they should: avoid vulnerable individuals; remain socially distanced and masked when around others for a minimum of 14 days; avoid indoor gatherings where social distancing and masks cannot be maintained; and get tested if anyone in their family develops symptoms. Also, message that they can transmit the virus even when asymptomatic.
- The nursing home facilities with more than 2 confirmed or suspected COVID-19 cases are largely in yellow zones. Preventing further spread in these areas is critical to protect the vulnerable nursing home population. Protect vulnerable populations in assisted living and long-term care facilities through weekly testing of all workers and requiring masks. In facilities with workers who tested positive, ensure all residents have been promptly tested and appropriate cohorting measures are in place. Conduct on-site inspections to ensure COVID-19 safety guidance and considerations are being implemented.
- Providing timely test results to individuals so they can isolate and stop the spread is critical. Implement the following to increase testing capacity and decrease turnaround times:
    - (1) For family and cohabitating households, screen entire households in a single test by pooling a sample of each member's specimen. For households that test positive, isolate and conduct follow-up individual tests.
    - (2) Expand testing capacity in public health labs by adding shifts, including weekend shifts, to reduce turnaround times.
    - (3) Require all universities with RNA detection platforms to use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
    - (4) Work with Federally Qualified Health Centers to enhance testing in vulnerable communities.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

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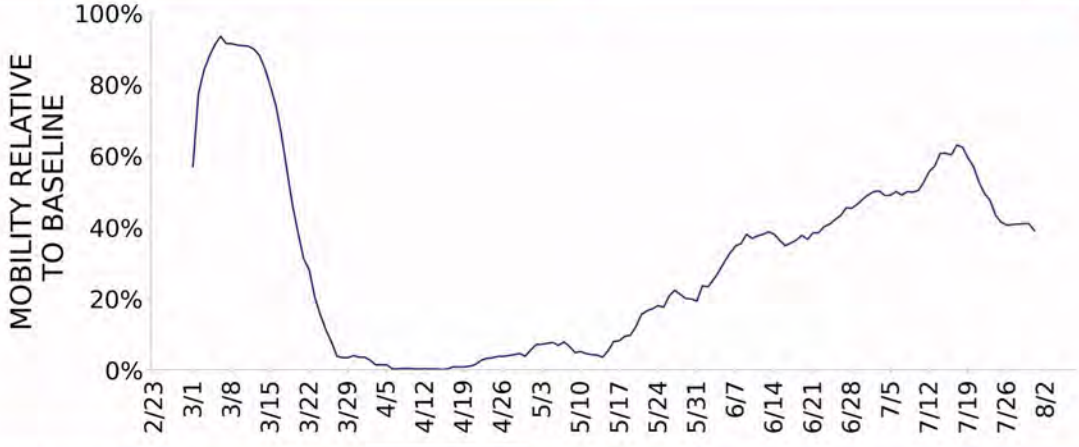
MARYLAND

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	6,578 (109)	+21.9%	22,651 (73)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	4.6%	-0.2%*	6.0%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	173,502** (2,870)	+6.8%**	545,608** (1,768)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	73 (1)	+5.8%	293 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	12.6%	+0.2%*	9.9%	12.3%

MOBILITY



* Indicates absolute change in percentage points.
** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

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SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

MARYLAND

STATE REPORT | 08.02.2020

COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	2	Washington-Arlington-Alexandria Cambridge
COUNTY LAST WEEK	0	N/A	6	Baltimore Baltimore City Prince George's Worcester Dorchester Caroline

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
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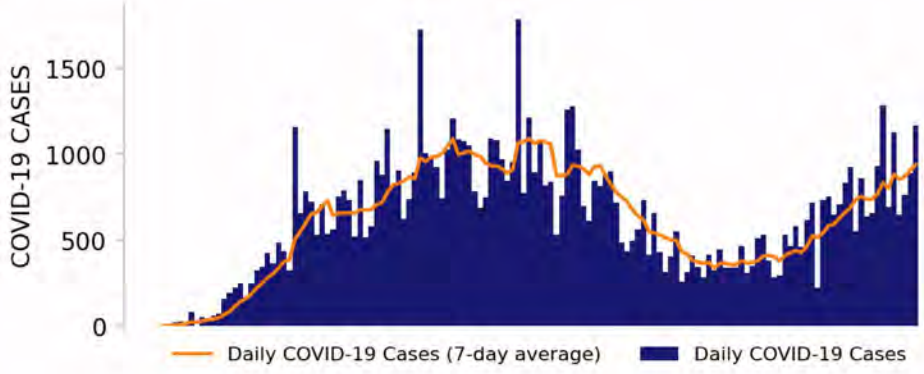
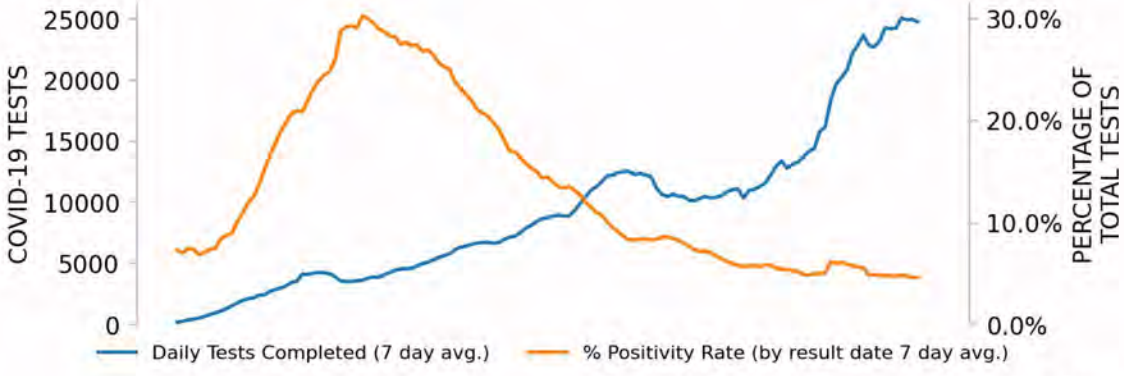
NEW CASES

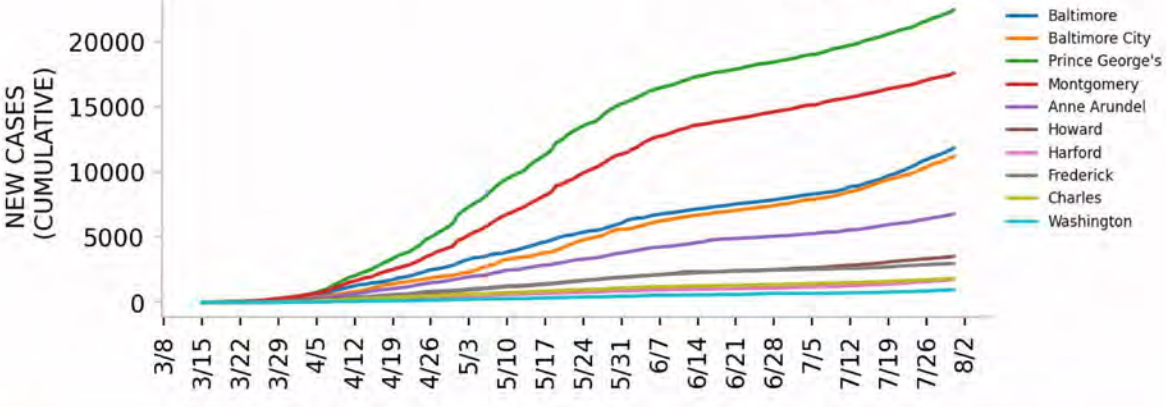


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

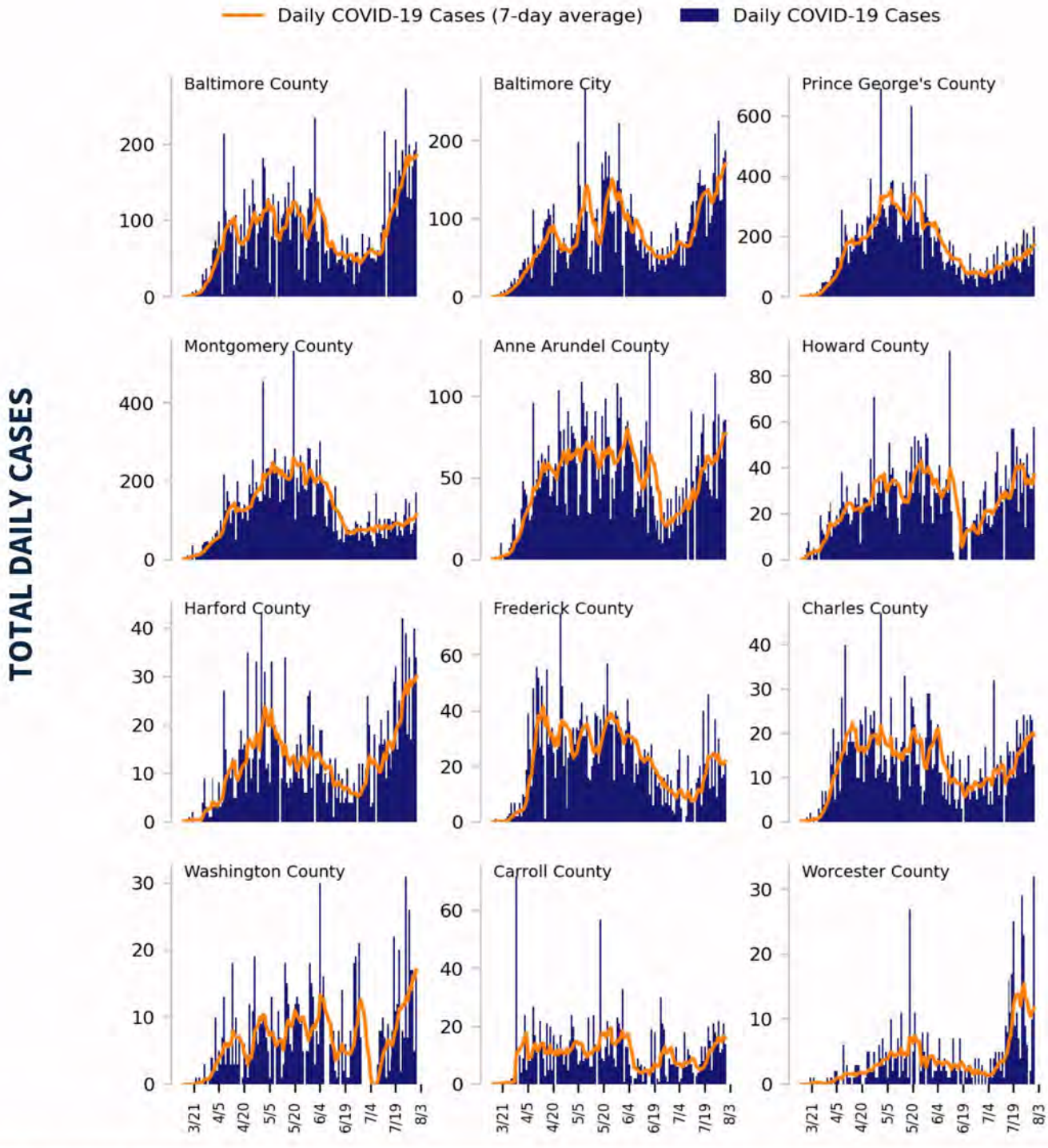


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

MARYLAND

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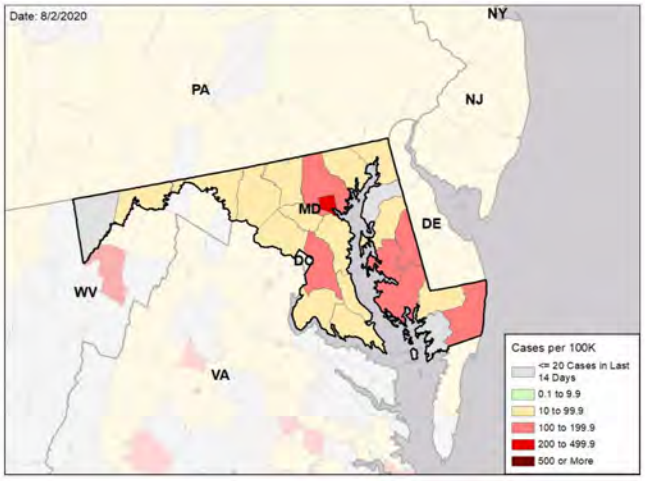
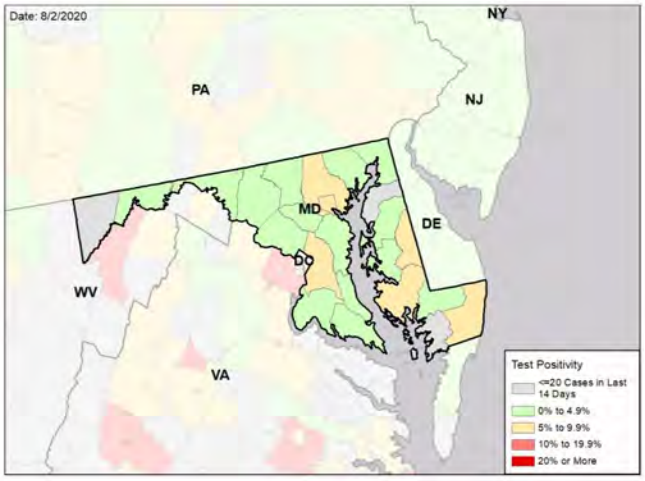
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

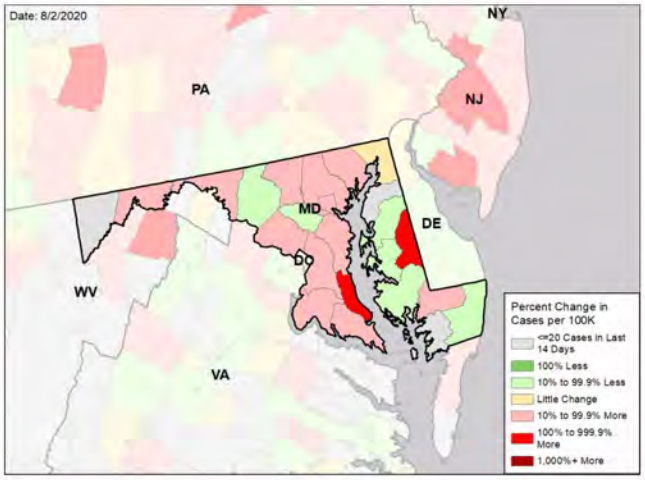
NEW CASES PER 100,000 DURING LAST WEEK



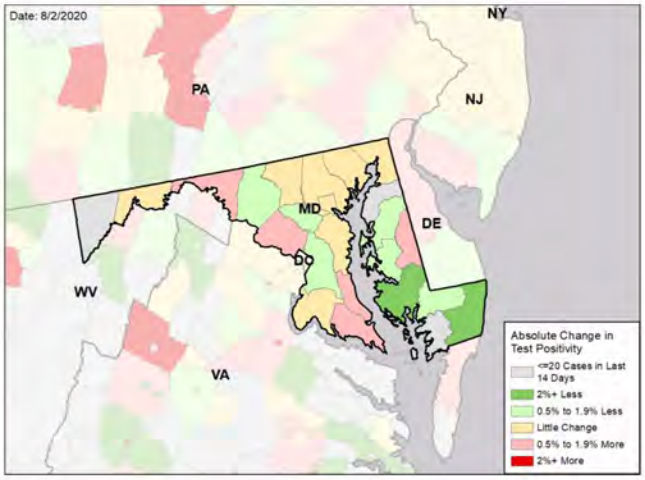
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



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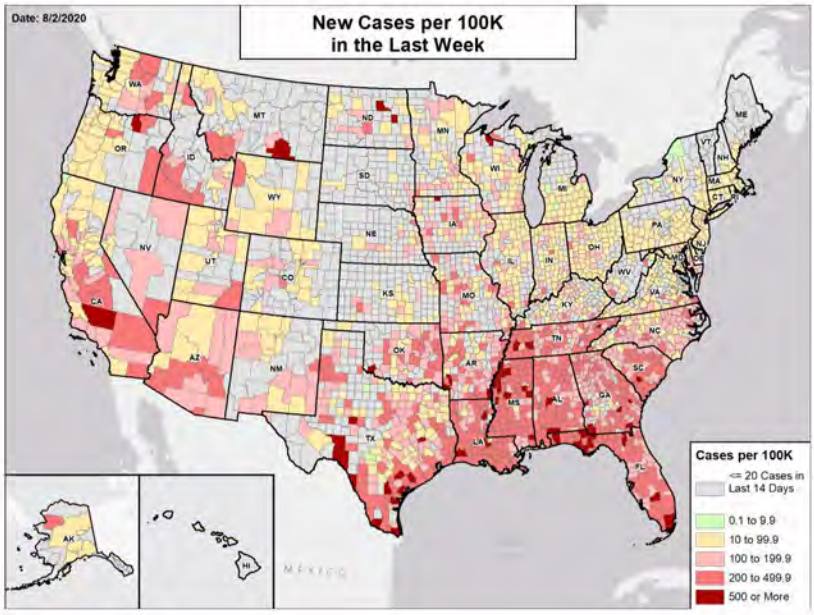
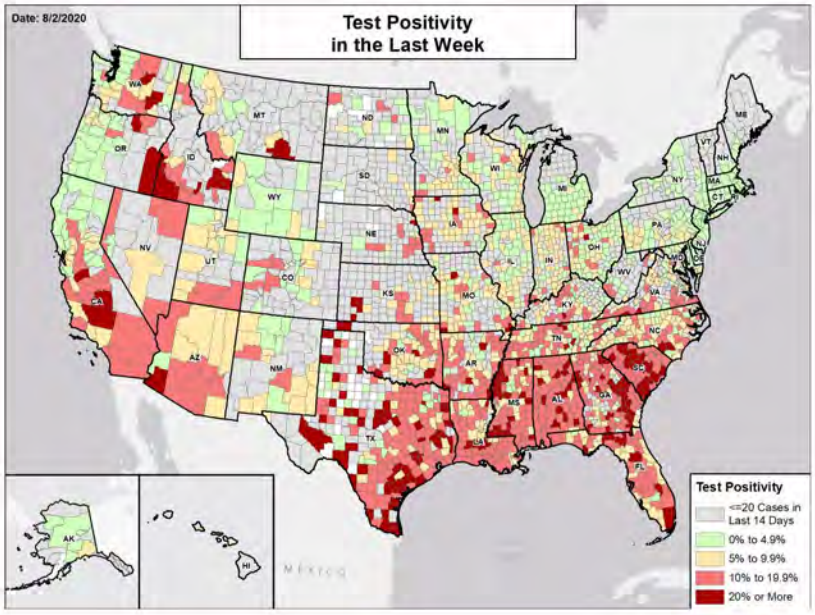
National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
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Methods

STATE REPORT | 08.02.2020

COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

MASSACHUSETTS

STATE REPORT | 08.02.2020

SUMMARY

- Massachusetts is in the yellow zone for cases, indicating between 10 to 100 new cases per 100,000 population last week, and the green zone for test positivity, indicating a rate below 5%.
- Massachusetts has seen an increase in new cases and stability in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Middlesex County, 2. Suffolk County, and 3. Norfolk County. These counties represent 48.5 percent of new cases in Massachusetts.
- Massachusetts had 38 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 131 to support operations activities from FEMA; 12 to support operations activities from ASPR; 18 to support operations activities from USCG; 1 to support medical activities from VA; and 2 to support operations activities from VA.
- Between Jul 25 - Jul 31, on average, 21 patients with confirmed COVID-19 and 139 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Massachusetts. An average of 76 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Continue to enforce wearing of cloth face masks, especially in indoor settings outside of the home. Consider close monitoring of face mask use in populous counties and cities with increasing case rates or test positivity and fines for violations.
- Ensure sufficient capacity and develop contingency plans for public health and clinical resources in areas where students are returning to school in large numbers.
- Continue testing programs in long-term care facilities, with prompt testing of all residents in any facility with an active case and regular repeat testing for all staff.
- Where case rates and test positivity are increasing, consider intensifying restrictions and community mitigation efforts, such as closing indoor dining spaces, bars, and gyms and limiting gatherings.
- Ensure adequate testing, especially in counties with evidence of increased transmission. Utilize pooled testing to expand testing capacity and reduce turnaround times and require all universities with suitable platforms to use their equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

MASSACHUSETTS

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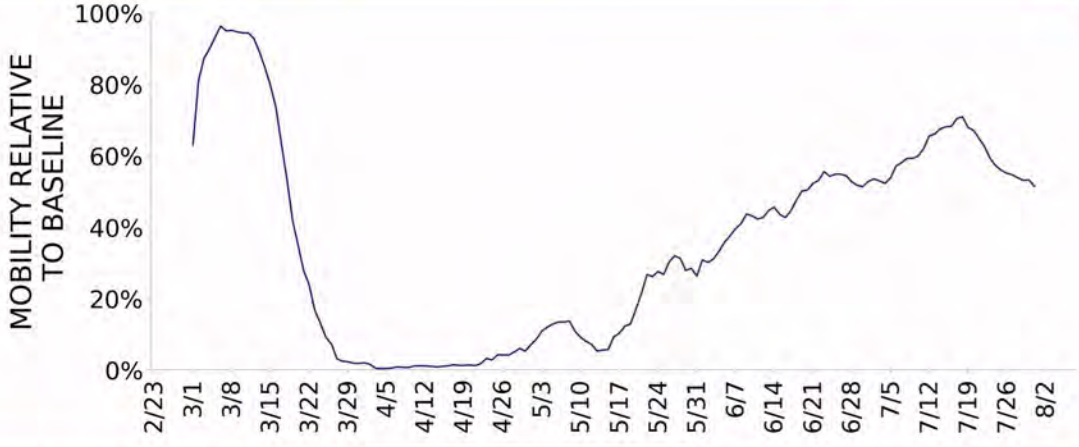
	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	2,627 (38)	+24.7%	4,853 (33)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	2.0%	+0.3%*	1.9%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	120,047** (1,742)	+2.6%**	229,303** (1,545)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	99 (1)	-11.6%	144 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	4.8%	-0.1%*	4.3%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

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MASSACHUSETTS

STATE REPORT | 08.02.2020

COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	0	N/A
COUNTY LAST WEEK	0	N/A	0	N/A

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

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Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

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POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

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- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
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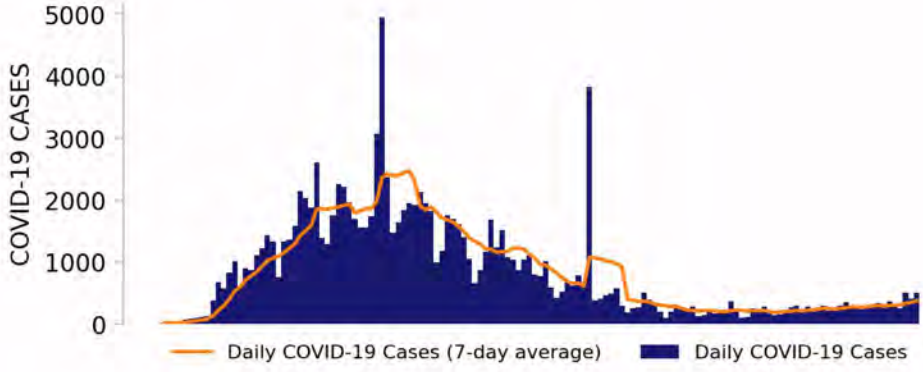
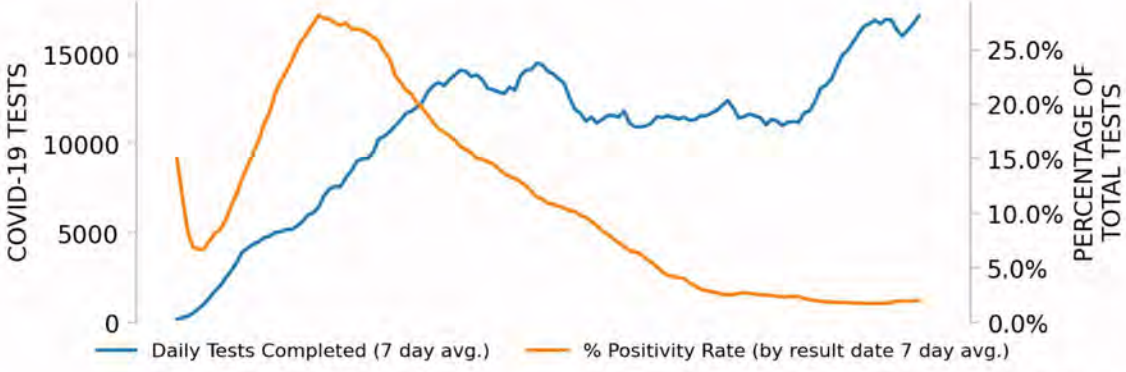
NEW CASES

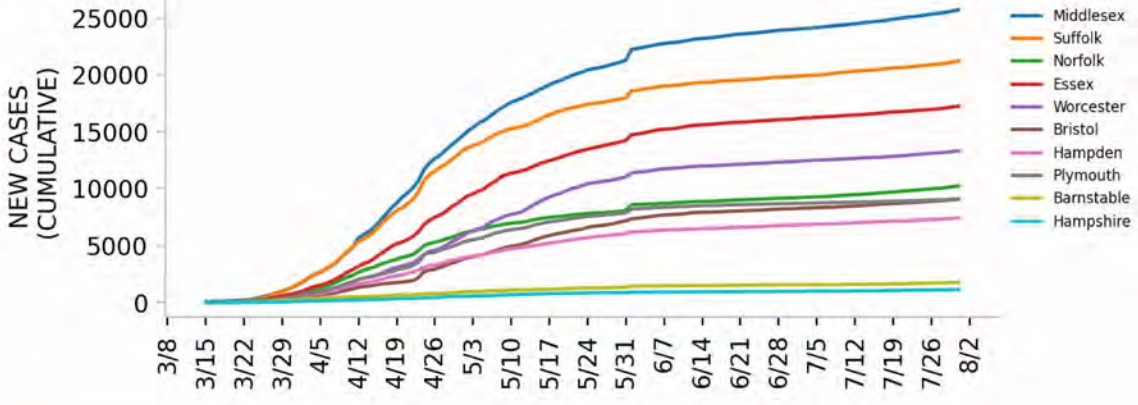


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)



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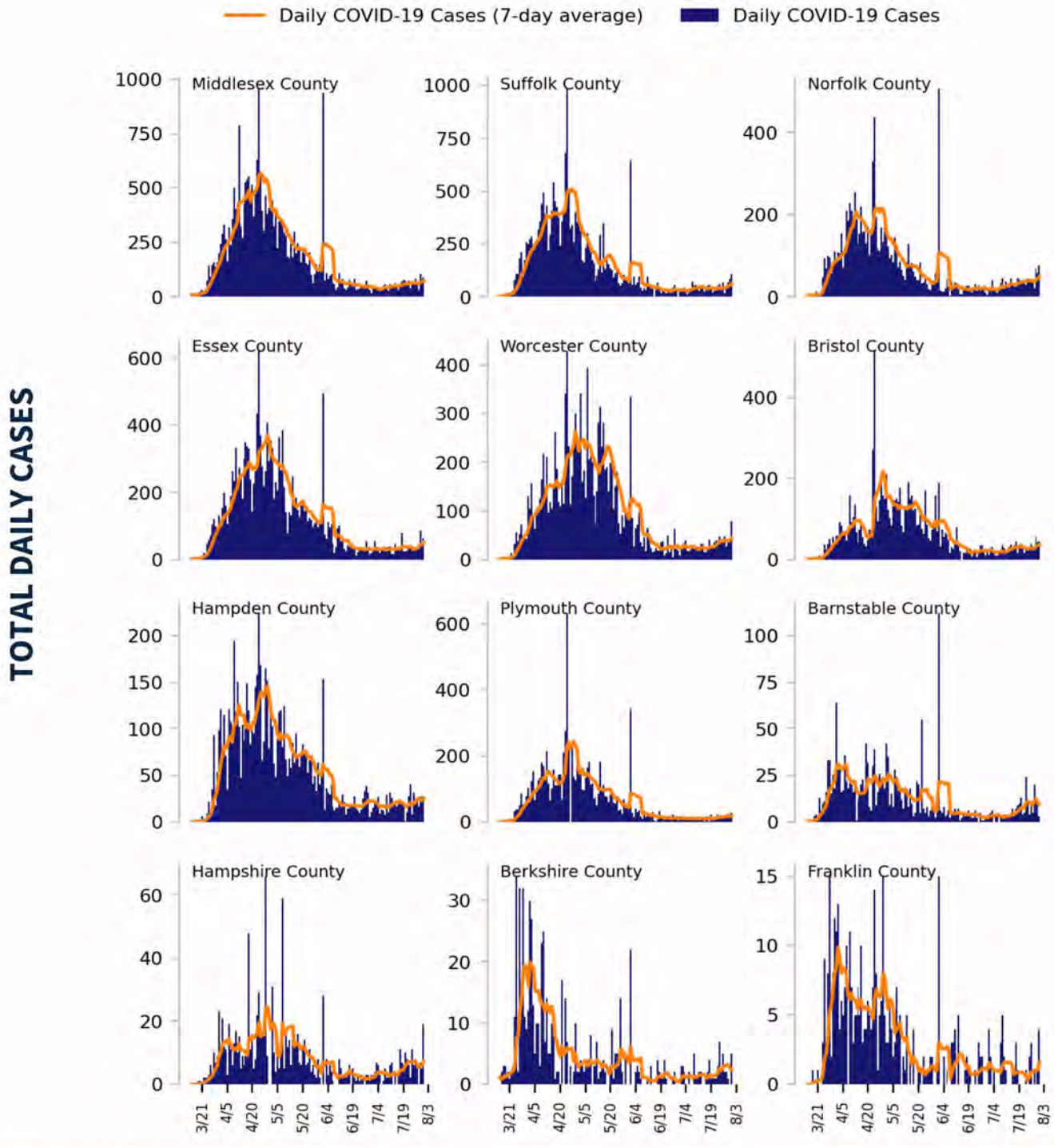
Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

MASSACHUSETTS

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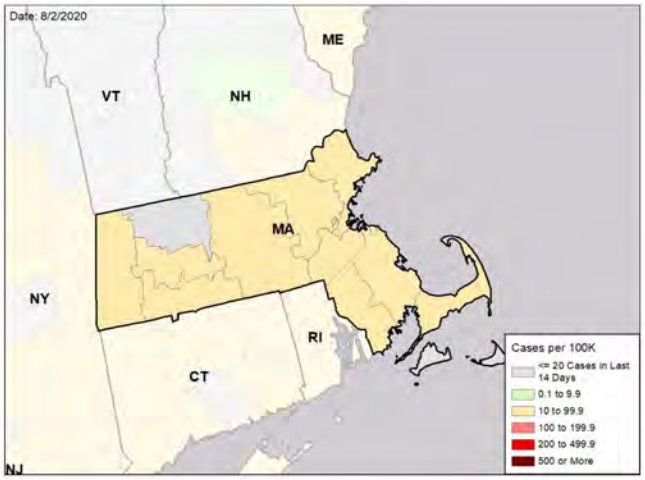
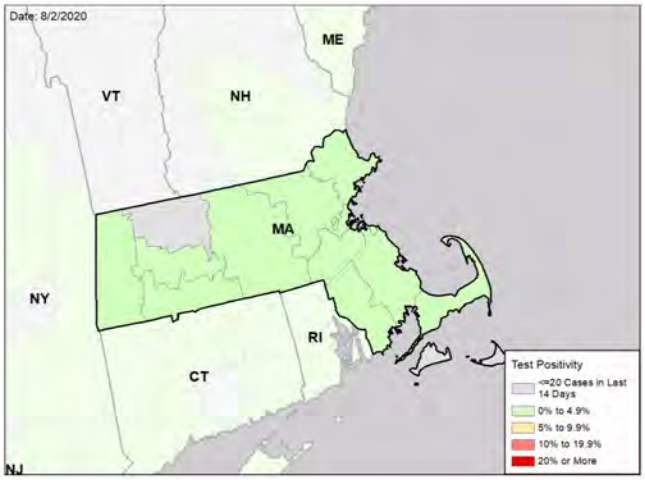
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

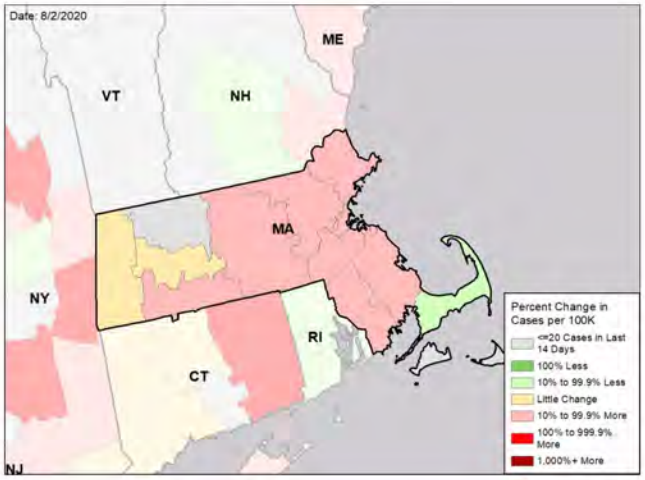
NEW CASES PER 100,000 DURING LAST WEEK



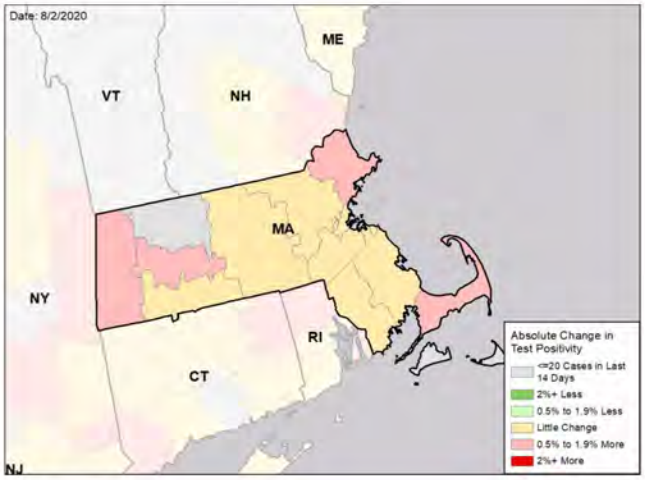
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

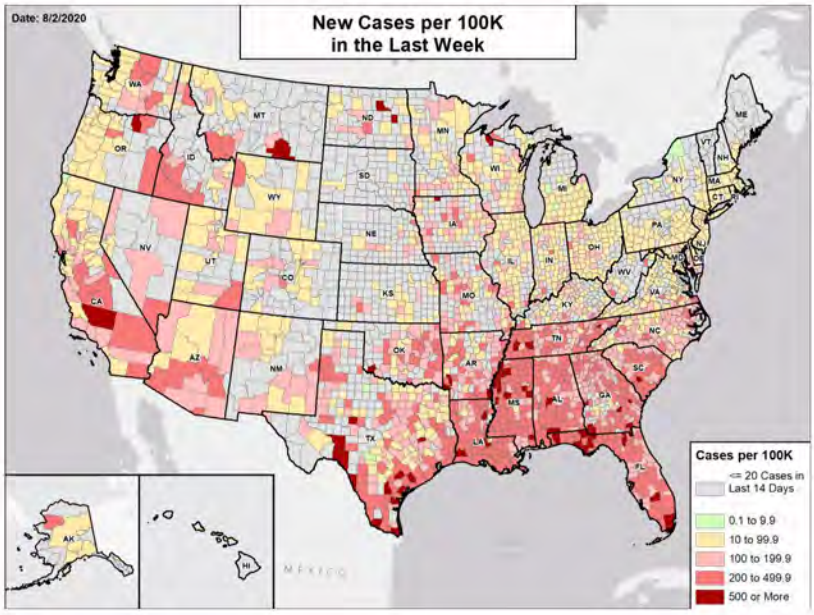


DATA SOURCES

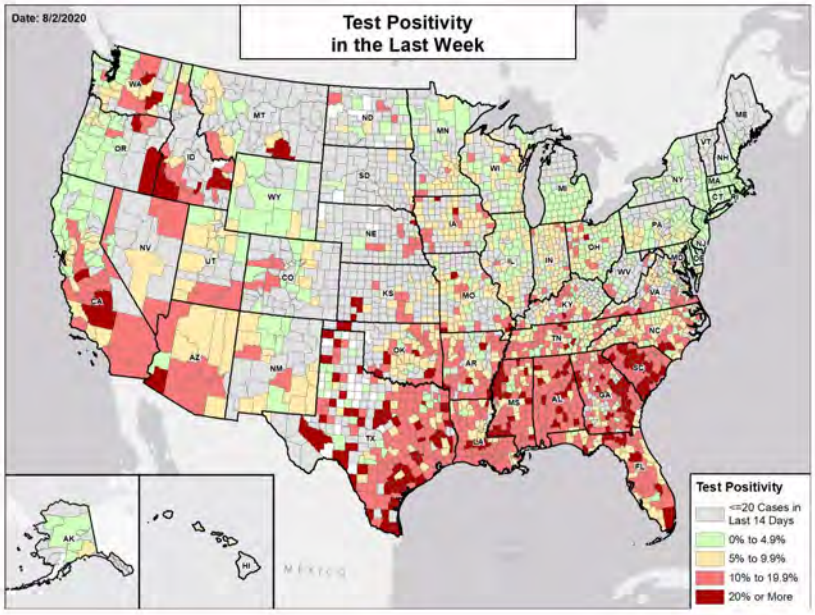
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



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Methods

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COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
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- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
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MICHIGAN

STATE REPORT | 08.02.2020

SUMMARY

- Michigan is in the yellow zone for cases, indicating between 10 to 100 new cases per 100,000 population last week, and the green zone for test positivity, indicating a rate below 5%.
- Michigan has seen an increase in new cases and stability in testing positivity over the past week, with the largest increase in cases in the Detroit CBSA.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Wayne County, 2. Oakland County, and 3. Macomb County. These counties represent 47.1 percent of new cases in Michigan.
- Two Upper Peninsula counties along the Wisconsin border (Gogebic, Menominee) have reported high incidence in the past week.
- Michigan had 55 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 15 to support operations activities from FEMA; 6 to support operations activities from USCG; and 1 to support operations activities from VA.
- Between Jul 25 - Jul 31, on average, 165 patients with confirmed COVID-19 and 104 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Michigan. An average of 72 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Continue limitations on indoor seating in bars in highly affected areas. Continue modulation of the current phase 4/5 opening status, especially for occupancy and operation of businesses at higher risk of exacerbating transmission (e.g. bars, restaurants), dependent on changes in local reported cases.
- Continue the state masking requirement. Continue strong public messaging of its importance in avoiding disruptions to business and school operations.
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates and increase community level testing.
- Recruit sufficient contact tracers as community outreach workers to ensure all cases are contacted and all members of positive households are individually tested within 24 hours.
- Protect vulnerable populations in assisted living and long-term care facilities through weekly testing of all workers and requiring masks. In facilities with workers who tested positive, ensure all residents have been tested and appropriate cohorting measures are in place.
- Identify universities with RNA detection platforms; consider efforts to use this equipment to expand surveillance testing for university students and schools (K-12, community colleges).
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

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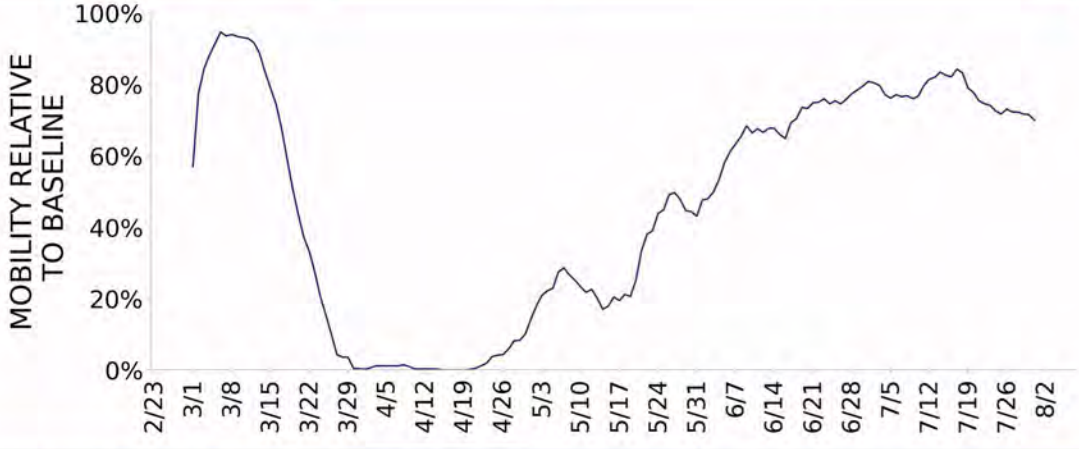
	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	5,503 (55)	+23.0%	41,885 (80)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	3.8%	-0.1%*	5.4%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	199,226** (1,995)	-12.0%**	945,428** (1,799)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	63 (1)	+80.0%	548 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	9.1%	+1.5%*	6.5%	12.3%

MOBILITY



* Indicates absolute change in percentage points.
** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	6	Ann Arbor Saginaw Monroe Sturgis South Bend-Mishawaka Marinette
COUNTY LAST WEEK	0	N/A	7	Macomb Washtenaw Saginaw Monroe St. Joseph Gogebic Menominee

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

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POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
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MICHIGAN

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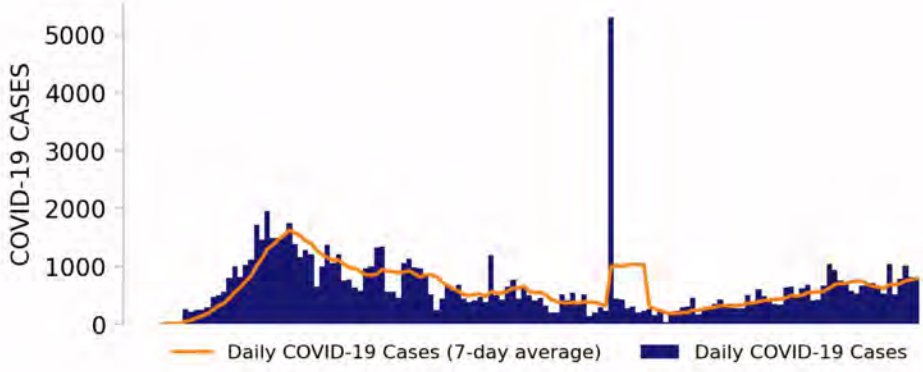
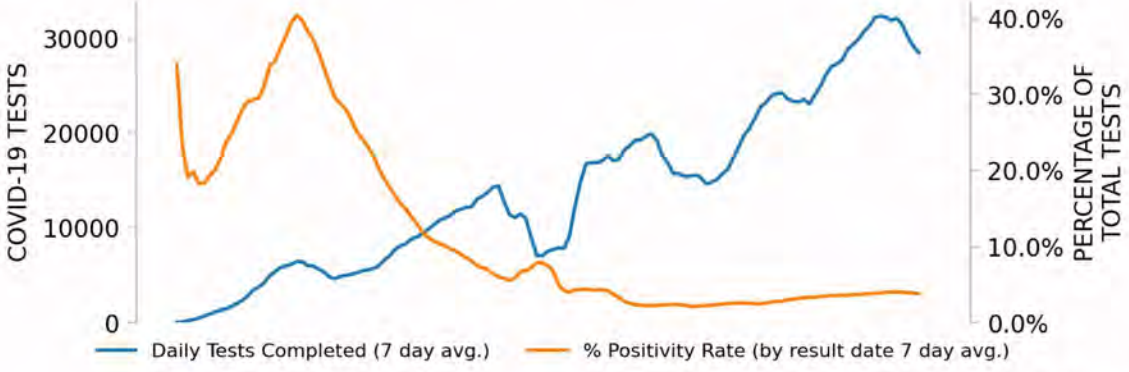
NEW CASES

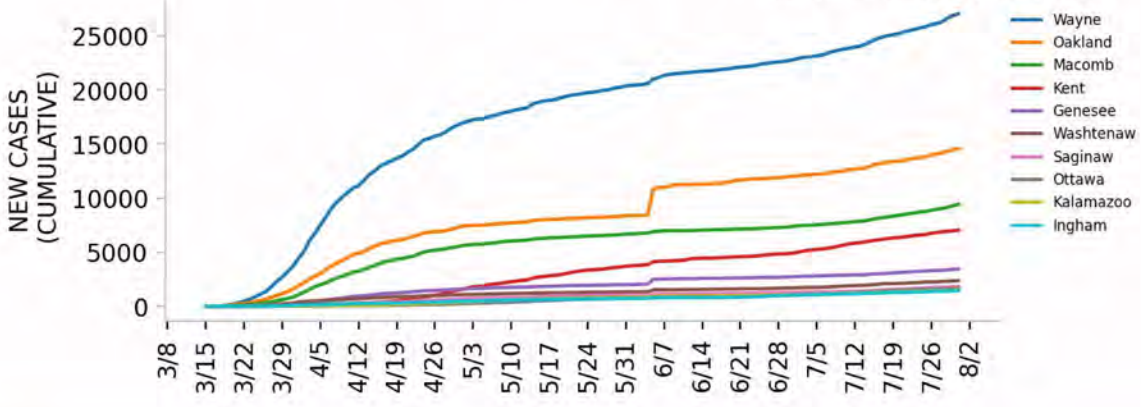


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)



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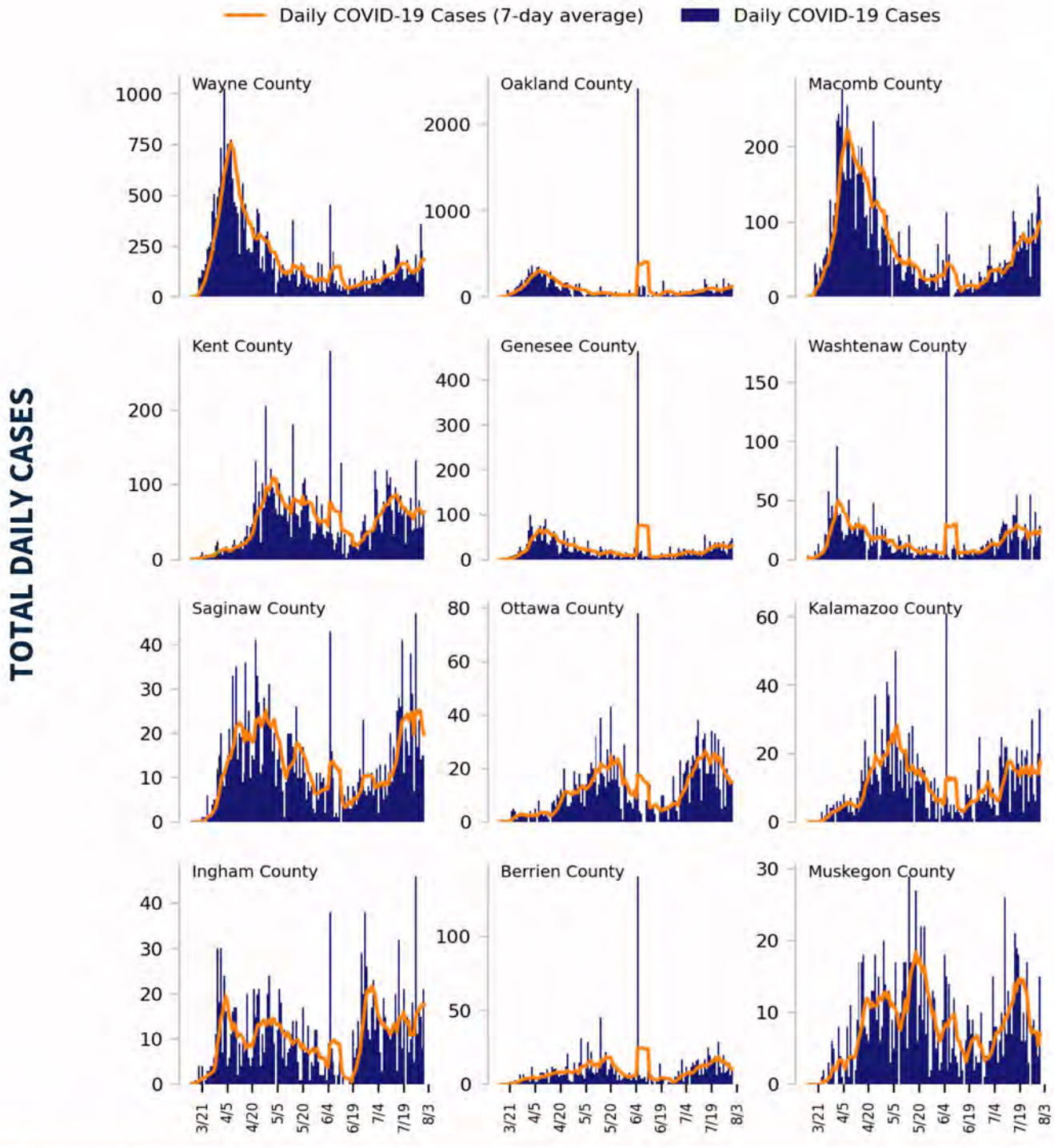
Top 12 counties based on number of new cases in the last 3 weeks



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MICHIGAN

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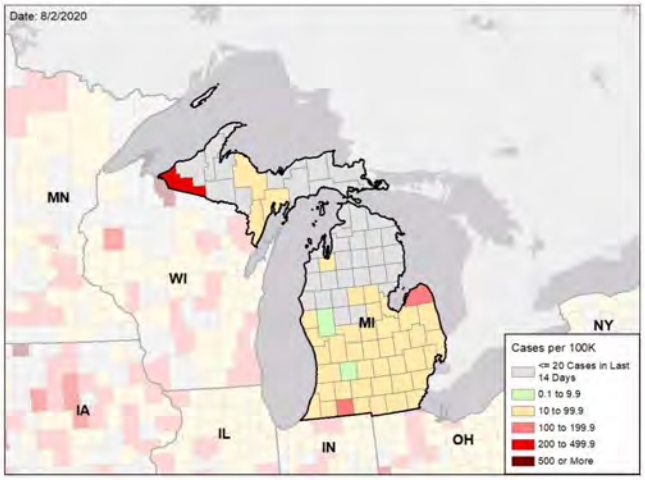

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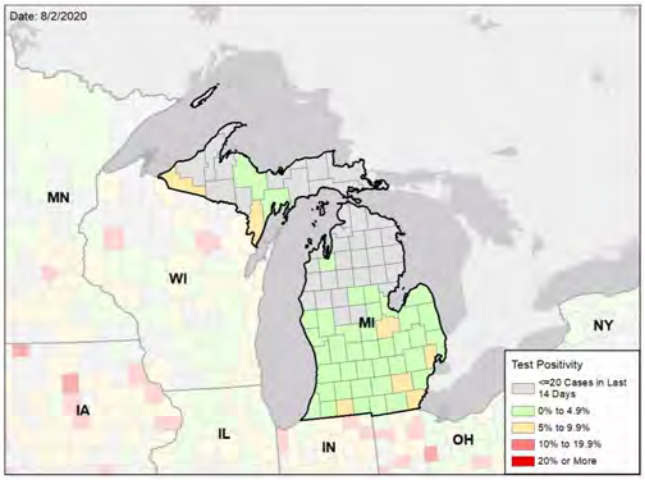

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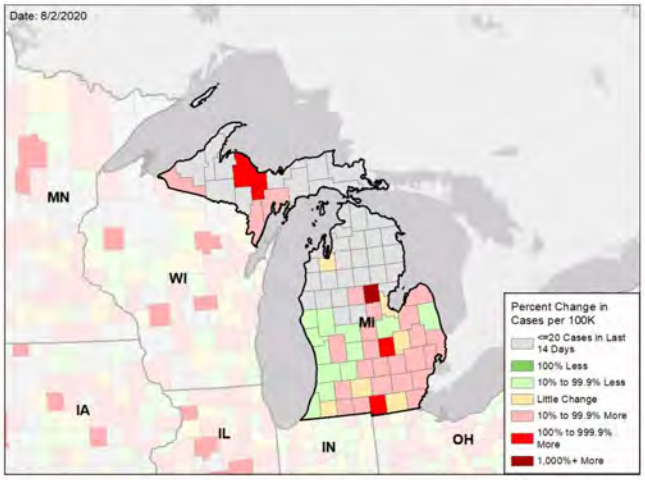

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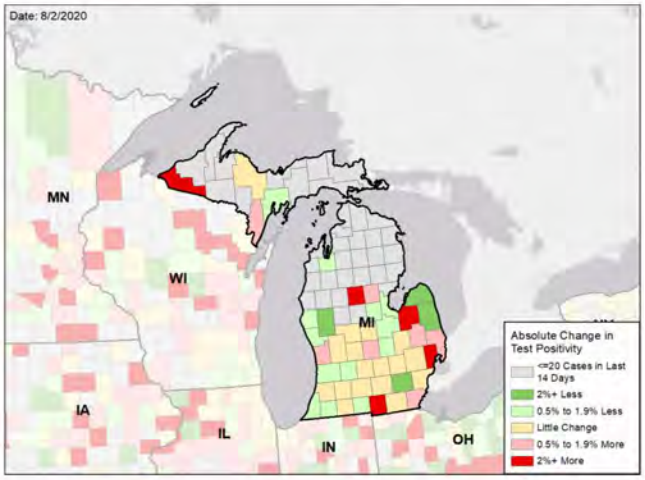

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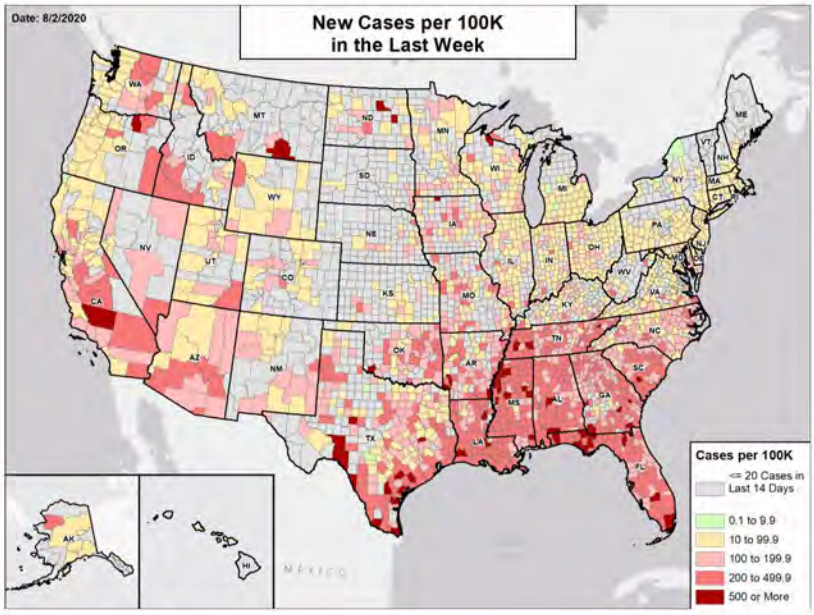
NEW CASES PER 100,000 LAST WEEK



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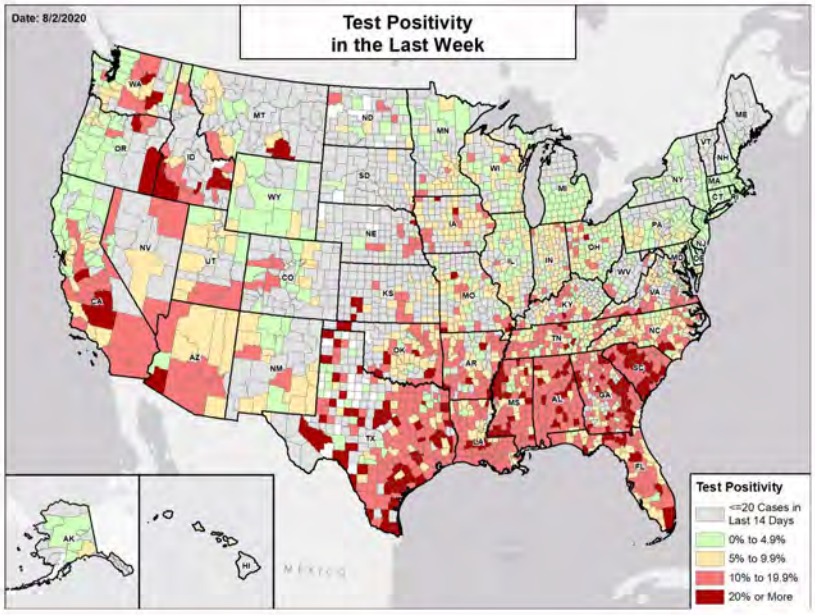

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Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
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COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

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MINNESOTA

STATE REPORT | 08.02.2020

SUMMARY

- Minnesota is in the yellow zone for cases, indicating between 10 to 100 new cases per 100,000 population last week, and the yellow zone for test positivity, indicating a rate between 5% to 10%.
- Minnesota has seen an increase in new cases and testing positivity in the last week continuing a gradual rise since mid-June. Hospitalizations have continued to gradually increase over the past three weeks.
- Viral transmission is seen in multiple areas of the state. The largest percentage increases have been in counties in northern and central Minnesota, although the absolute numbers of cases are concentrated around the Twin Cities area. Bars, restaurants, athletic events, and other public gatherings have been linked to outbreaks; public service messages have been disseminated regarding recent potential exposure at a rodeo event.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Hennepin County, 2. Ramsey County, and 3. Dakota County. These counties represent 51.5 percent of new cases in Minnesota.
- Minnesota had 89 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 10 to support operations activities from FEMA; 1 to support epidemiology activities from CDC; and 1 to support operations activities from USCG.
- Between Jul 25 - Jul 31, on average, 34 patients with confirmed COVID-19 and 62 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Minnesota. An average of 89 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Continue to communicate the public health and economic benefits of compliance with the state masking mandate including the benefit of reducing disruptions to business activity and school operations.
- Ensure that all business retailers and personal services require masks and can safely social distance. Ensure compliance with current MN StaySafe Plan occupancy restrictions and consider further limitations on occupancy or closure of certain businesses (bars, restaurants) dependent on changes in local reported cases this week.
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates and to increase community level testing.
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all members of positive households are individually tested within 24 hours.
- Identify universities with RNA detection platforms; consider efforts to use this equipment to expand surveillance testing for university students and schools (K-12, community colleges).
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

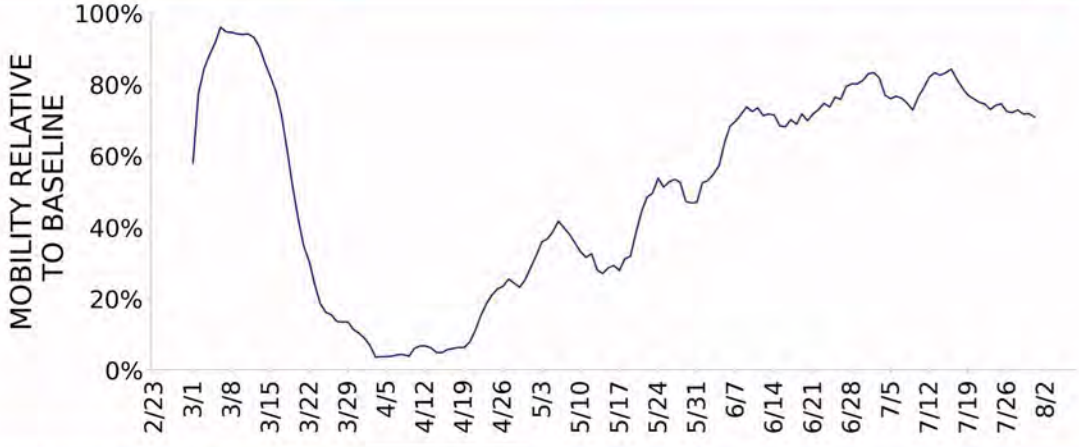
** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

MINNESOTA

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	5,027 (89)	+13.6%	41,885 (80)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	6.2%	+0.7%*	5.4%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	109,616** (1,944)	-23.5%**	945,428** (1,799)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	41 (1)	+57.7%	548 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	2.7%	-1.3%*	6.5%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

MINNESOTA

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	9	Minneapolis-St. Paul-Bloomington Mankato Faribault-Northfield Austin Marshall Worthington Albert Lea New Ulm Wahpeton
COUNTY LAST WEEK	1	Rock	24 **Top 12 shown (full list below)**	Hennepin Ramsey Dakota Anoka Washington Scott Carver Blue Earth Sherburne Wright Nicollet Rice

All Yellow Counties: Hennepin, Ramsey, Dakota, Anoka, Washington, Scott, Carver, Blue Earth, Sherburne, Wright, Nicollet, Rice, Mower, Lyon, Le Sueur, Becker, Benton, Nobles, Watonwan, Waseca, Koochiching, Freeborn, Brown, Cottonwood

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

MINNESOTA

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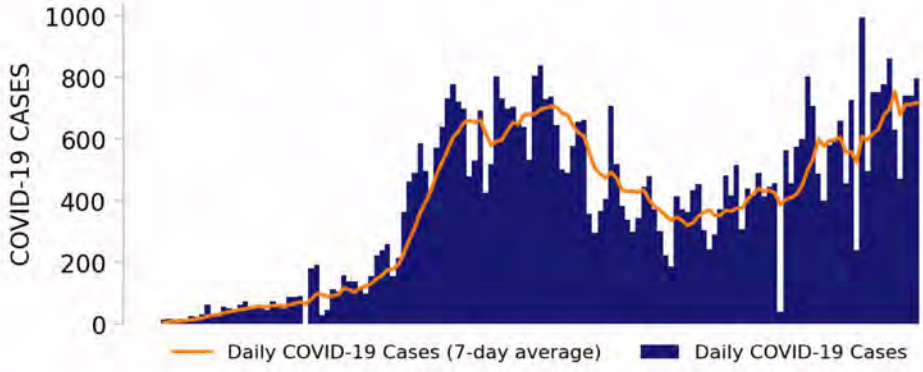
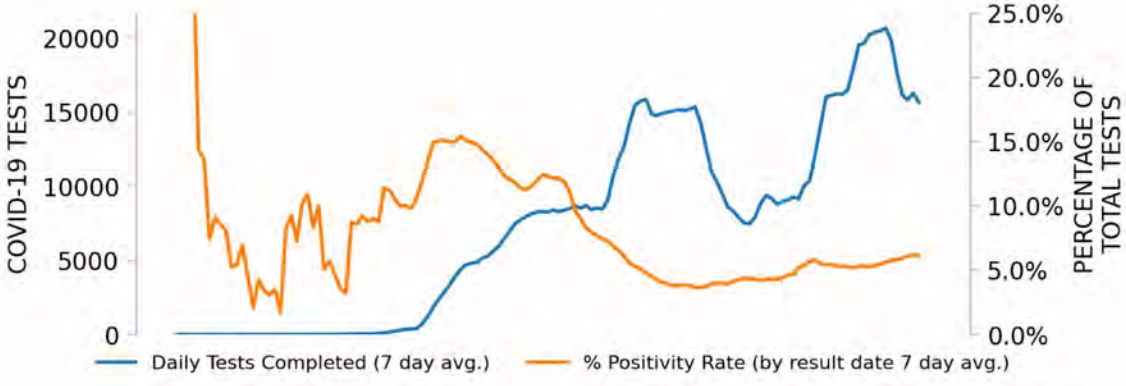
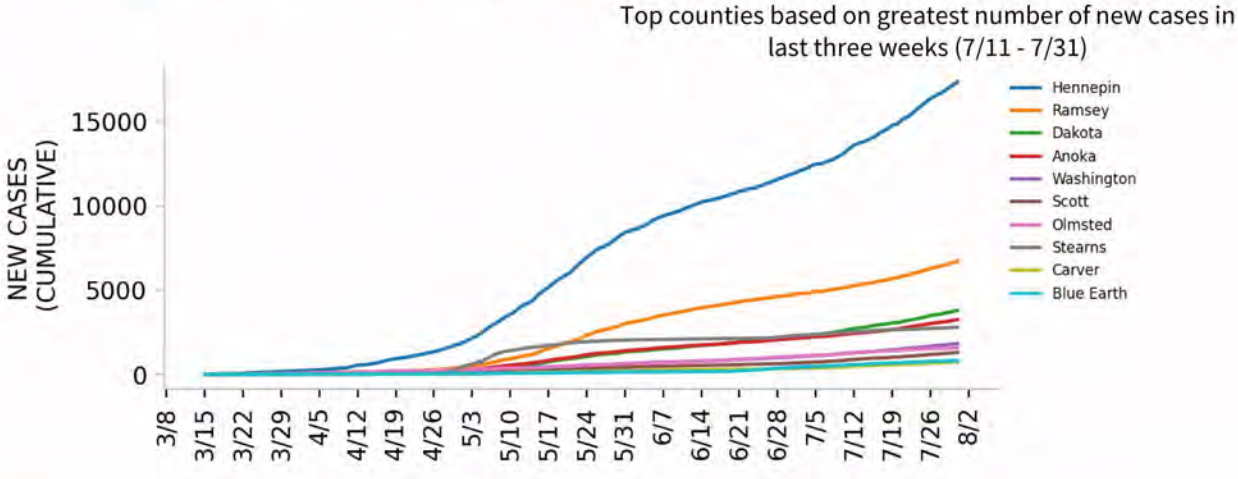
NEW CASES



TESTING



TOP COUNTIES

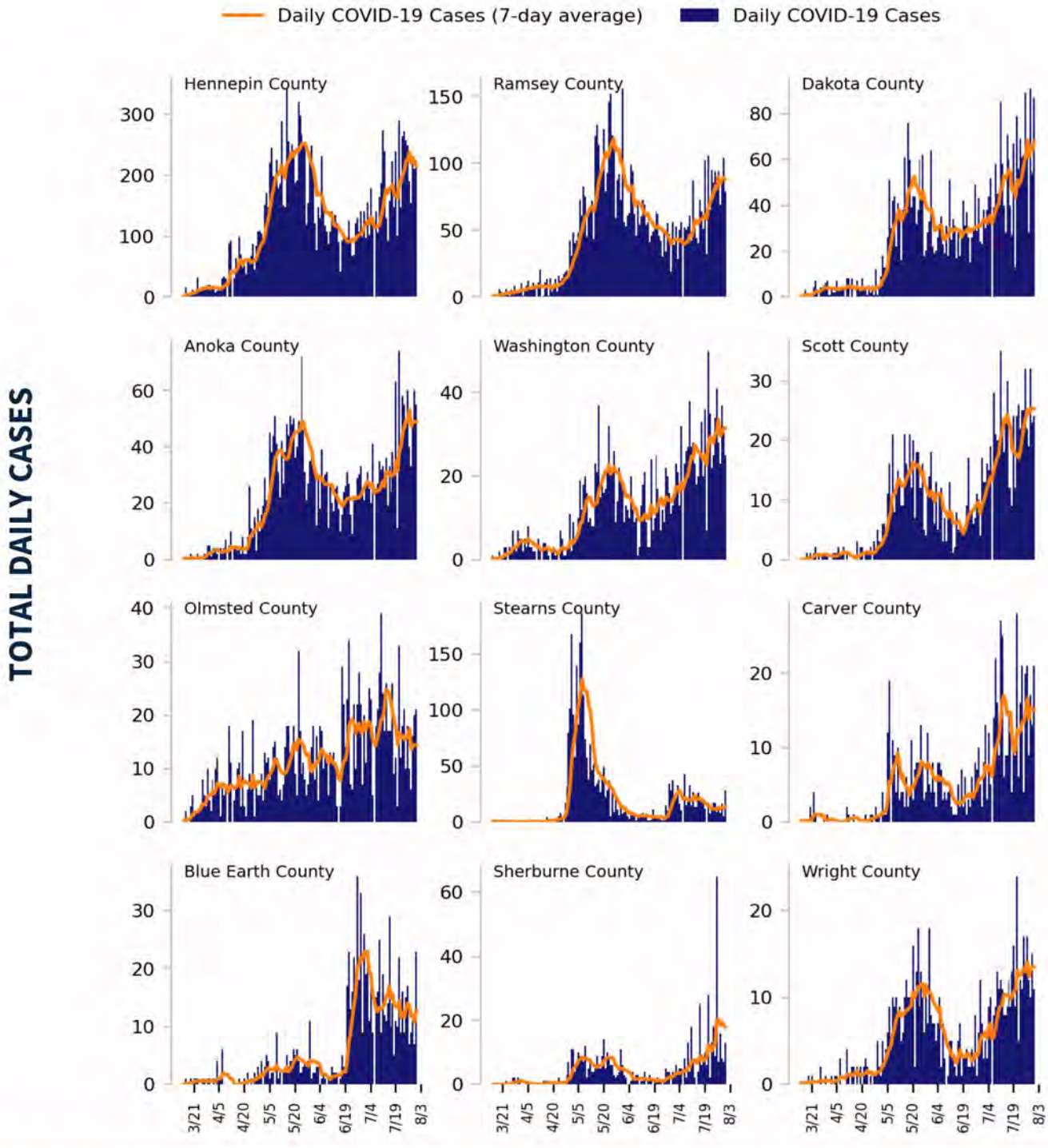


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

MINNESOTA

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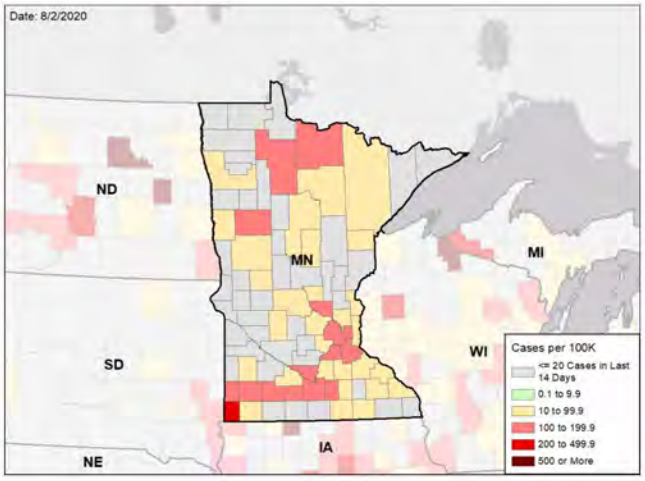
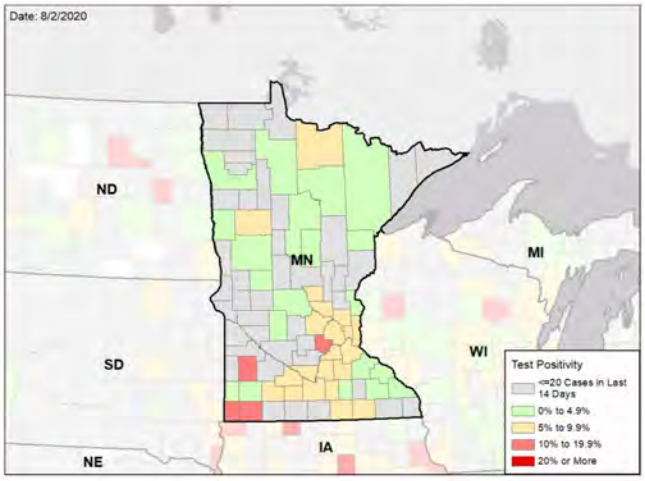
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

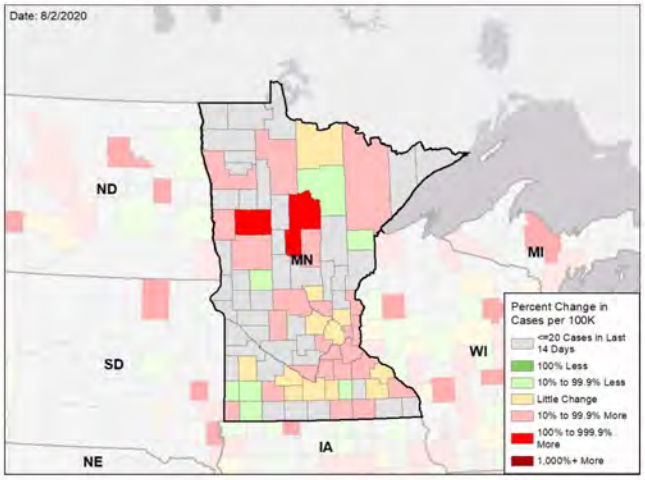
NEW CASES PER 100,000 DURING LAST WEEK



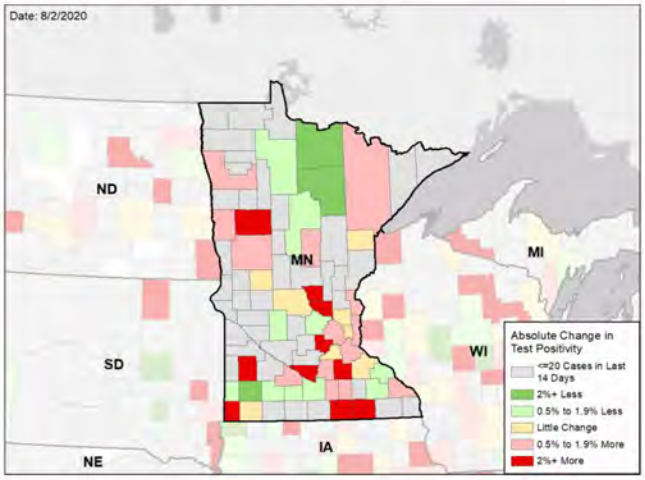
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

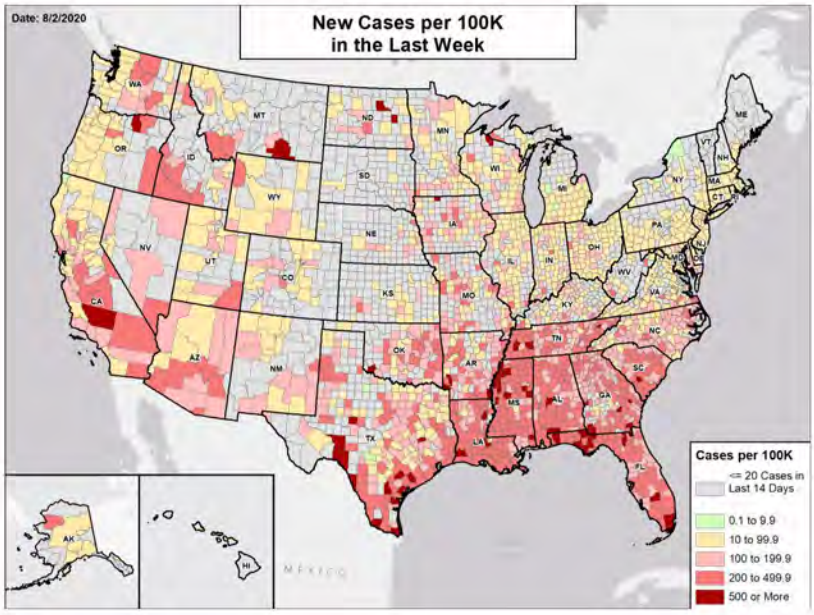


DATA SOURCES

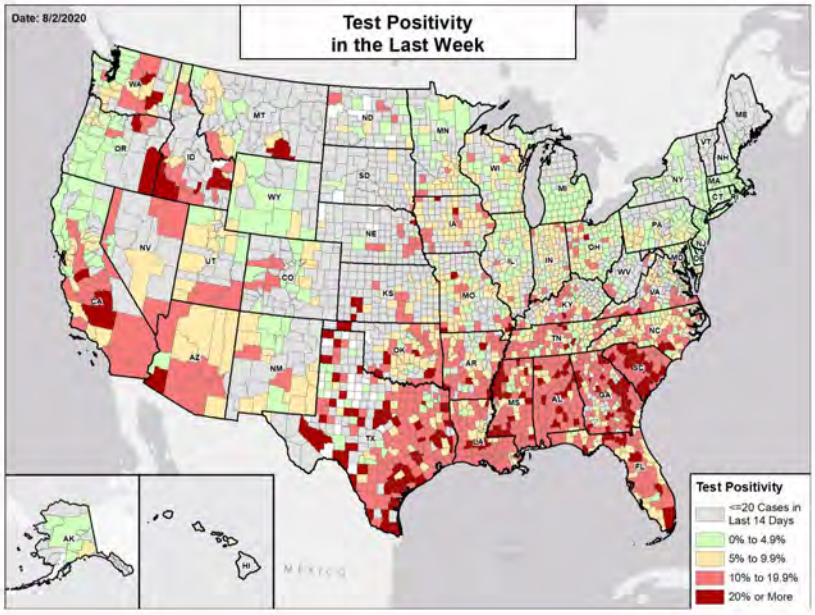
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

STATE REPORT | 08.02.2020

COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

MISSISSIPPI

STATE REPORT | 08.02.2020

SUMMARY

- Mississippi is in the red zone for COVID-19 cases, indicating more than 100 new cases per 100,000 population last week, and the red zone for COVID-19 test positivity, indicating a rate above 10%.
- Mississippi has seen some stability in new cases and an early decrease in testing positivity over the past week, suggesting mitigation methods are beginning to work. The continuation and expansion of these mitigation efforts will be essential.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Hinds County, 2. DeSoto County, and 3. Jackson County. These counties represent 19.1 percent of new cases in Mississippi.
- The epidemic is widespread in Mississippi in rural and urban counties throughout the state. State-wide mitigation efforts will be critical.
- Mississippi had 305 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 2 to support epidemiology activities from CDC; 1 to support operations activities from CDC; and 5 to support medical activities from VA.
- Between Jul 25 - Jul 31, on average, 116 patients with confirmed COVID-19 and 104 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Mississippi. An average of 75 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Expand the protection of those in nursing homes, assisted living facilities, and long-term care facilities by ensuring access to rapid facility-wide testing in response to a resident or staff member with COVID-19. Ensure social distancing and universal facemask use.
- Mandate use of masks in all current and evolving hot spots. Mandate mask use in all indoor public areas at all times and outdoors when social distancing cannot be maintained.
- Close establishments where social distancing and mask use cannot occur, such as bars and entertainment venues.
- Move to outdoor dining and limit indoor dining to less than 25% of normal capacity.
- Ask citizens to limit social gatherings to fewer than 10 people.
- Increase messaging of the risk of serious disease in all age groups with preexisting medical conditions, including obesity, hypertension, and diabetes mellitus.
- Continue the scale-up of testing, moving to community-led neighborhood testing. Work with local communities to implement and provide clear guidance for households that test positive, including on individual isolation procedures.
- Continue to enhance contact tracing and ensure the ability of cases and contacts to quarantine or isolate safely.
- Ensure all public health labs are fully staffed and running 24/7, utilizing all platforms to reduce turnaround times. Institute 3:1 or 2:1 pooling of test specimens on all high throughput machines as long as turnaround times are greater than 36 hours. For families and cohabiting households, screen entire households.
- Require all universities with RNA detection platforms use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

MISSISSIPPI

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	9,084 (305)	+1.0%	158,298 (237)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	14.8%	-1.0%*	13.6%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	36,090** (1,213)	-11.2%**	1,078,189** (1,611)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	198 (7)	+44.5%	2,494 (4)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	26.1%	+4.5%*	22.5%	12.3%

MOBILITY

* Indicates absolute change in percentage points.
** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

MISSISSIPPI

STATE REPORT | 08.02.2020

COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	**19** Top 12 shown (full list below)	Jackson Gulfport-Biloxi Memphis Hattiesburg Tupelo Greenville Laurel Cleveland Starkville Meridian Indianola Clarksdale	**3**	Oxford Vicksburg West Point
COUNTY LAST WEEK	**64** Top 12 shown (full list below)	Hinds DeSoto Jackson Rankin Harrison Madison Washington Forrest Lee Lamar Bolivar Jones	**14** Top 12 shown (full list below)	Lafayette Warren Union Yazoo Prentiss Itawamba Neshoba Scott Smith Chickasaw Greene Clay

All Red CBSAs: Jackson, Gulfport-Biloxi, Memphis, Hattiesburg, Tupelo, Greenville, Laurel, Cleveland, Starkville, Meridian, Indianola, Clarksdale, Columbus, Greenwood, McComb, Corinth, Natchez, Brookhaven, Picayune

All Red Counties: Hinds, DeSoto, Jackson, Rankin, Harrison, Madison, Washington, Forrest, Lee, Lamar, Bolivar, Jones, Oktibbeha, Panola, Sunflower, Coahoma, George, Lowndes, Lauderdale, Pontotoc, Pike, Simpson, Tate, Leflore, Winston, Marshall, Marion, Copiah, Holmes, Alcorn, Monroe, Tallahatchie, Adams, Lincoln, Calhoun, Tishomingo, Pearl River, Hancock, Walthall, Wayne, Newton, Covington, Tippah, Leake, Noxubee, Perry, Quitman, Tunica, Attala, Humphreys, Lawrence, Claiborne, Jasper, Sharkey, Amite, Wilkinson, Clarke, Benton, Jefferson Davis, Stone, Jefferson, Franklin, Webster, Kemper

All Yellow Counties: Lafayette, Warren, Union, Yazoo, Prentiss, Itawamba, Neshoba, Scott, Smith, Chickasaw, Greene, Clay, Yalobusha, Choctaw

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
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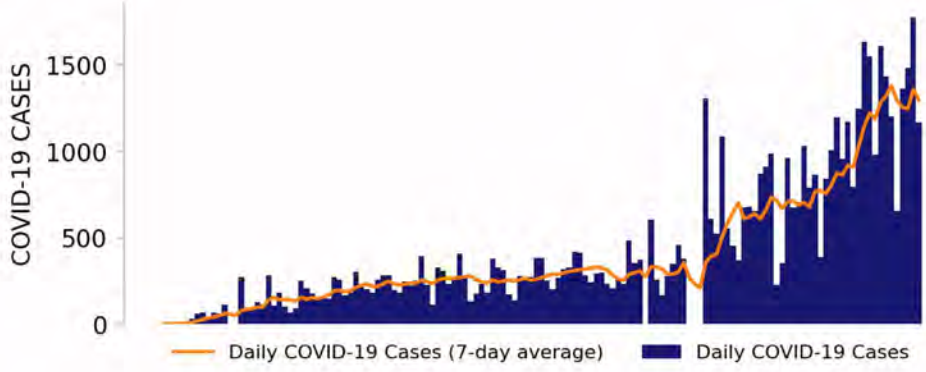
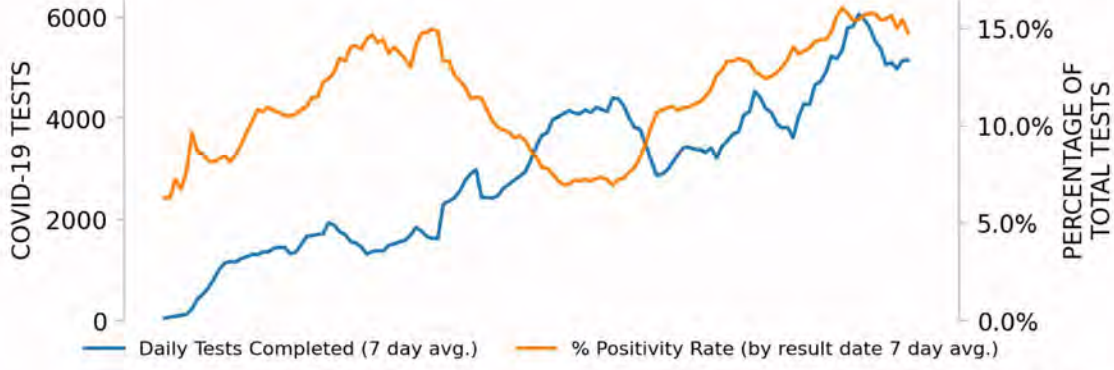
NEW CASES

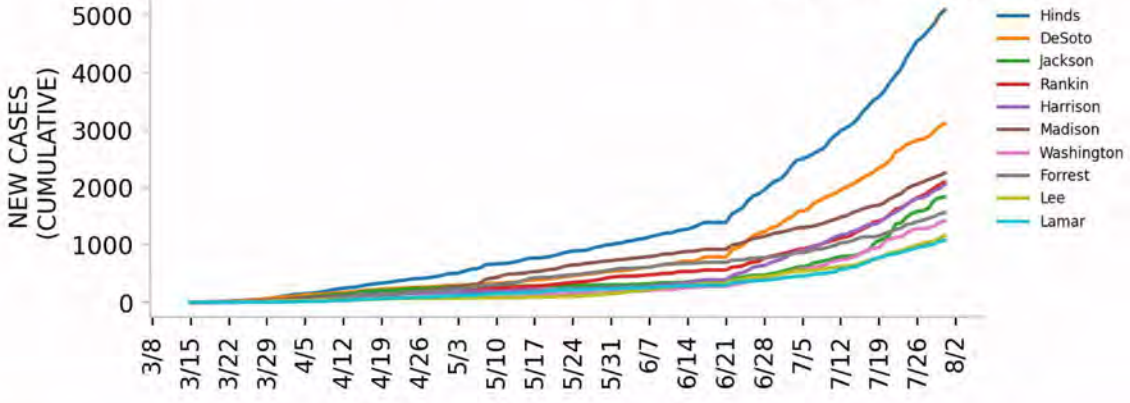


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)



DATA SOURCES

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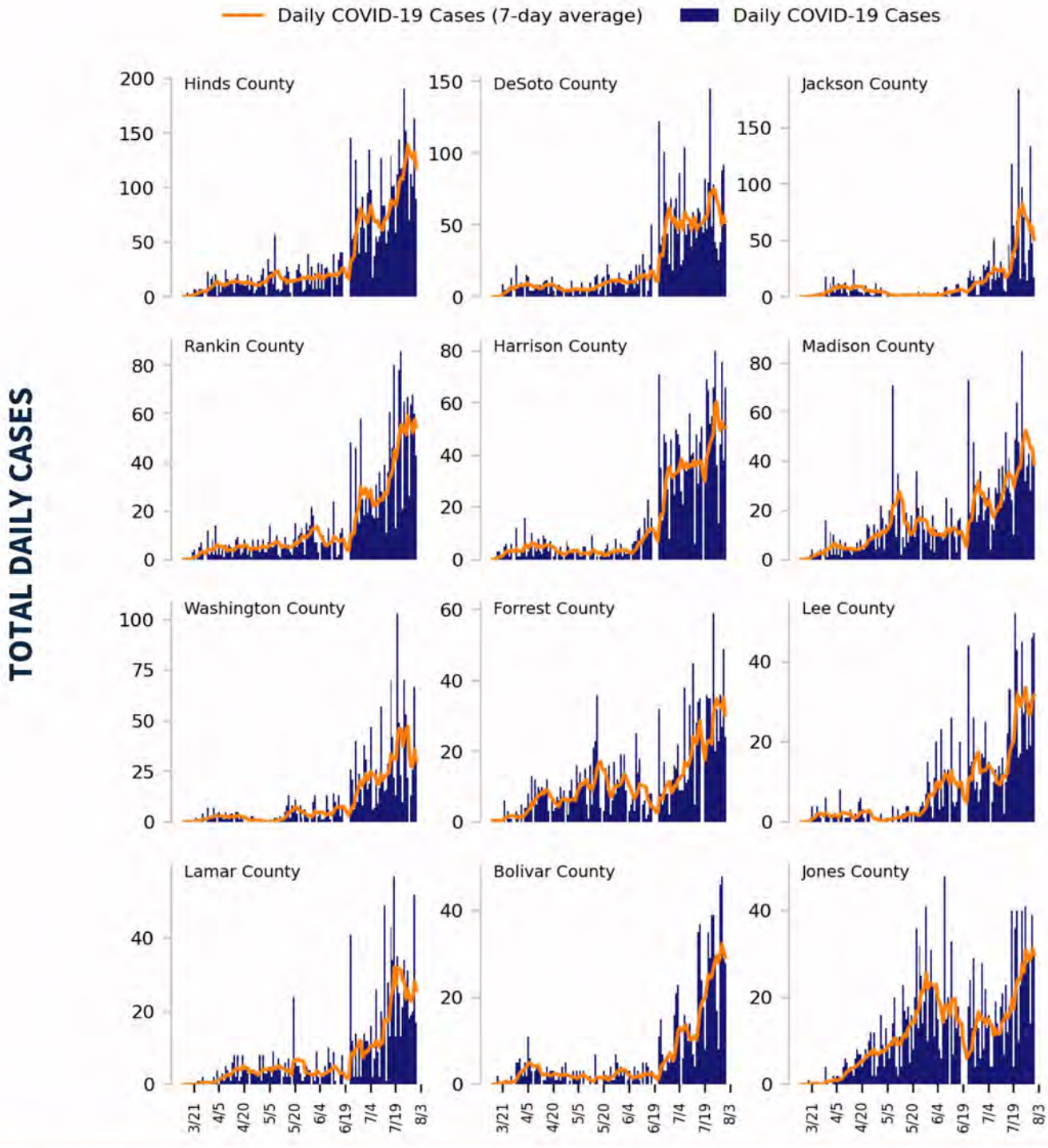
Top 12 counties based on number of new cases in the last 3 weeks



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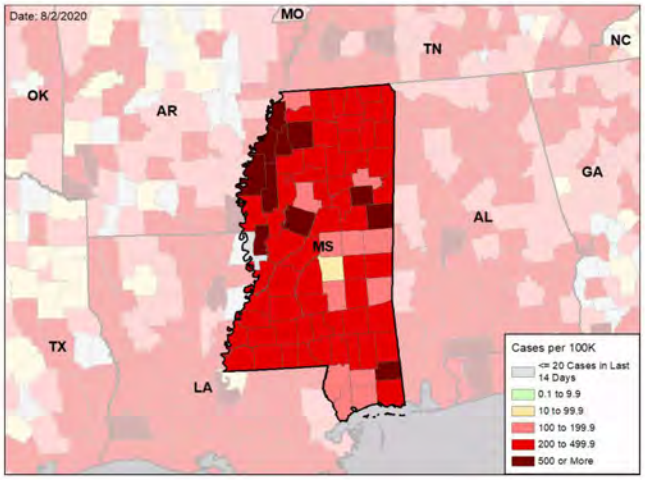
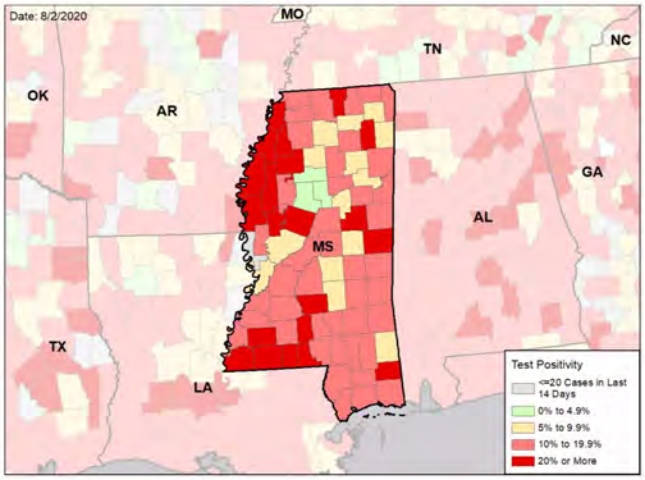
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

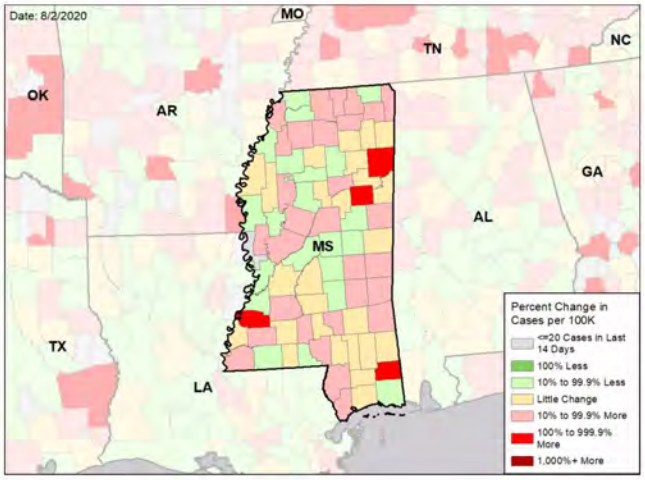
NEW CASES PER 100,000 DURING LAST WEEK



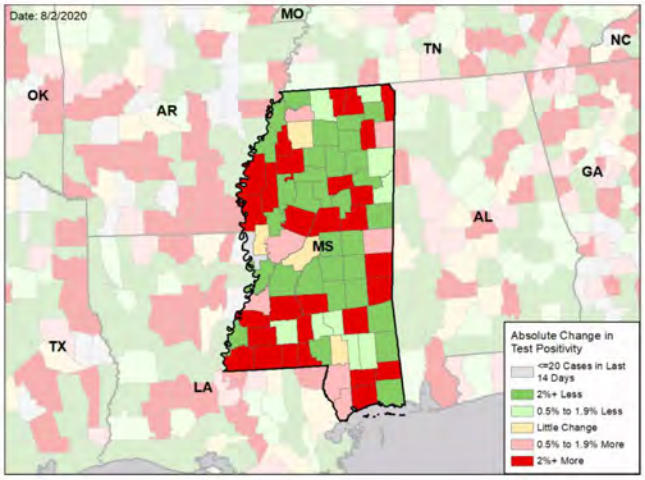
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



DATA SOURCES

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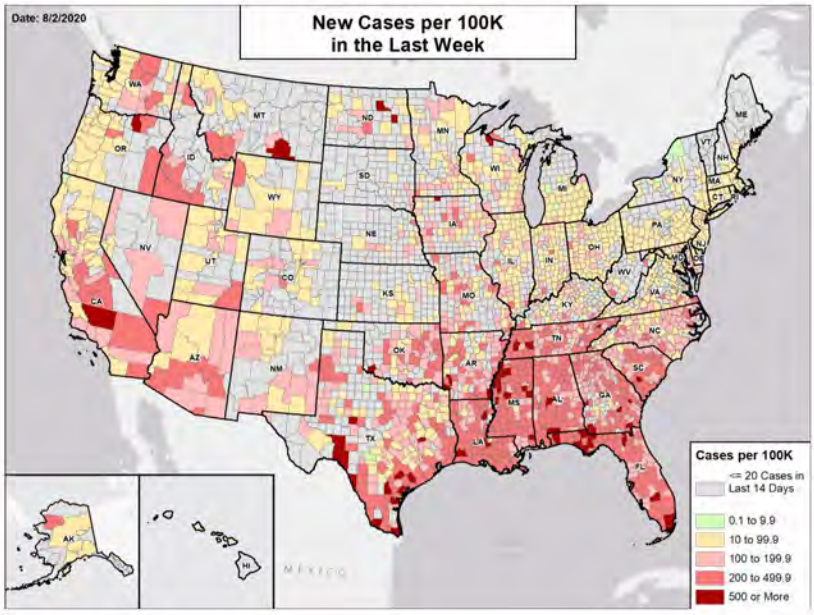
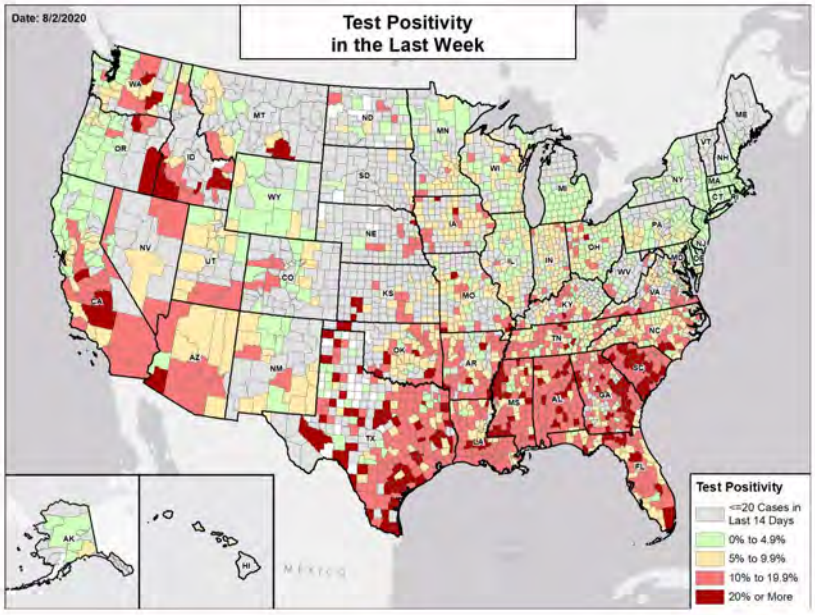
National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

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COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

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SUMMARY

- Missouri is in the red zone for cases, indicating more than 100 new cases per 100,000 population last week, and the yellow zone for test positivity, indicating a rate between 5% to 10%.
- Missouri has seen an increase in new cases and stability in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. St. Louis County, 2. Jackson County, and 3. St. Charles County. These counties represent 50.7 percent of new cases in Missouri.
- Missouri had 179 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 96 to support operations activities from FEMA; 7 to support epidemiology activities from CDC; and 1 to support operations activities from VA.
- Between Jul 25 - Jul 31, on average, 85 patients with confirmed COVID-19 and 274 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Missouri. An average of 82 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- The remarkable increase in case rates will require restrictions and intensive community mitigation: recommend strict adherence to established guidance for all yellow- and red-zone counties and metro areas.
- Recommend mandating and enforcing use of cloth face masks outside of the home in all yellow- and red-zone counties and metro areas. Consider broad PSAs and public health messaging on the importance of wearing face masks.
- Ensure early contact tracing, with effective quarantine and isolation, focusing on yellow- and red-zone counties and areas of increasing transmission.
- Ensure all crowded indoor working spaces enforce guidance for social distancing and face masks, especially in yellow- and red-zone counties where risk of outbreaks is highest.
- Develop contingency plans for expanding public health and clinical capacity, especially in red-zone counties.
- In many counties with increasing transmission, testing appears broadly inadequate, such as Greene, Clay, Jefferson, Jasper, Cass, Platte, Christian, and Taney counties. Consider pooled testing to expand capacity and reduce turnaround times, ensure all public health labs are staffed and running 24/7, identify universities with RNA detection platforms, and consider efforts to use this equipment to expand surveillance testing for university students and schools (K-12, community colleges, etc.).
- Increase messaging of the risk of serious disease in older individuals and in all age groups with preexisting medical conditions, including obesity, hypertension, and diabetes mellitus.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

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	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	10,957 (179)	+35.9%	19,158 (135)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	7.9%	-0.1%*	8.6%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	63,050** (1,027)	-8.3%**	176,924** (1,251)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	65 (1)	+4.8%	156 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	8.3%	-0.7%*	5.6%	12.3%

MOBILITY

* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	4	Branson Sedalia Sikeston West Plains	14 Top 12 shown (full list below)	St. Louis Kansas City Springfield Joplin Cape Girardeau Jefferson City Warrensburg Poplar Bluff Maryville Hannibal Kennett Marshall
COUNTY LAST WEEK	13 Top 12 shown (full list below)	Taney Pettis Newton McDonald Polk Scott New Madrid Howell Carroll Cooper Moniteau Morgan	38 Top 12 shown (full list below)	St. Louis Jackson St. Charles St. Louis City Greene Jefferson Jasper Cass Clay Cape Girardeau Franklin Johnson

All Yellow CBSAs: St. Louis, Kansas City, Springfield, Joplin, Cape Girardeau, Jefferson City, Warrensburg, Poplar Bluff, Maryville, Hannibal, Kennett, Marshall, Moberly, Quincy

All Red Counties: Taney, Pettis, Newton, McDonald, Polk, Scott, New Madrid, Howell, Carroll, Cooper, Moniteau, Morgan, Wayne

All Yellow Counties: St. Louis, Jackson, St. Charles, St. Louis City, Greene, Jefferson, Jasper, Cass, Clay, Cape Girardeau, Franklin, Johnson, Camden, Christian, Cole, Platte, Lawrence, Barry, Nodaway, Butler, Dunklin, Marion, Saline, Warren, Pemiscot, Miller, Webster, Stone, Ray, Callaway, Stoddard, Benton, Randolph, Barton, Macon, Dallas, Pike, Clinton

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

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Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
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Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
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- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
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- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
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- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

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- Move to community-led neighborhood testing and work with local community groups to increase access to testing
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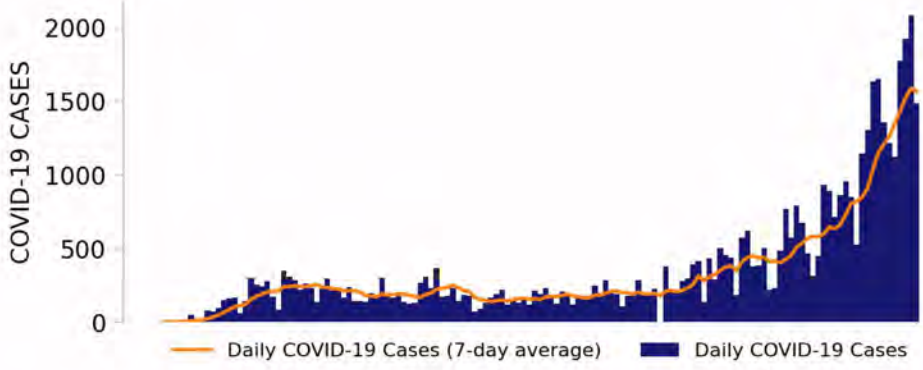
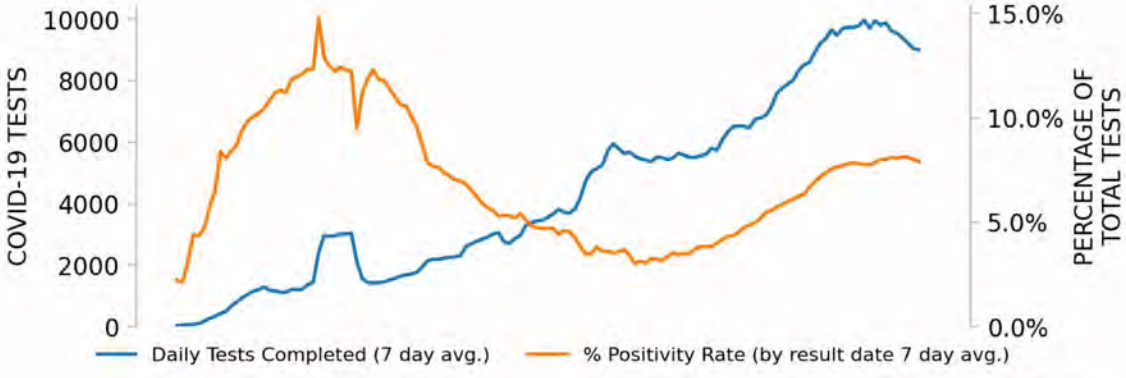
NEW CASES



TESTING



TOP COUNTIES

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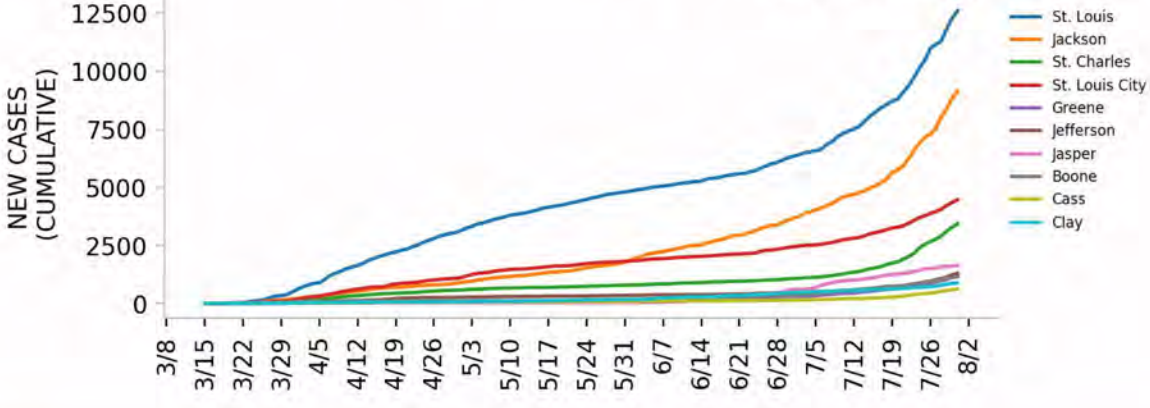

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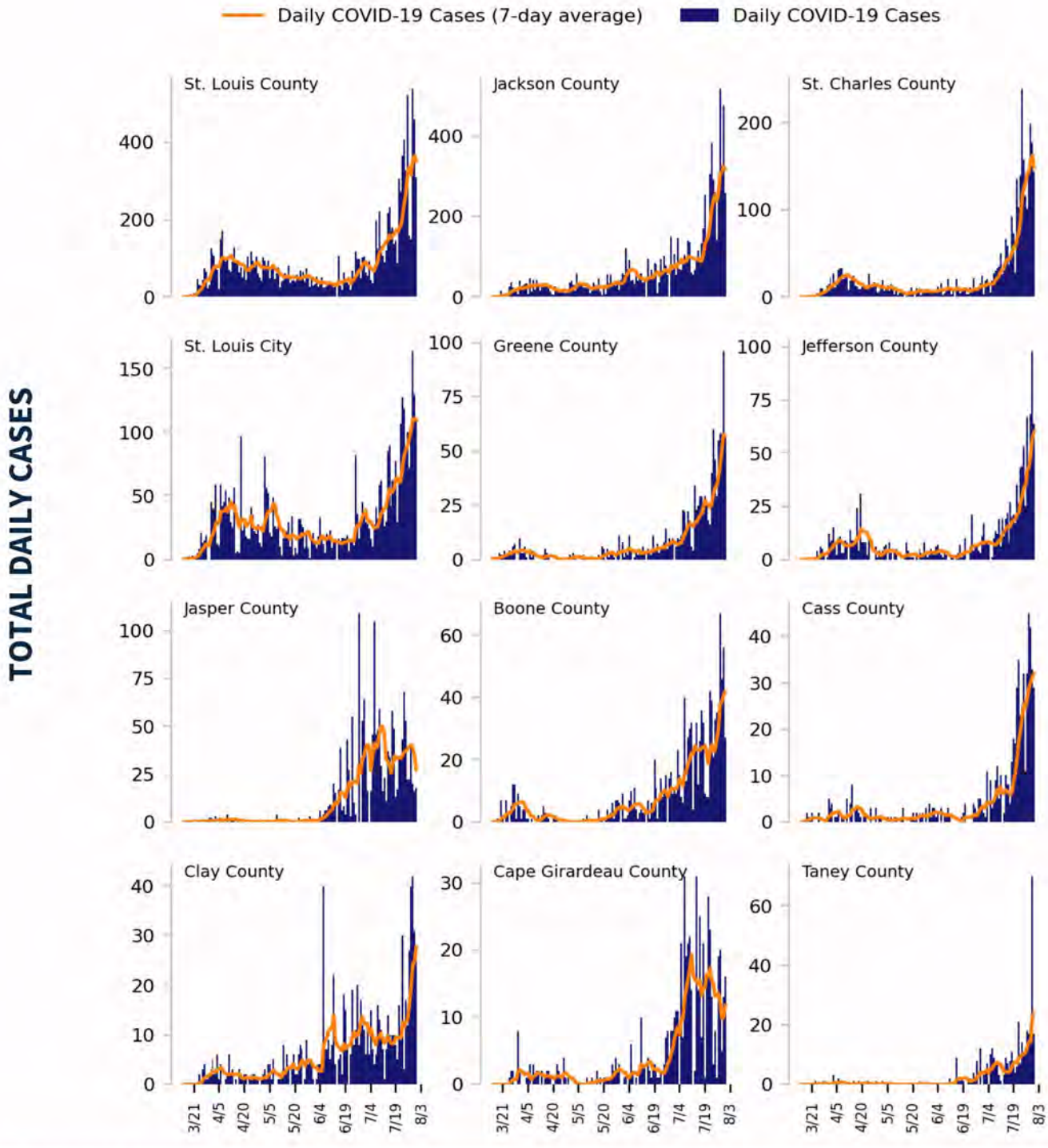

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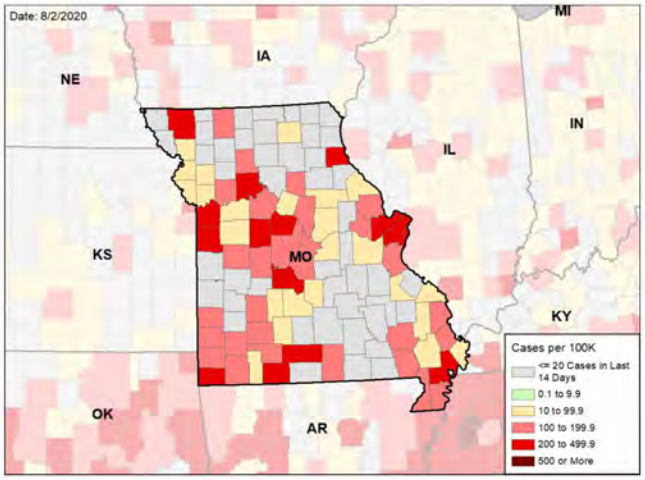
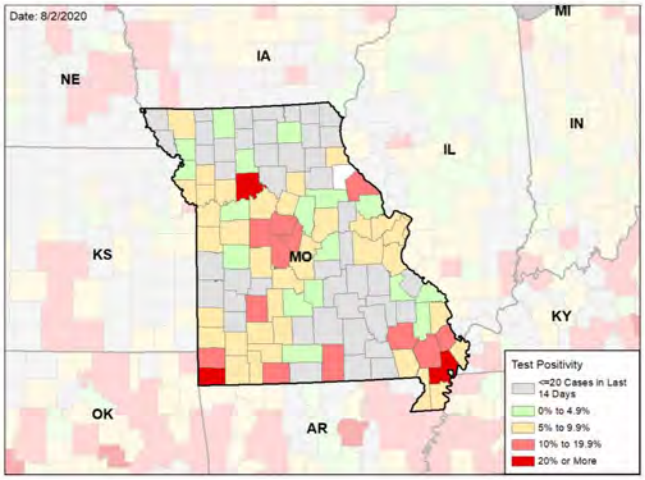
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

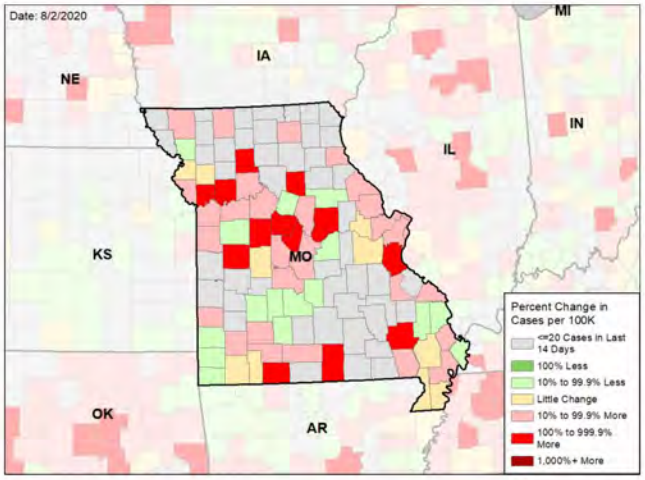
NEW CASES PER 100,000 DURING LAST WEEK



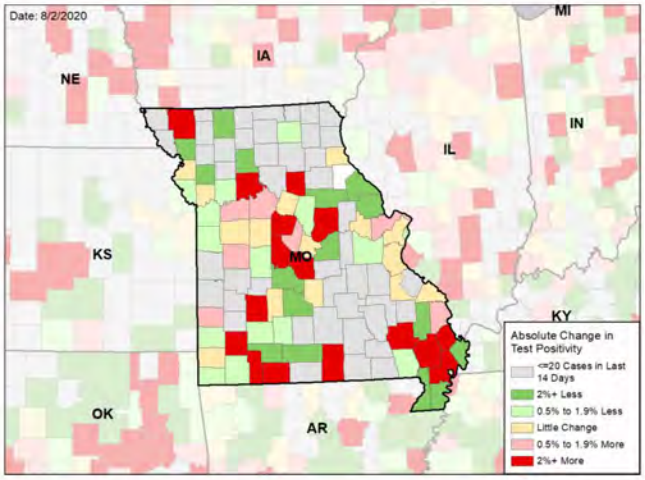
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

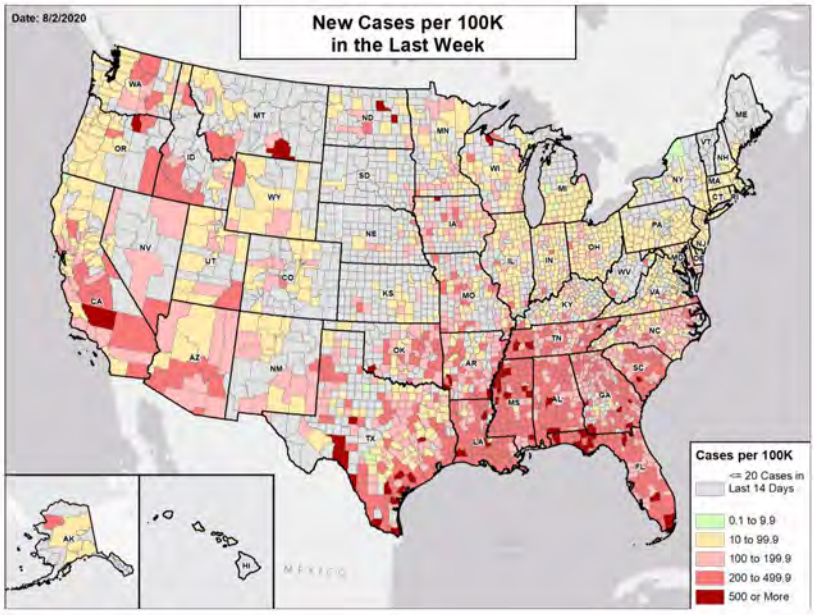


DATA SOURCES

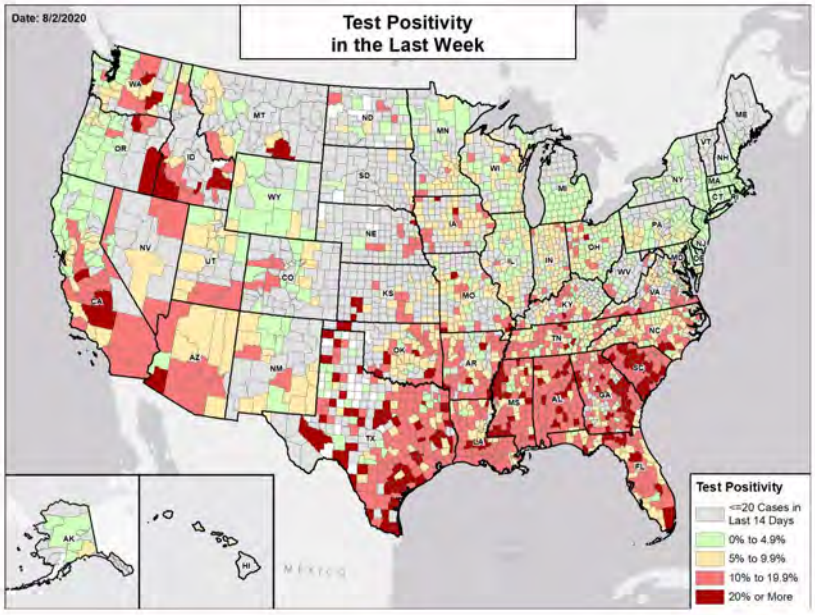
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

STATE REPORT | 08.02.2020

COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
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- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

MONTANA

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SUMMARY

- Montana is in the yellow zone for cases, indicating between 10 to 100 new cases per 100,000 population last week, and the green zone for test positivity, indicating a rate below 5%.
- Montana has seen an increase in new cases and stability in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Yellowstone County, 2. Gallatin County, and 3. Big Horn County. These counties represent 53.6 percent of new cases in Montana.
- Montana had 87 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 4 to support operations activities from FEMA.
- Between Jul 25 - Jul 31, on average, 14 patients with confirmed COVID-19 and 26 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Montana. An average of 40 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- The statewide increase in cases should be met with intensified restrictions and community mitigation efforts to contain the epidemic while that is still possible; institute guidance below for all yellow- and red-zone counties.
- As much as possible, emphasize new policy on wearing cloth face masks and expand requirement to all indoor settings outside of the home in yellow- and red-zone counties.
- Ensure vigorous contact tracing, with early quarantine and isolation, especially in areas with elevated test positivity and notable increases in case rates, such as Yellowstone, Flathead, Lake, Big Horn, Sanders, and Custer counties.
- Develop plans to expand testing through pooled testing and community-led testing; consider surge testing in counties with test positivity above 5%.
- Continue to prevent transmission and control outbreaks in crowded workplaces, such as meatpacking plants, through effective social distancing, mandatory face masks, and vigorous and early contact tracing.
- Tribal Nations: Continue to promote social distancing and mask recommendations. Deploy specific culturally relevant education and public health messaging. Pooled testing should be instituted for multi-generational households. Spaces to provide quarantine of contacts and isolation of cases should be provided as needed.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

MONTANA

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	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	927 (87)	+38.2%	9,748 (80)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	4.8%	-0.2%*	5.7%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	23,878** (2,234)	+41.6%**	205,390** (1,675)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	12 (1)	+33.3%	102 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	1.6%	+1.6%*	4.7%	12.3%

MOBILITY

* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

MONTANA

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	4	Billings Kalispell Missoula Butte-Silver Bow
COUNTY LAST WEEK	2	Big Horn Beaverhead	6	Yellowstone Flathead Lake Missoula Madison Silver Bow

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
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Testing

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- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
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- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

MONTANA

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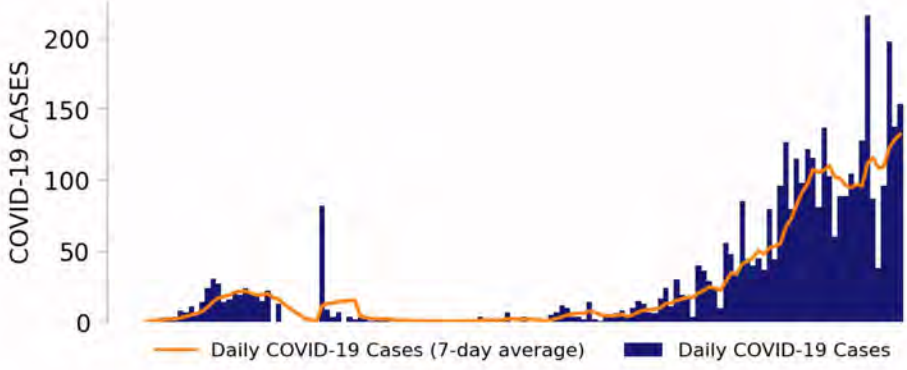
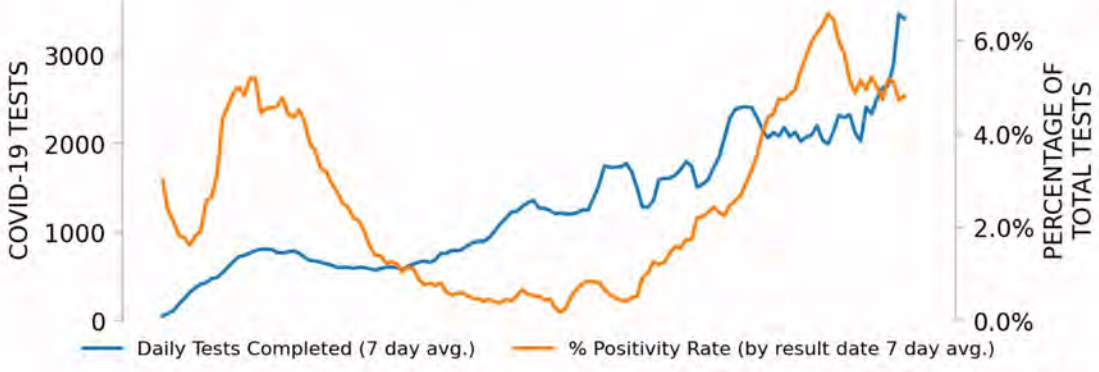
NEW CASES

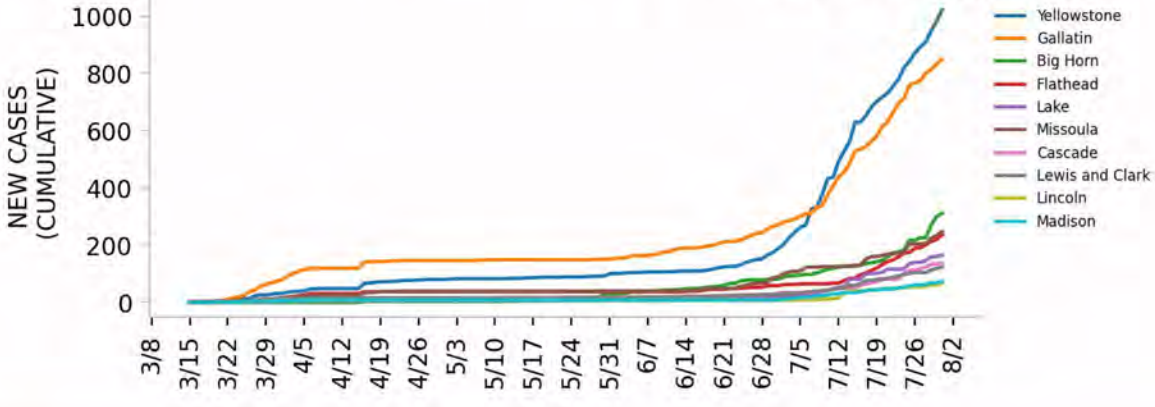


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

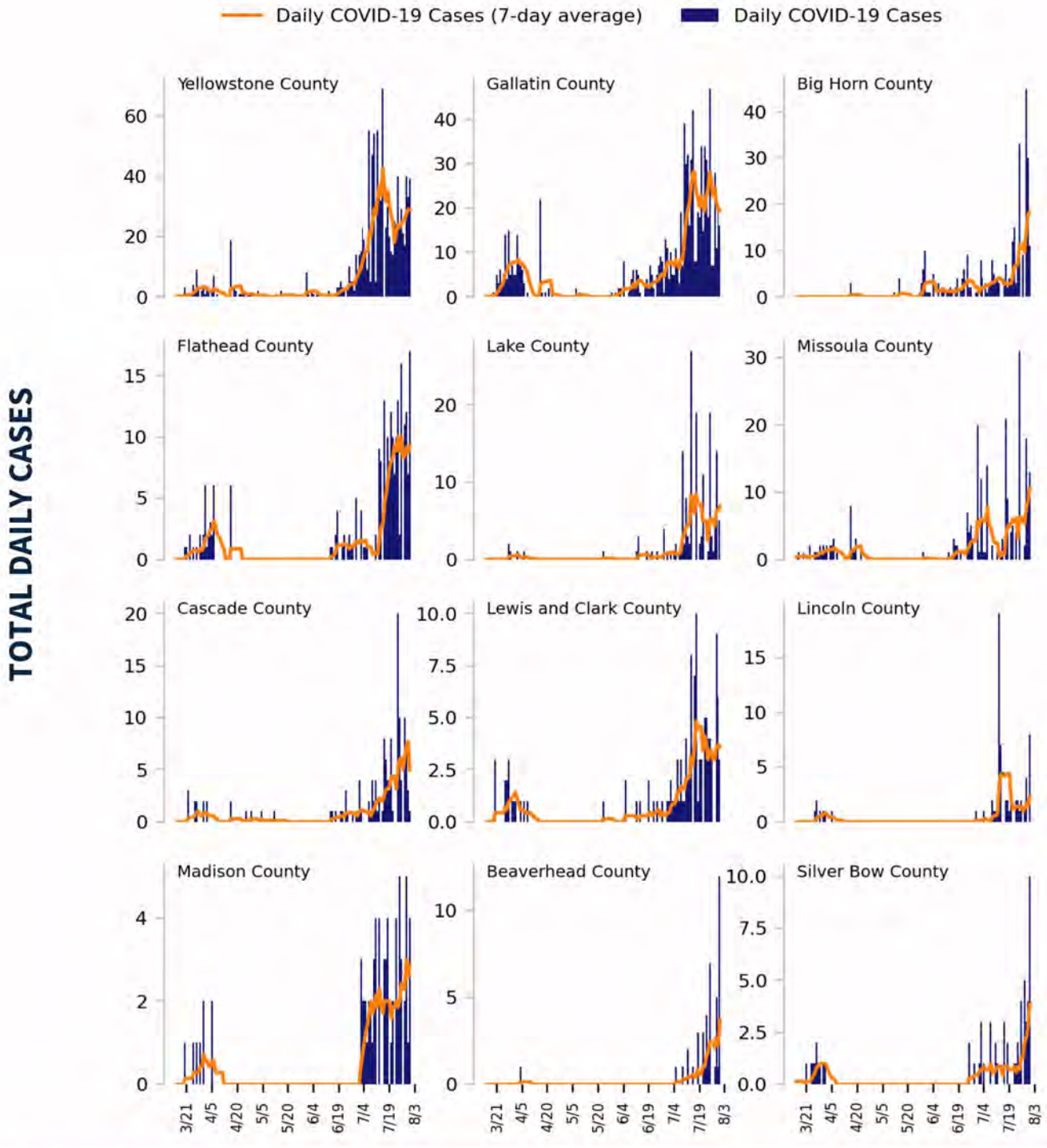


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

MONTANA

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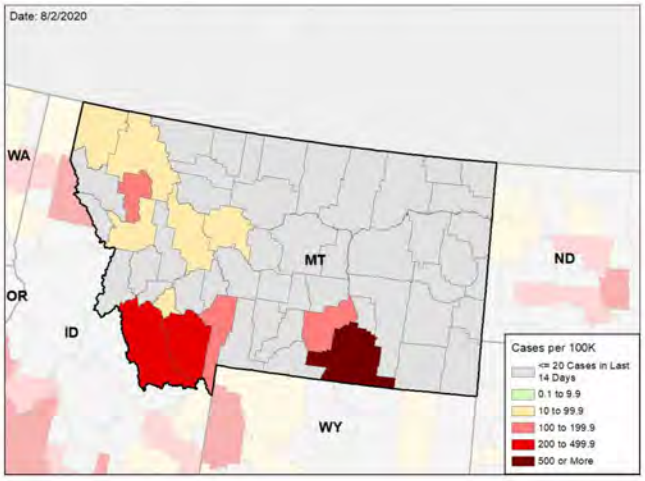
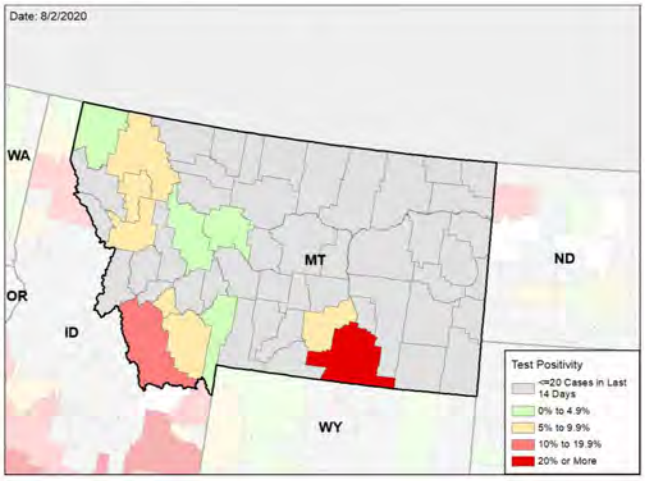
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

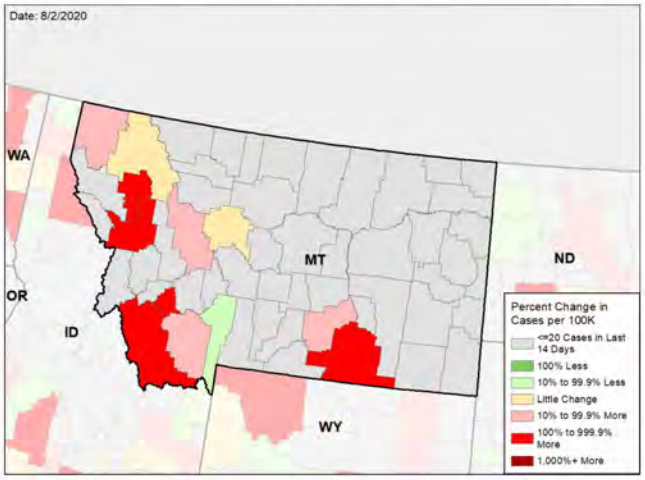
NEW CASES PER 100,000 DURING LAST WEEK



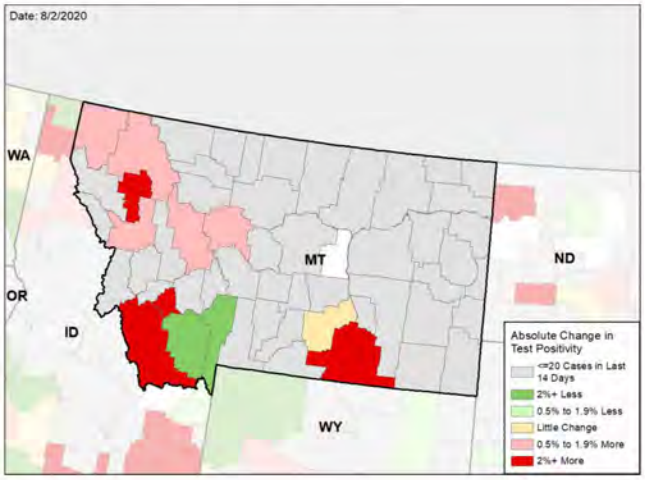
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



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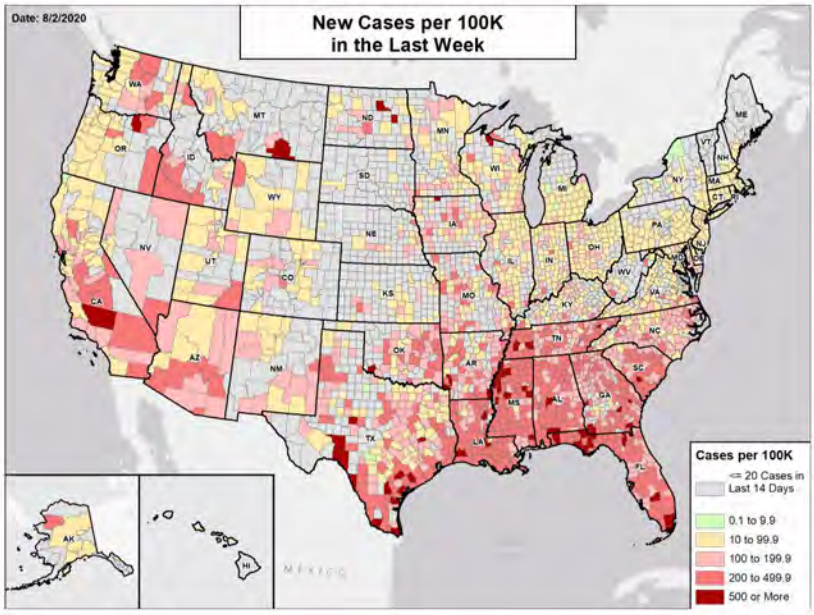
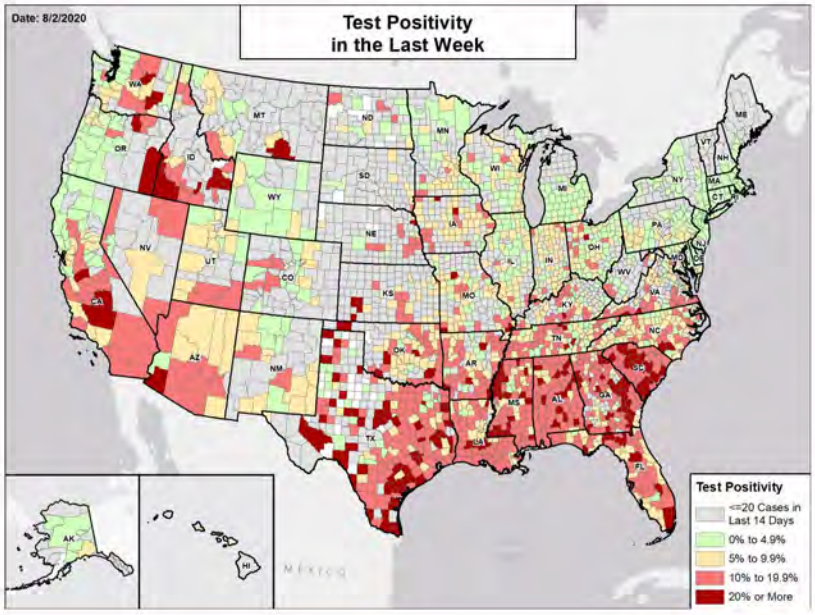
National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



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Methods

STATE REPORT | 08.02.2020

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Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

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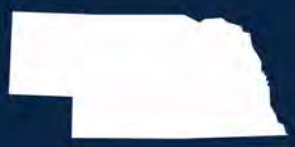

NEBRASKA

STATE REPORT | 08.02.2020

SUMMARY

- Nebraska, with 105 new cases per 100,000 population last week, is at the border of yellow and red zones for cases, and is in the red zone for test positivity, indicating a rate above 10%.
- Nebraska has seen a continued increase in new cases and an increase in testing positivity over the past week. Hospitalizations continued to gradually increase.
- Cases are concentrated in the Omaha and Lincoln CBSAs. Cases continued to increase in the Omaha area but fell slightly in Lincoln, where a mask mandate took effect July 20. Several counties in central Nebraska centered along I-80 also show elevated incidence and high test positivity.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Douglas County, 2. Lancaster County, and 3. Sarpy County. These counties represent 74.1 percent of new cases in Nebraska.
- Nebraska had 105 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 2 to support operations activities from FEMA.
- Between Jul 25 - Jul 31, on average, 15 patients with confirmed COVID-19 and 35 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Nebraska. An average of 66 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Continue weekly testing of all workers in assisted living and long-term care facilities and require masks and social distancing for all visitors.
- Encourage mask and cloth face covering use and maintaining 6 ft distancing for people outside of their homes statewide. Consider statewide masking mandate.
- Careful monitoring of compliance to mask use and social distancing in Lincoln and Omaha is critical, particularly in bars and restaurants. Limit bar hours or occupancy in highly affected counties if cases continue to rise.
- Ensure that COVID-19 diagnostic testing continues to expand, specifically in the metro areas. Surge additional testing to other counties with elevated incidence and test positivity.
- Identify universities with RNA detection platforms; consider efforts to use this equipment to expand surveillance testing for university students and schools (K-12, community colleges).
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

NEBRASKA

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	2,022 (105)	+12.3%	19,158 (135)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	11.4%	+1.7%*	8.6%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	24,929** (1,289)	-10.8%**	176,924** (1,251)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	17 (1)	-15.0%	156 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	3.2%	+0.6%*	5.6%	12.3%

MOBILITY

* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

NEBRASKA

STATE REPORT | 08.02.2020

COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	4	Omaha-Council Bluffs Lincoln Columbus Lexington	4	Kearney Sioux City Grand Island Norfolk
COUNTY LAST WEEK	7	Douglas Lancaster Sarpy Platte Dawson Saline Thurston	7	Buffalo Dakota Hall Cass Washington Saunders Madison

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

NEBRASKA

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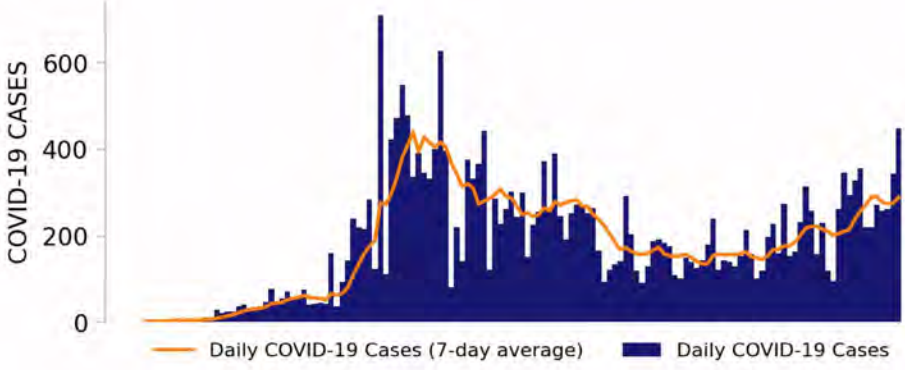
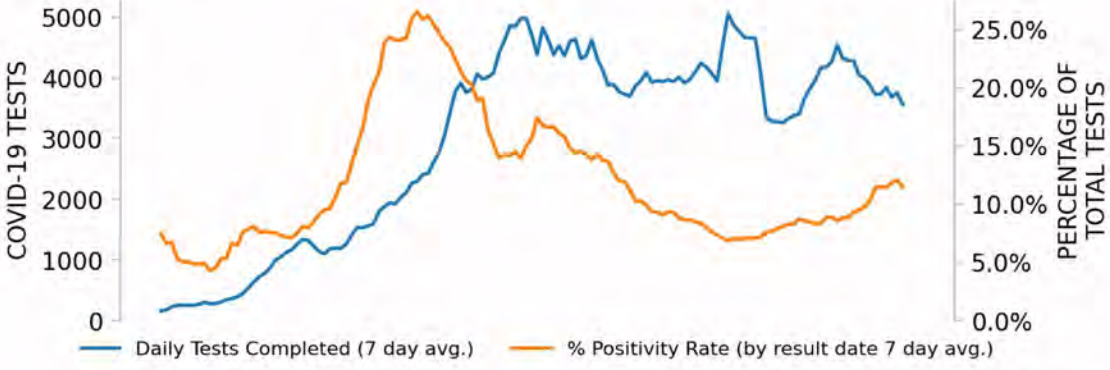
NEW CASES

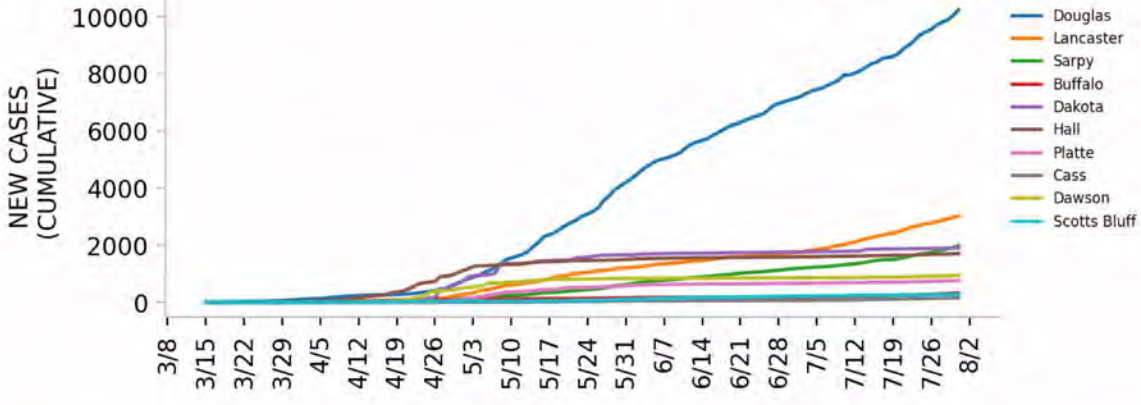


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

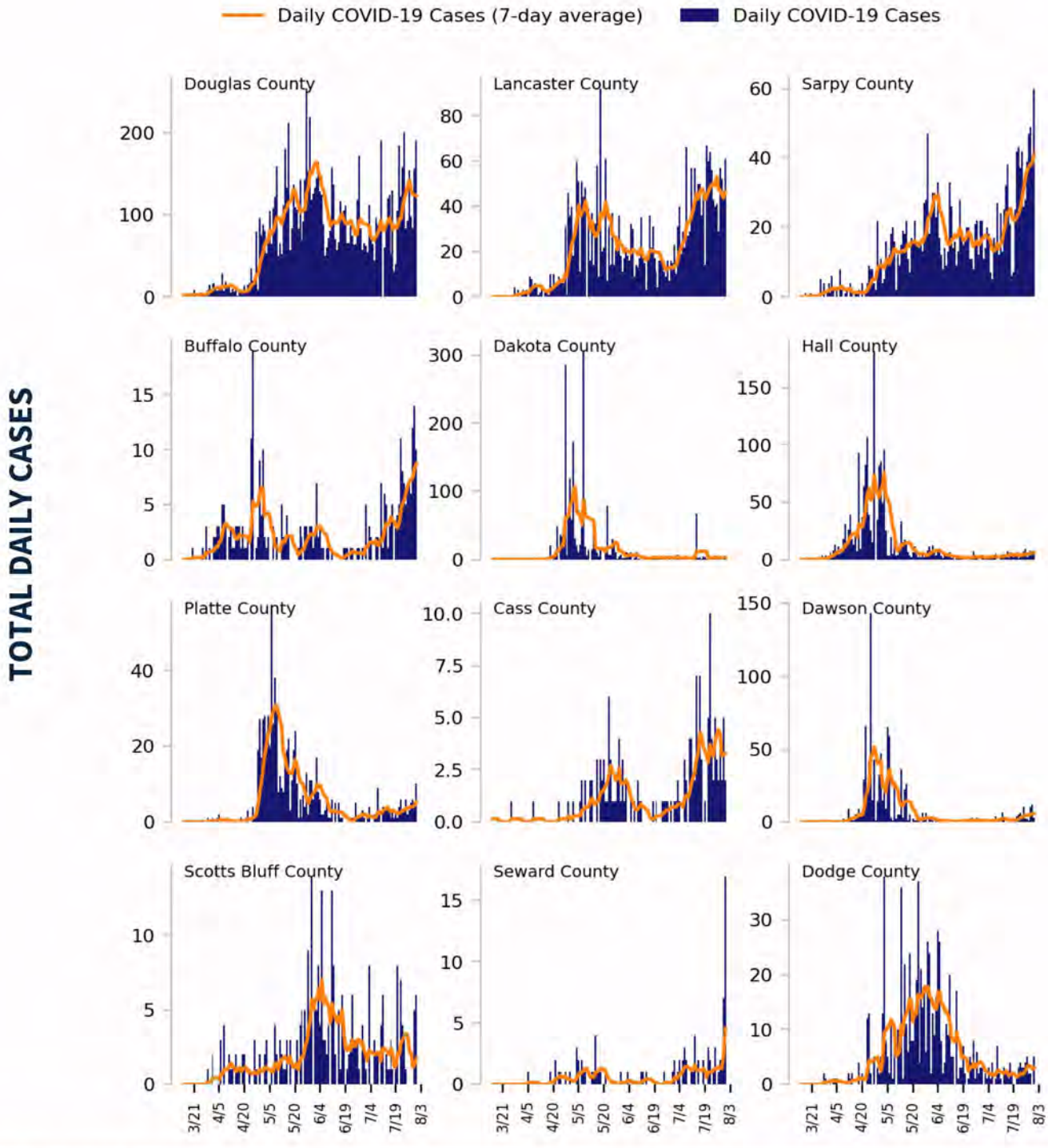


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

NEBRASKA

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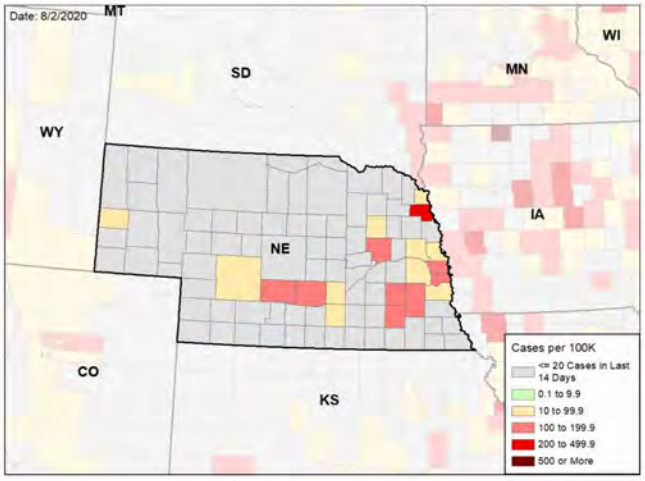
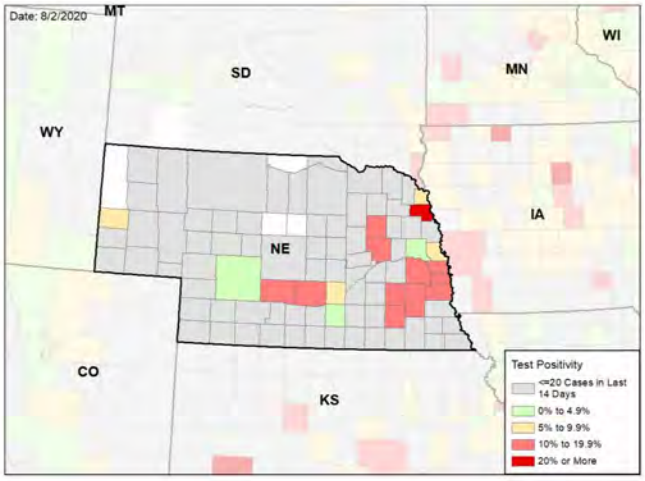
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

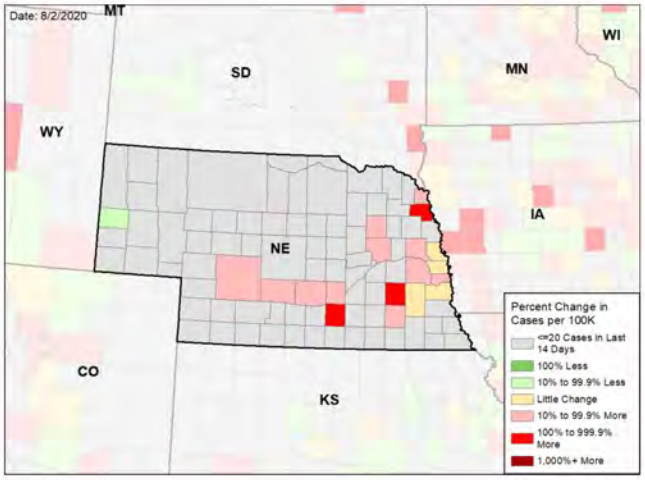
NEW CASES PER 100,000 DURING LAST WEEK



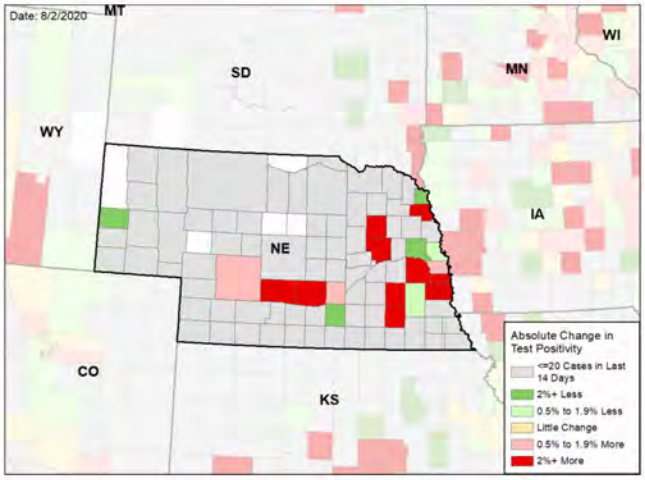
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

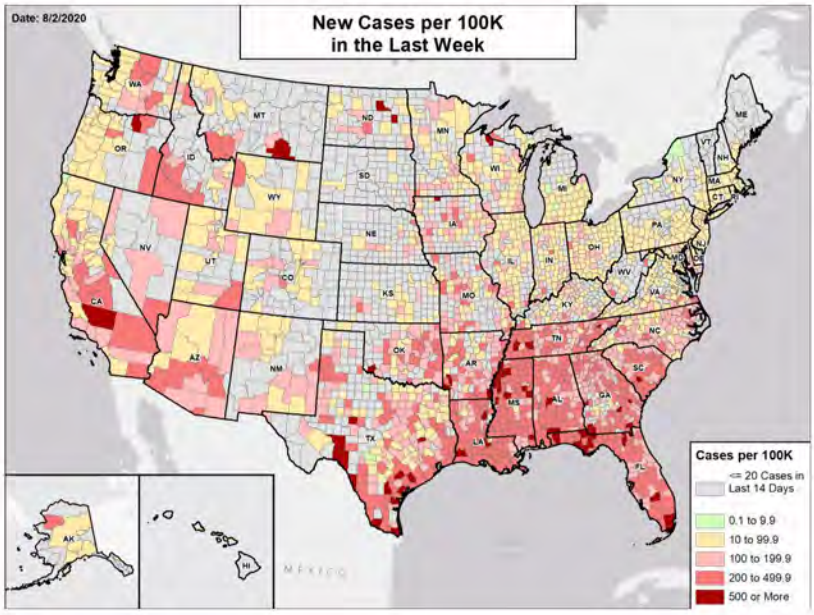


DATA SOURCES

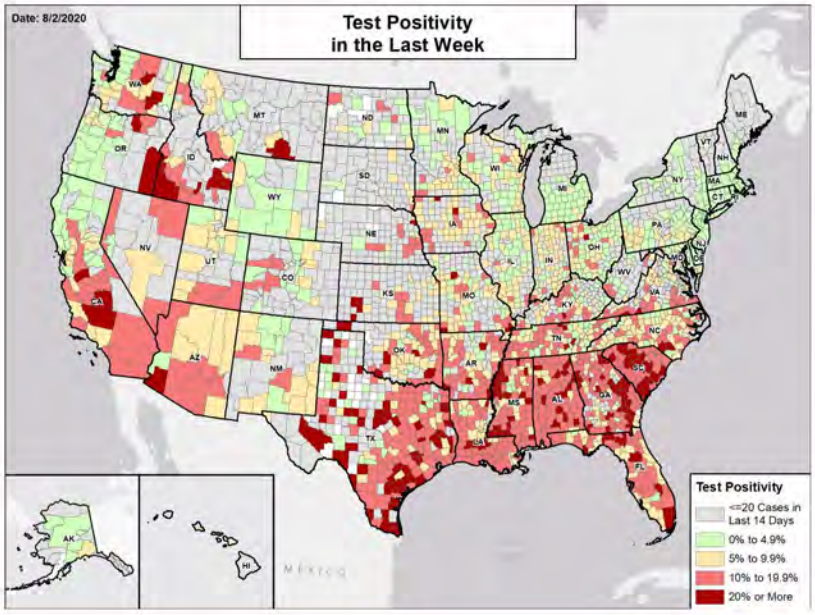
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

STATE REPORT | 08.02.2020

COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

NEVADA

STATE REPORT | 08.02.2020

SUMMARY

- Nevada is in the red zone for cases, indicating more than 100 new cases per 100,000 population last week, and the red zone for test positivity, indicating a rate above 10%.
- Nevada has seen stability in new cases and stability in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Clark County, 2. Washoe County, and 3. Elko County. These counties represent 97.9 percent of new cases in Nevada.
- Nevada had 234 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 9 to support operations activities from FEMA and 10 to support medical activities from VA.
- Between Jul 25 - Jul 31, on average, 143 patients with confirmed COVID-19 and 649 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Nevada. An average of 85 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Message to residents if they vacation in an area with high COVID prevalence and return to an area with low COVID prevalence, they should: remain socially distanced, stay masked in all public spaces, and avoid all indoor gatherings where social distancing and masks cannot be maintained.
- Identify mechanisms to assess compliance with local regulations.
- Conduct on-site inspections in nursing homes with two or more confirmed or suspected positives to ensure COVID-19 safety guidance and considerations are being implemented. Preventing further spread in these areas is critical to protect the vulnerable nursing home population. Protect vulnerable populations in assisted living and long-term care facilities through weekly testing of all workers and requiring masks. In facilities with workers who tested positive, ensure all residents have been promptly tested and appropriate cohorting measures are in place.
- Providing timely test results to individuals so they can isolate and stop the spread is critical. Implement the following to increase testing capacity and decrease turnaround times:
    - (1) For family and cohabitating households, screen entire households in a single test by pooling a sample of each member's specimen. For households that test positive, isolate and conduct follow-up individual tests.
    - (2) Expand testing capacity in public health labs by adding shifts, including weekend shifts, to reduce turnaround times.
    - (3) Require all universities with RNA detection platforms to use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Continue to enhance contact tracing and ensure the ability of cases and contacts to quarantine or isolate safely.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

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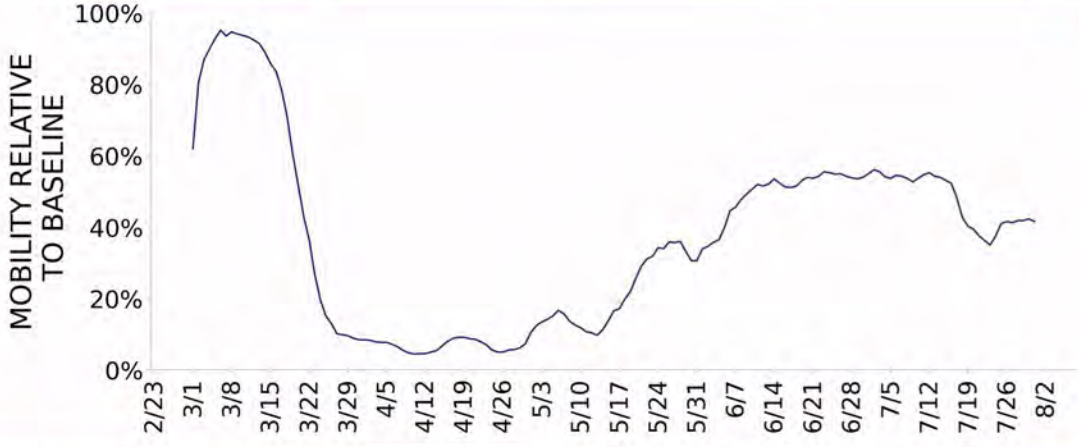
NEVADA

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	7,207 (234)	-5.1%	87,028 (170)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	13.8%	-0.2%*	11.0%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	60,525** (1,965)	-4.6%**	958,730** (1,869)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	108 (4)	+27.1%	1,403 (3)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	13.0%	+0.7%*	15.7%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

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Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

NEVADA

STATE REPORT | 08.02.2020

COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	3	Las Vegas-Henderson-Paradise Reno Elko	4	Pahrump Carson City Gardnerville Ranchos Winnemucca
COUNTY LAST WEEK	3	Clark Washoe Elko	4	Nye Carson City Douglas Humboldt

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
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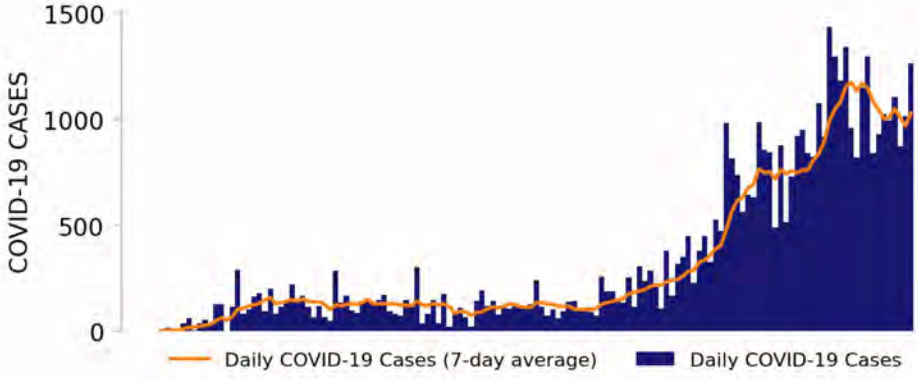
Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

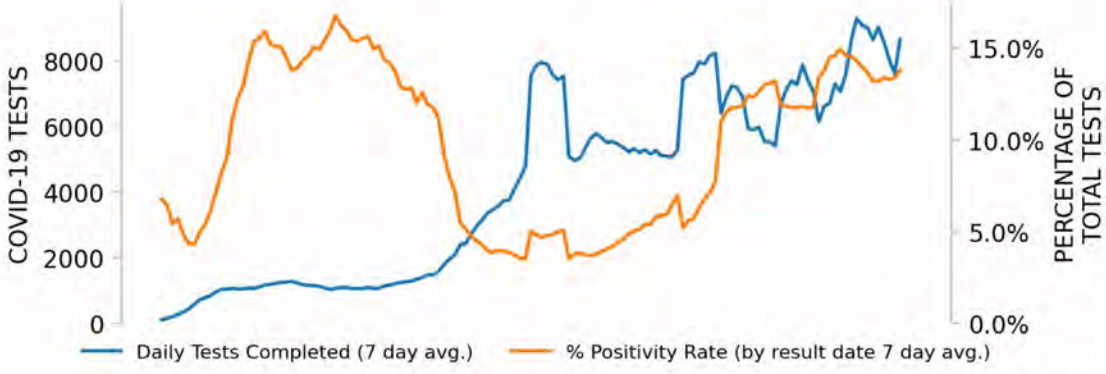
NEVADA

STATE REPORT | 08.02.2020

NEW CASES

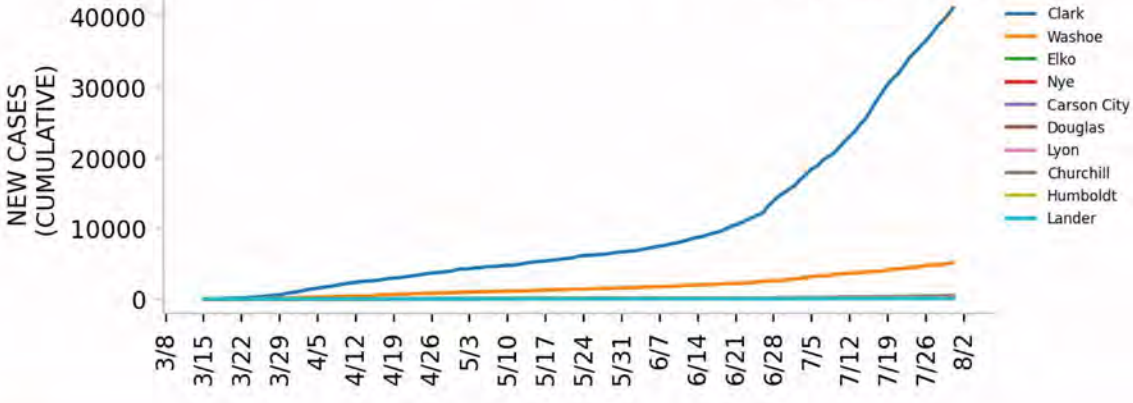


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)



DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

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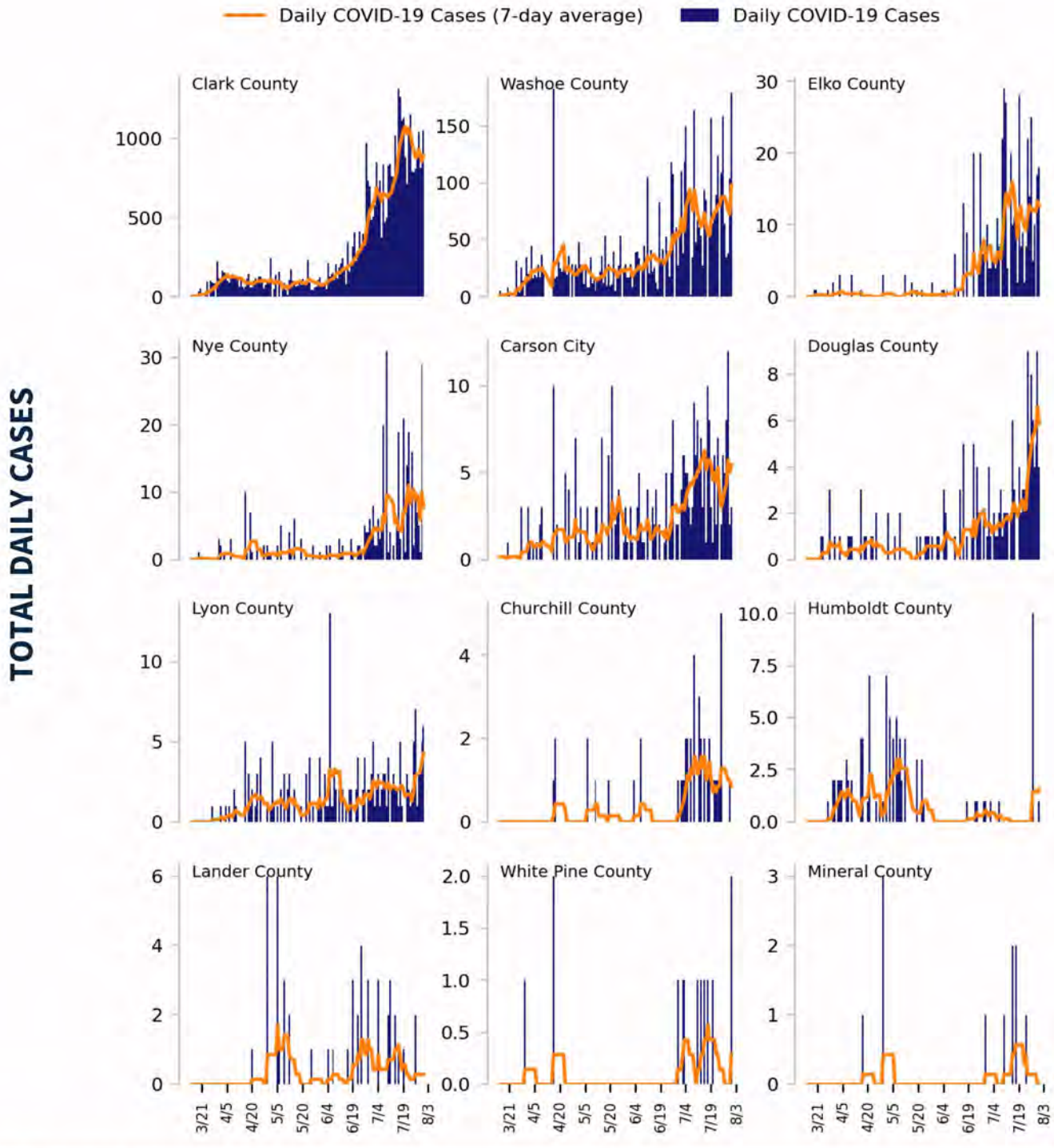
Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

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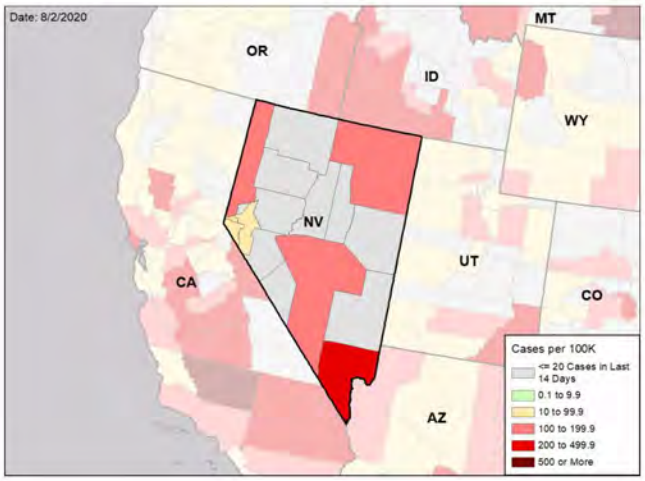
NEVADA

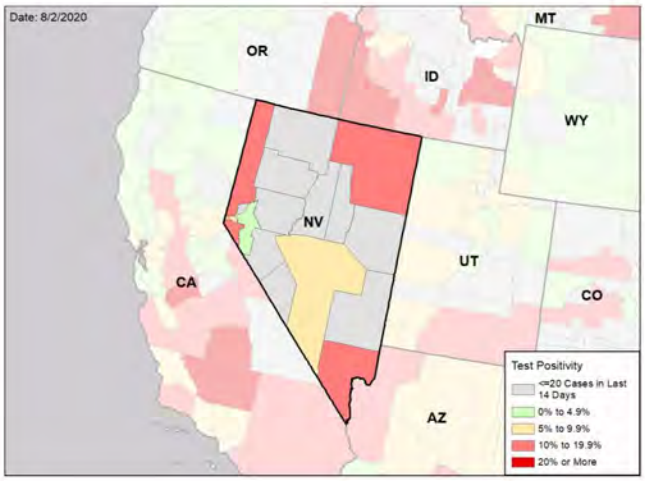
STATE REPORT | 08.02.2020

CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

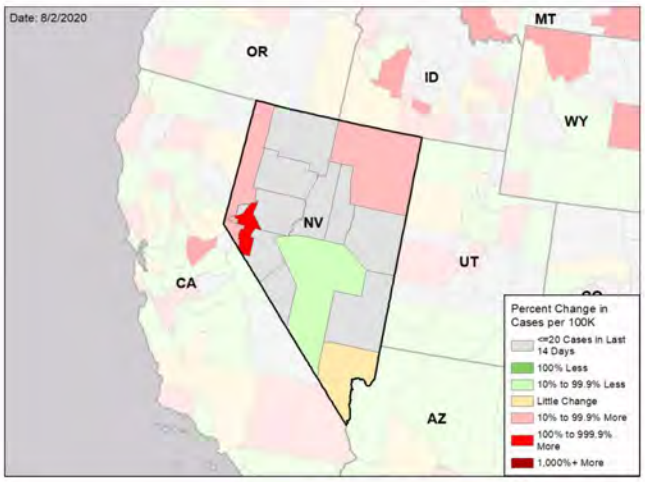
NEW CASES PER 100,000 DURING LAST WEEK



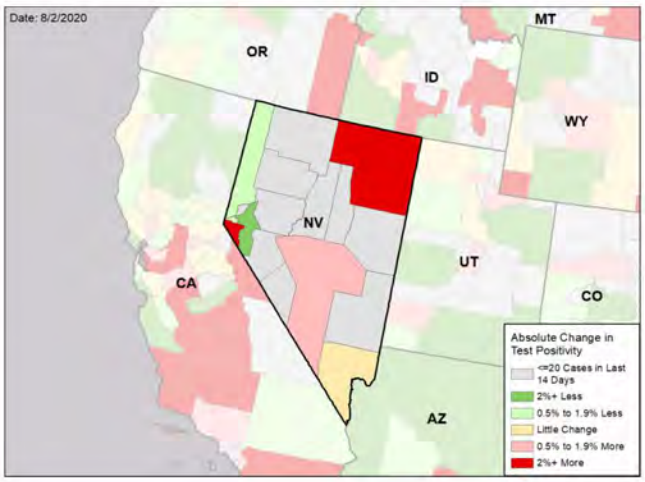
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



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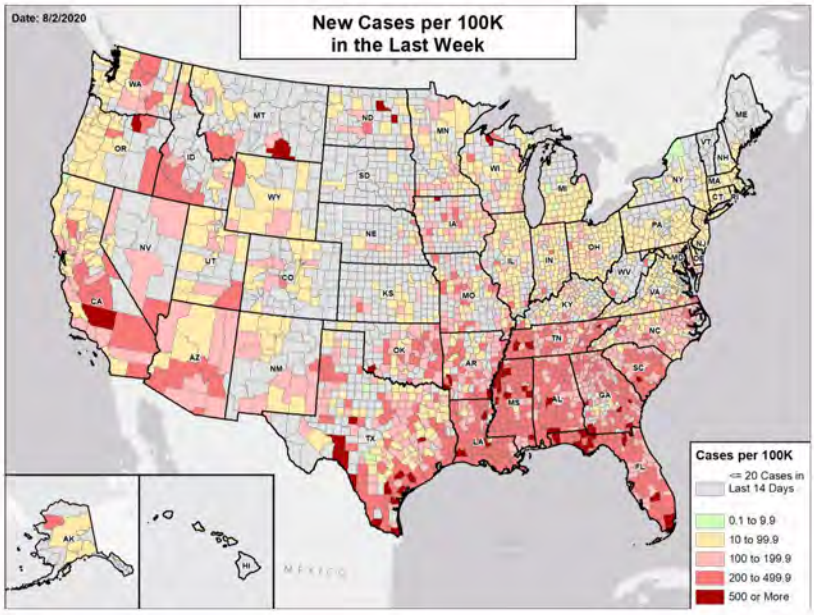
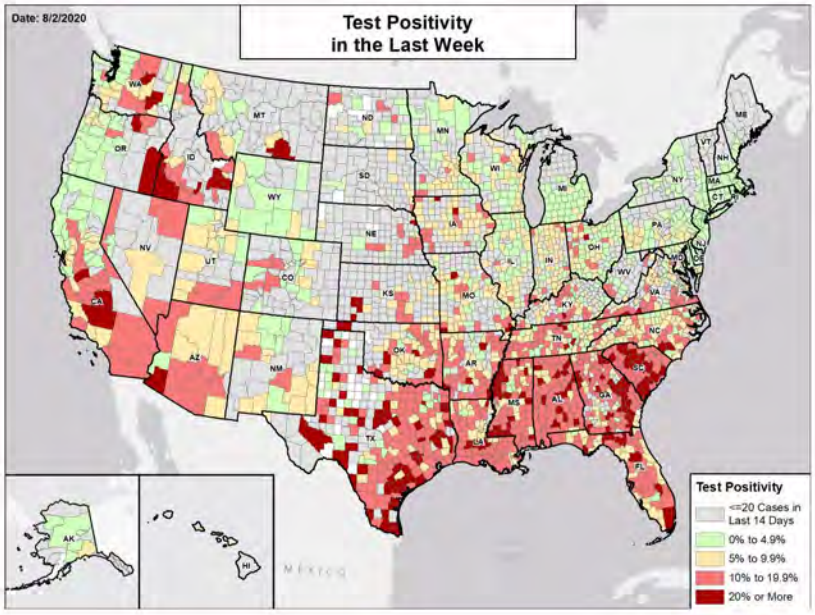
National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



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Methods

STATE REPORT | 08.02.2020

COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

NEW HAMPSHIRE

STATE REPORT | 08.02.2020

SUMMARY

- New Hampshire is at the border of the green and yellow zones for COVID-19 cases and is in the green zone for COVID-19 test positivity, indicating a rate below 5%.
- New Hampshire has seen stability in new cases and stability in testing positivity over the past week.
- The following three counties, all in southeast New Hampshire, continued to have the highest number of new cases over the past 3 weeks: 1. Hillsborough County, 2. Rockingham County, and 3. Merrimack County. These counties represent 83.6 percent of new cases in New Hampshire. However, several other counties had large percentage increases in cases.
- New Hampshire had 15 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 2 to support operations activities from FEMA.
- Between Jul 25 - Jul 31, on average, 4 patients with confirmed COVID-19 and 22 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in New Hampshire. An average of 95 percent of hospitals reported each day during this period.*

RECOMMENDATIONS

- Continue the scaleup of testing, moving to community led neighborhood testing and pooled household testing in the top 3 counties. Work with local communities and provide clear guidance on isolation.
- Provide regular updates on progress in contact tracing, including the proportion of cases linked to previously identified cases and the percentage of cases and contacts reached within 24-48 hours of identification.
- Identify universities with RNA detection platforms; consider efforts to use this equipment to expand surveillance testing for university students and schools (K-12, community colleges).
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

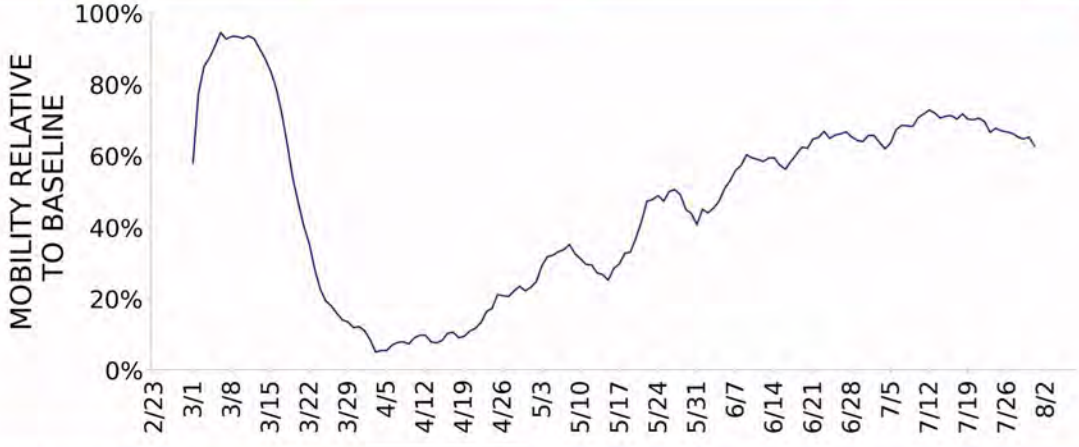
** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

NEW HAMPSHIRE

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	208 (15)	-1.4%	4,853 (33)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	1.9%	+0.1%*	1.9%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	14,065** (1,034)	-6.4%**	229,303** (1,545)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	6 (0)	-57.1%	144 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	1.5%	+1.5%*	4.3%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

NEW HAMPSHIRE

STATE REPORT | 08.02.2020

COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	0	N/A
COUNTY LAST WEEK	0	N/A	0	N/A

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

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POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
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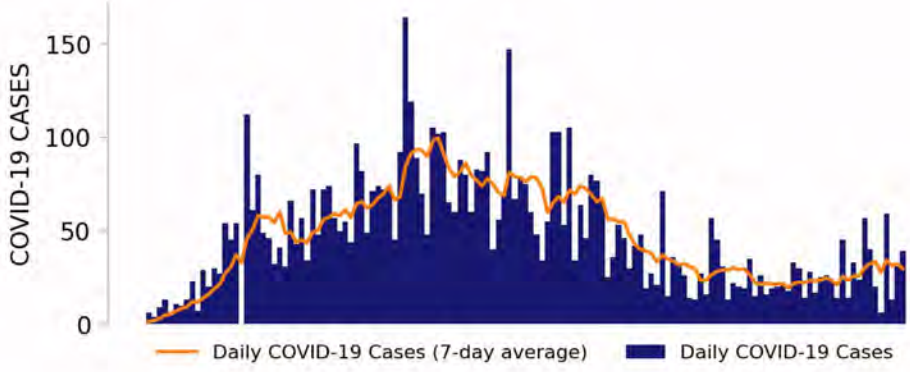
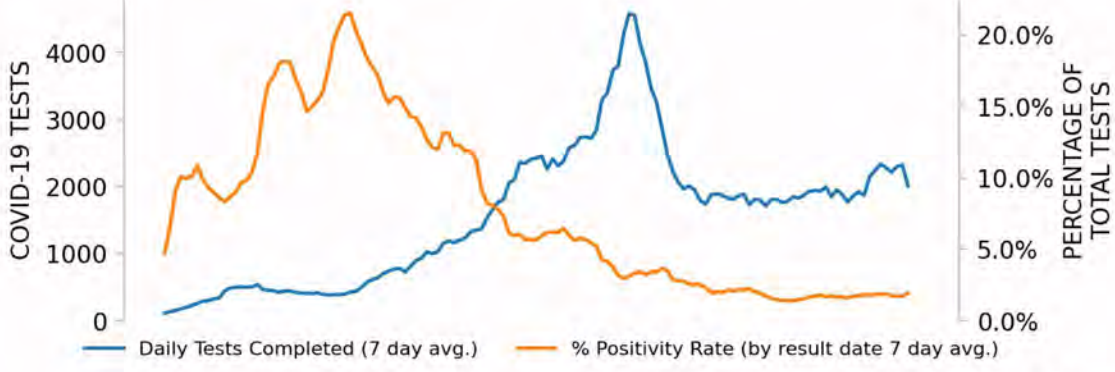
NEW HAMPSHIRE

STATE REPORT | 08.02.2020

NEW CASES



TESTING



TOP COUNTIES

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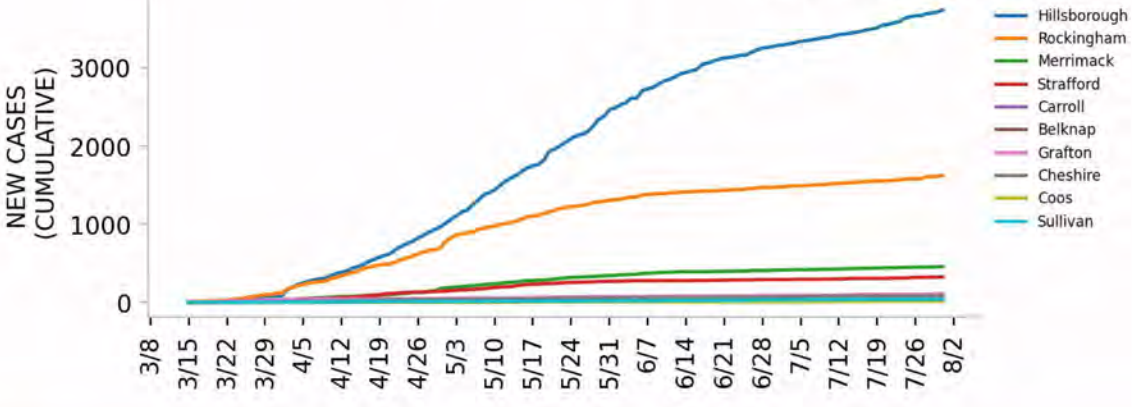

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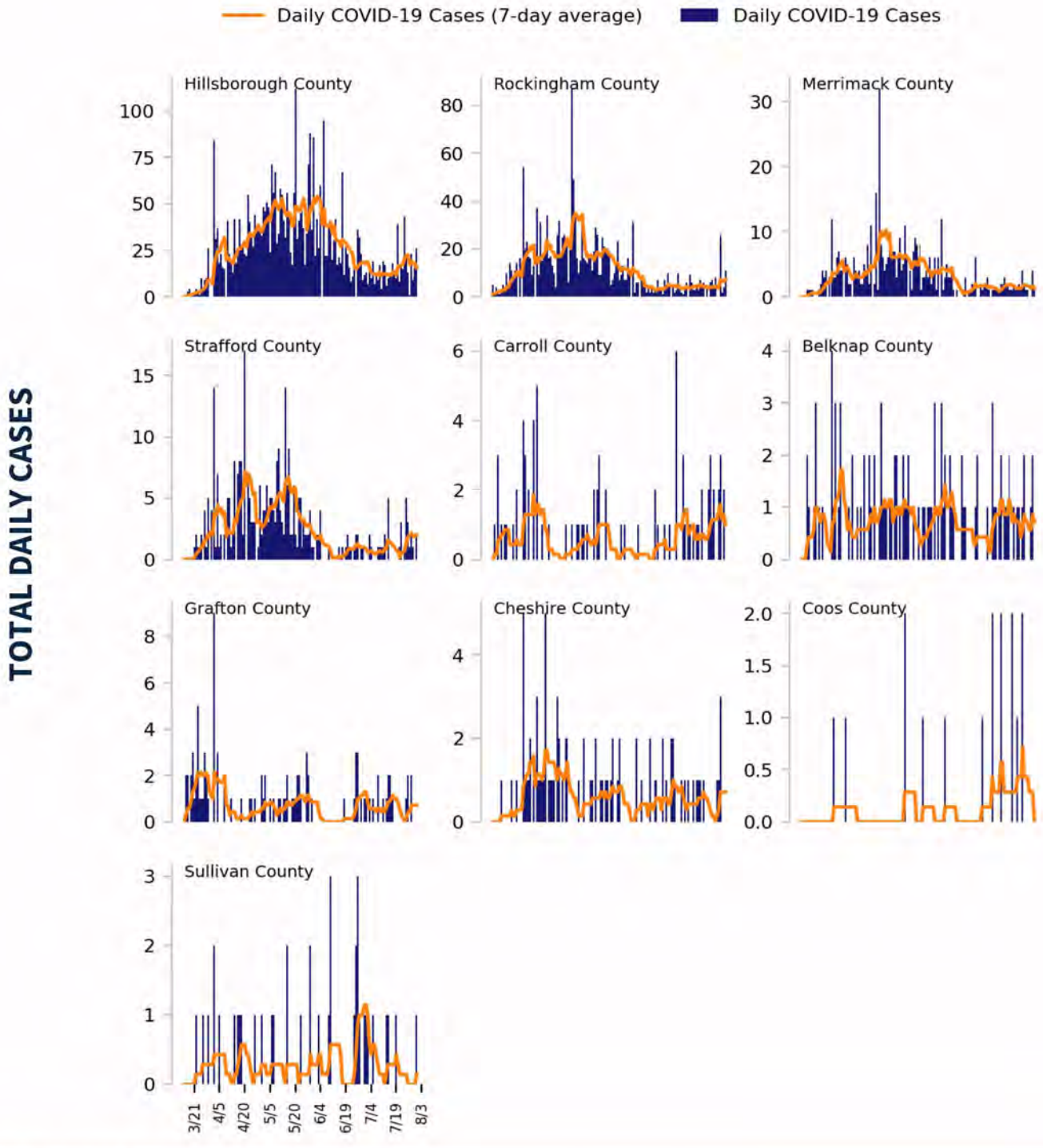

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NEW HAMPSHIRE

STATE REPORT | 08.02.2020

CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

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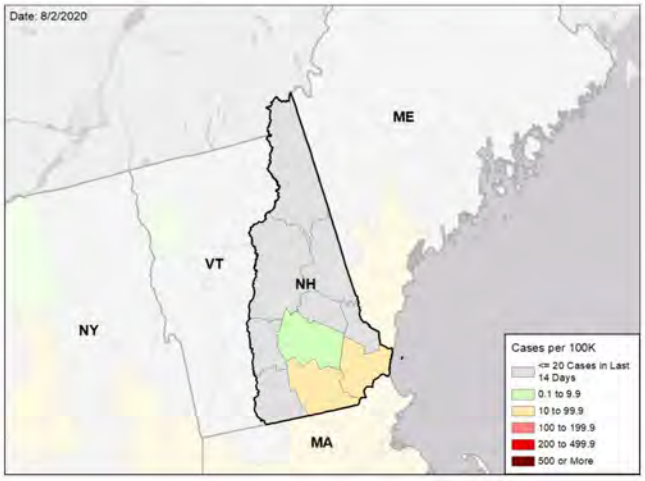

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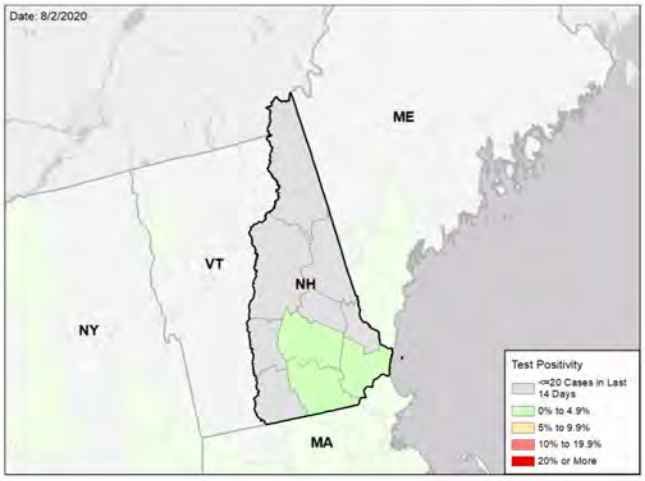

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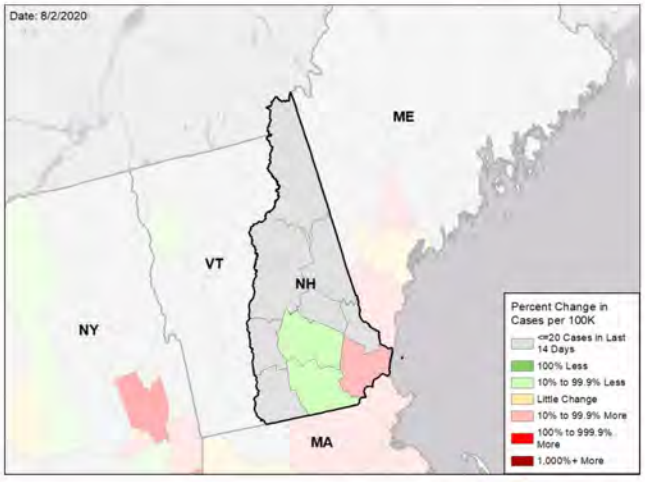

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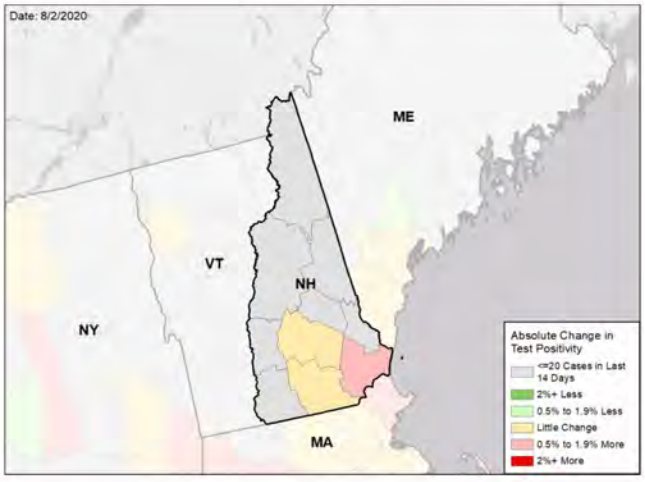

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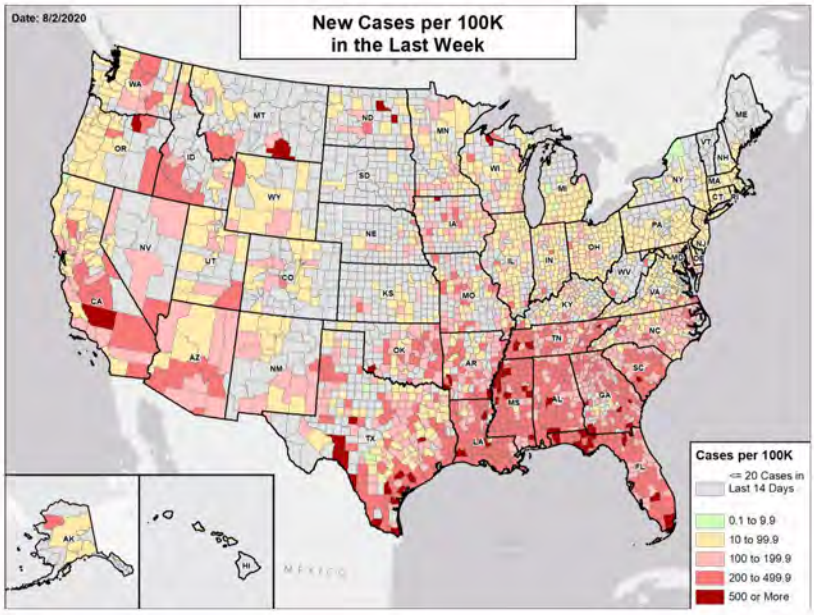
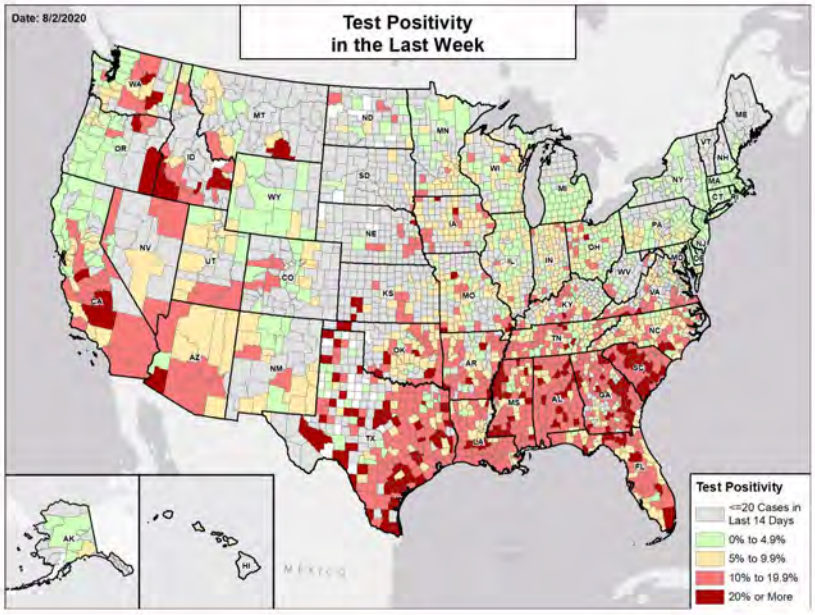
National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



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STATE REPORT | 08.02.2020

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Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

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- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

NEW JERSEY

STATE REPORT | 08.02.2020

SUMMARY

- New Jersey is in the yellow zone for cases, indicating between 10 to 100 new cases per 100,000 population last week, and the green zone for test positivity, indicating a rate below 5%.
- New Jersey has seen an increase in new cases and stability in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Camden County, 2. Middlesex County, and 3. Monmouth County. These counties represent 27.6 percent of new cases in New Jersey.
- New Jersey had 37 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 61 to support operations activities from FEMA; 16 to support operations activities from USCG; 1 to support medical activities from VA; and 3 to support operations activities from VA.
- Between Jul 25 - Jul 31, on average, 45 patients with confirmed COVID-19 and 345 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in New Jersey. An average of 81 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Message to residents that if they have vacationed in, or had visitors from, areas with high COVID-19 prevalence including the South and West of the United States, they should: avoid vulnerable individuals; remain socially distanced and masked when around others for a minimum of 14 days; avoid indoor gatherings where social distancing and masks cannot be maintained; and get tested if anyone in their family develops symptoms. Also, message that they can transmit the virus even when asymptomatic.
- Conduct on-site inspections in nursing homes with two or more confirmed or suspected positives to ensure COVID-19 safety guidance and considerations are being implemented. Preventing further spread in these areas is critical to protect the vulnerable nursing home population. Protect vulnerable populations in assisted living and long-term care facilities through weekly testing of all workers and requiring masks. In facilities with workers who tested positive, ensure all residents have been promptly tested and appropriate cohorting measures are in place.
- Providing timely test results to individuals so they can isolate and stop the spread is critical. Implement the following to increase testing capacity and decrease turnaround times:
    - (1) For family and cohabitating households, screen entire households in a single test by pooling a sample of each member's specimen. For households that test positive, isolate and conduct follow-up individual tests.
    - (2) Expand testing capacity in public health labs by adding shifts, including weekend shifts, to reduce turnaround times.
    - (3) Require all universities with RNA detection platforms to use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

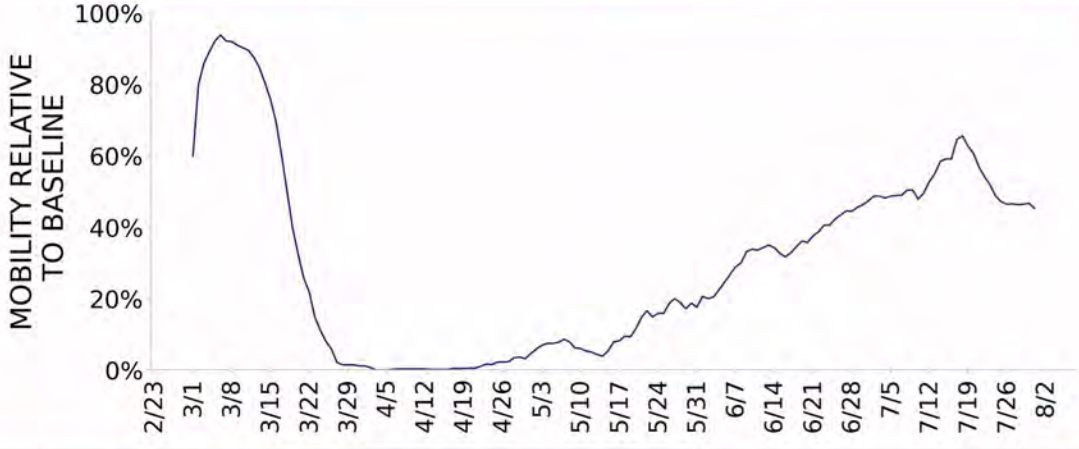
** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

NEW JERSEY

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	3,315 (37)	+61.7%	7,891 (28)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	2.1%	-0.2%*	1.5%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	135,850** (1,529)	-2.3%**	583,832** (2,060)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	61 (1)	-37.1%	140 (0)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	6.9%	-2.4%*	5.7%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

NEW JERSEY

STATE REPORT | 08.02.2020

COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	0	N/A
COUNTY LAST WEEK	0	N/A	0	N/A

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

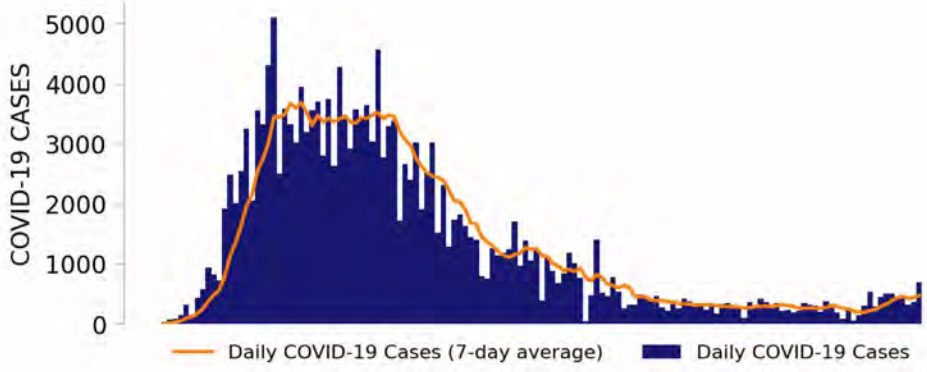
Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

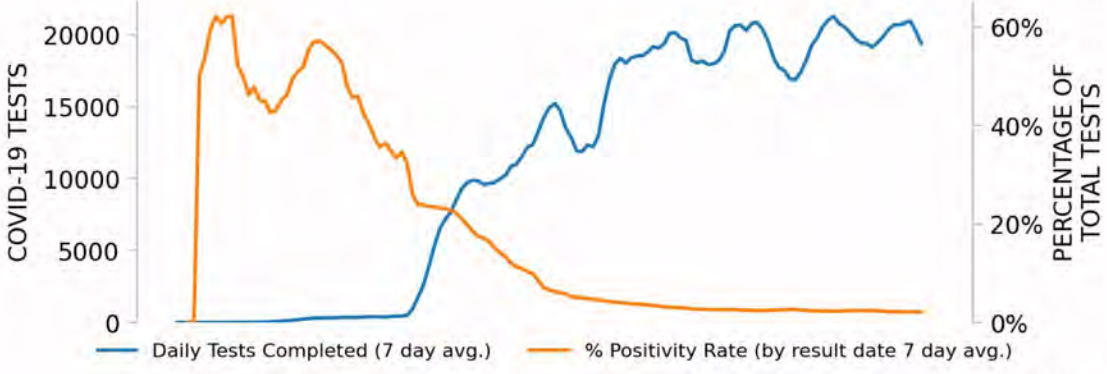
NEW JERSEY

STATE REPORT | 08.02.2020

NEW CASES

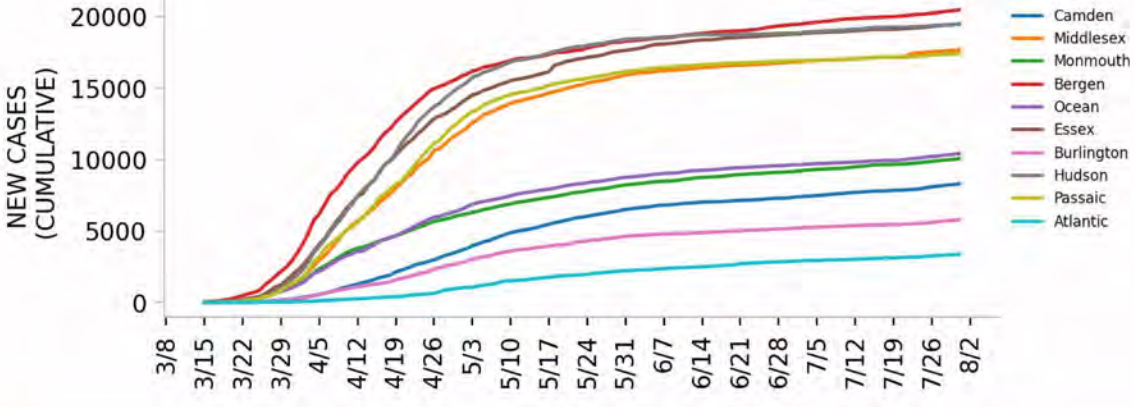


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

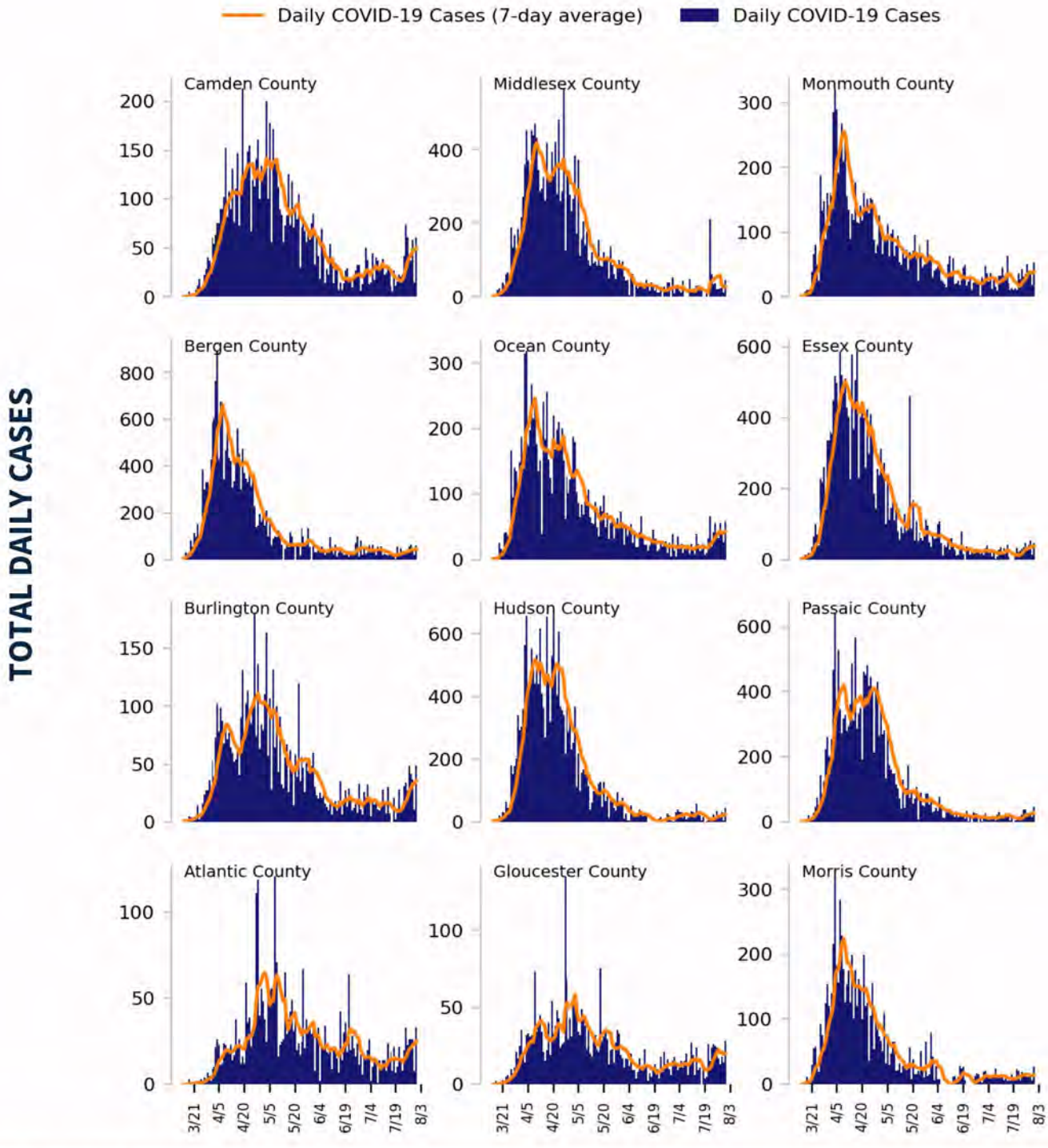


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

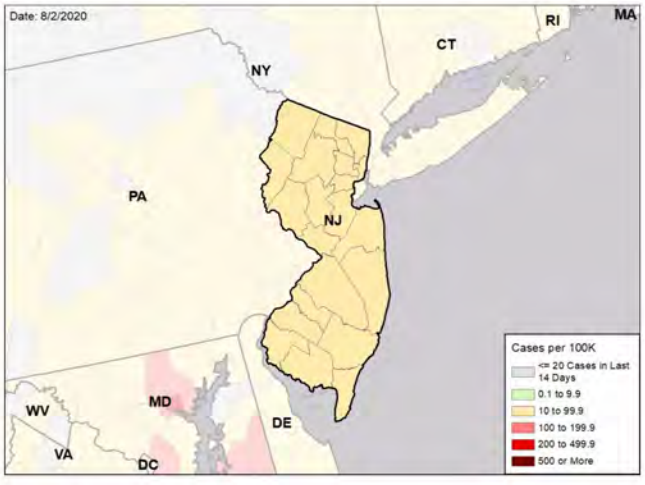
Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

NEW JERSEY

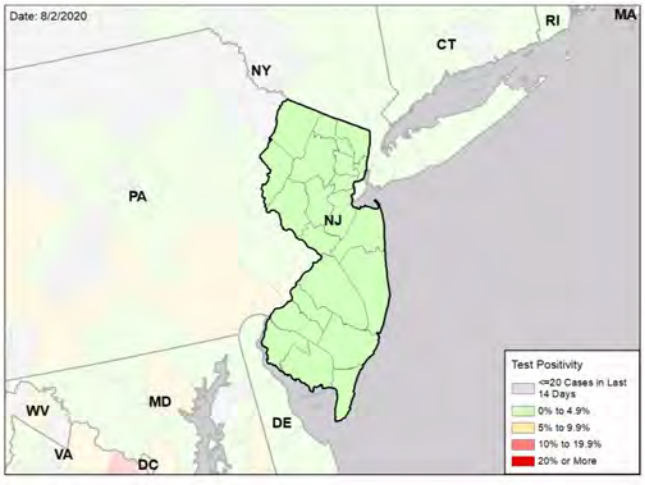
STATE REPORT | 08.02.2020

CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

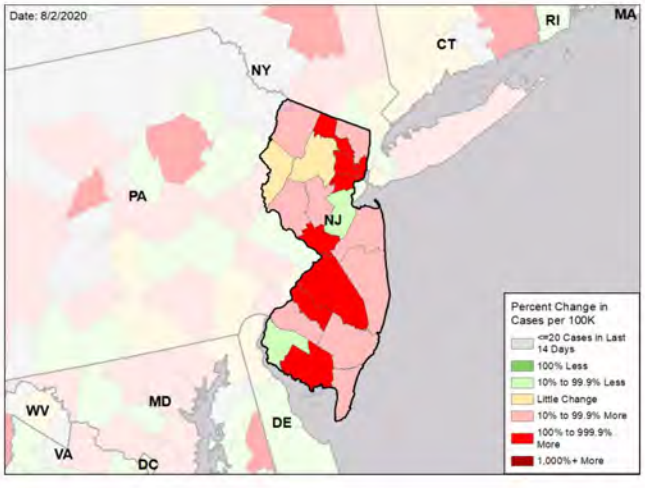
NEW CASES PER 100,000 DURING LAST WEEK



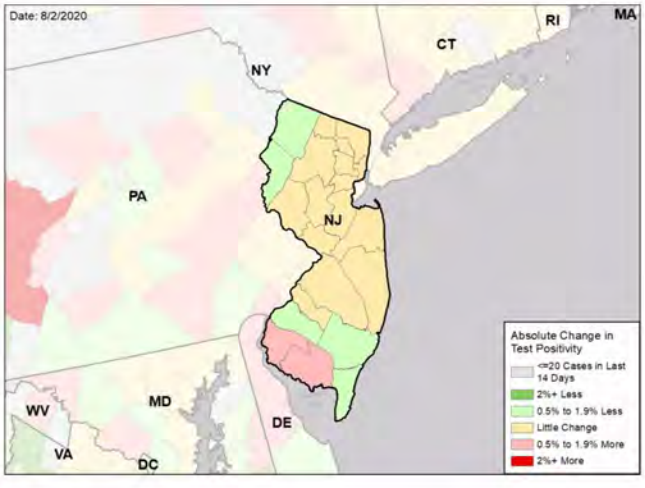
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



DATA SOURCES

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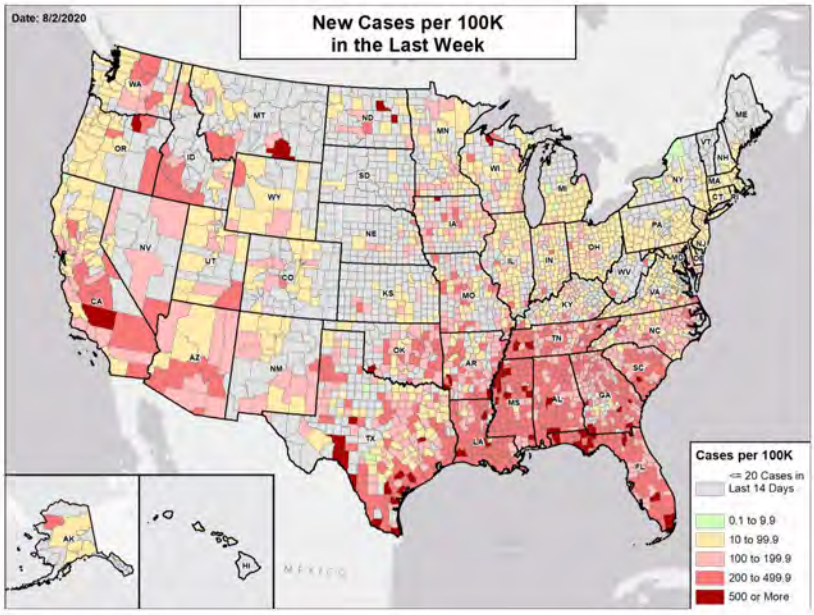
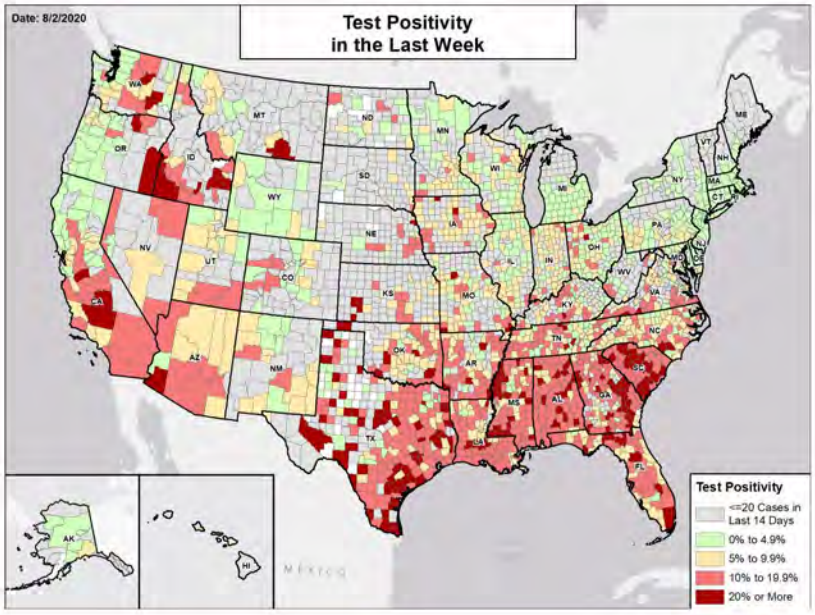
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

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Methods

STATE REPORT | 08.02.2020

COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
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NEW MEXICO

STATE REPORT | 08.02.2020

SUMMARY

- New Mexico has moved into the red zone for COVID-19 cases since last week, indicating more than 100 new cases per 100,000 population in the last 7 days. The state has also moved into the yellow zone for COVID-19 test positivity, indicating a rate between 5% to 10%.
- New Mexico has seen a continued high level of new cases, but testing positivity has remained stable over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Bernalillo County, 2. Doña Ana County, and 3. McKinley County. These counties represent 50.5 percent of new cases in New Mexico.
- There is significant community spread, especially in peri-urban areas and among Native American tribes.
- New Mexico had 101 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 8 to support operations activities from FEMA and 2 to support epidemiology activities from CDC.
- Between Jul 25 - Jul 31, on average, 15 patients with confirmed COVID-19 and 10 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in New Mexico. An average of 37 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Continue the statewide mask mandate.
- Expand testing through community centers and community outreach teams to ensure asymptomatic cases are found and isolated.
- New Mexico is an excellent state to conduct pooled testing in the large commercial laboratories to further expand community testing. Bring pooled testing online to provide rapid test expansion into institutions and specific situations, including in preparation for school and university opening.
- Continue to limit social gatherings to 5 people or fewer.
- Consider closing gyms or further restricting occupancy in areas with rising cases and test percent positivity.
- Encourage outdoor dining and ensure bars remain closed unless patrons can be outdoors and socially distanced.
- Require all universities with RNA detection platforms use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Tribal Nations: Encourage the continued enforcement of social distancing and masking measures in areas of increased transmission. Continue enhanced testing activities. Continue to enhance contact tracing and ensure that cases and contacts can quarantine or isolate safely. Monitor testing data to identify additional sites of increased transmission and ensure focused public health resources for these vulnerable communities.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

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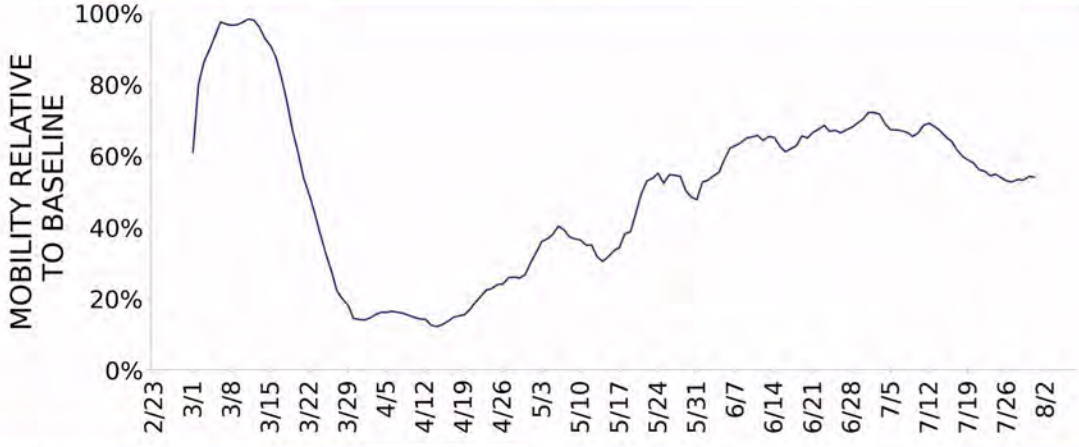
NEW MEXICO

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	2,126 (101)	+5.4%	87,300 (204)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	5.6%	+0.2%*	12.2%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	35,190** (1,678)	-4.7%**	317,760** (744)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	41 (2)	+13.9%	2,954 (7)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	17.2%	+0.8%*	21.6%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

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Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

NEW MEXICO

STATE REPORT | 08.02.2020

COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	2	Grants Ruidoso	10	Albuquerque Las Cruces Gallup Hobbs Farmington Clovis Roswell Carlsbad-Artesia Deming Portales
COUNTY LAST WEEK	2	Cibola Lincoln	11	Bernalillo Doña Ana McKinley Lea San Juan Curry Valencia Chaves Eddy Luna Roosevelt

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
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NEW MEXICO

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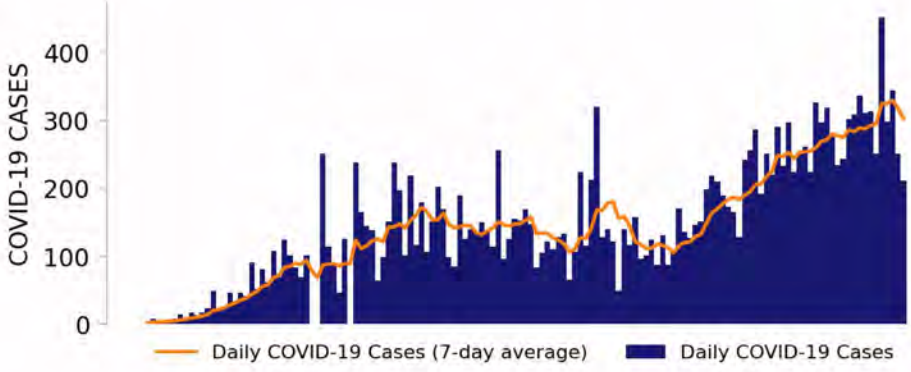
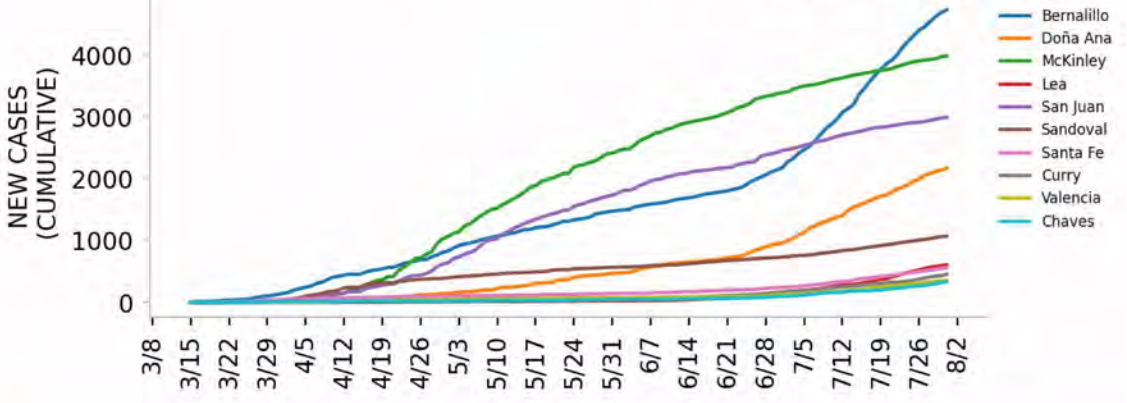
NEW CASES



TESTING

TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)



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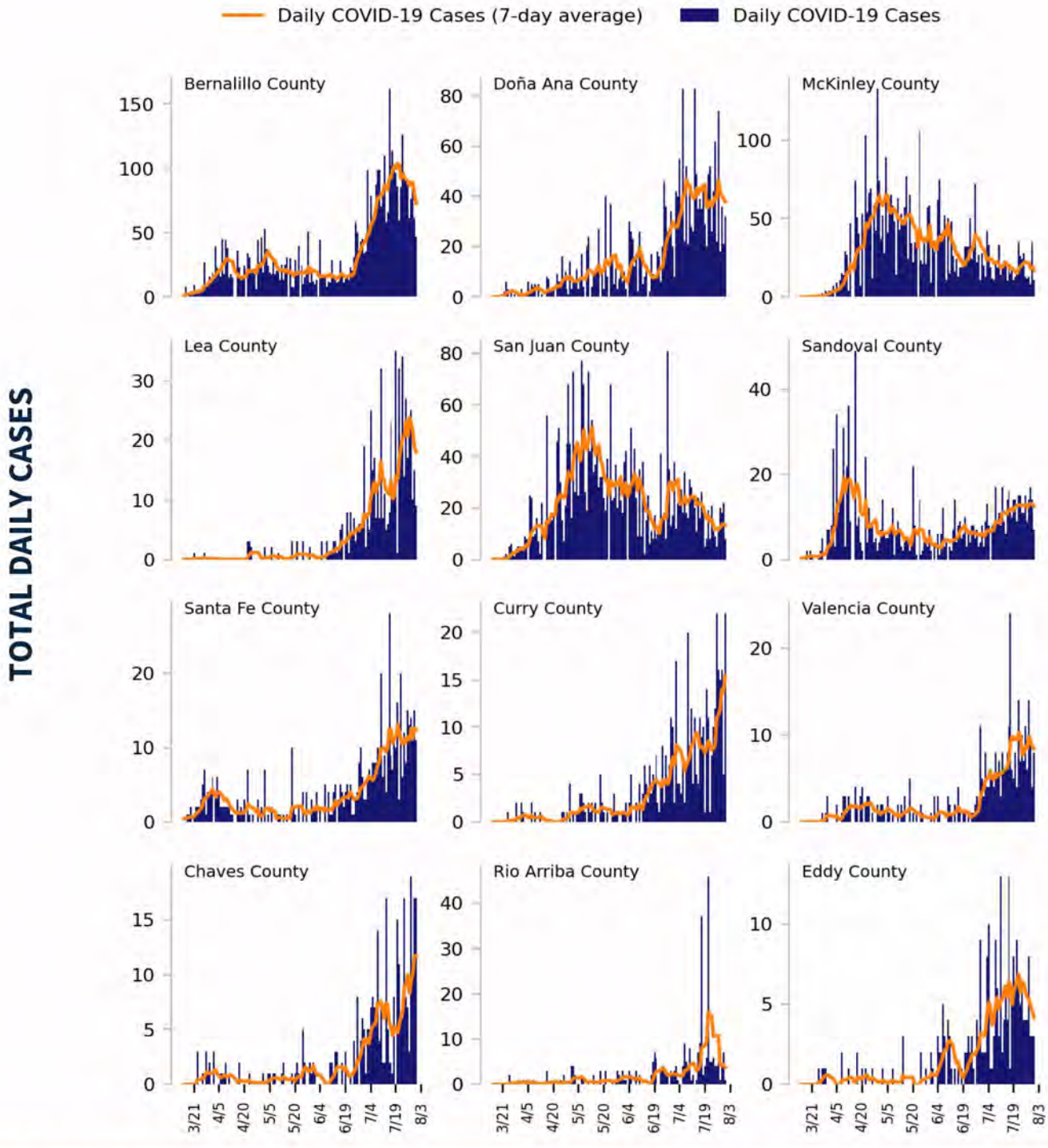
Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

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NEW MEXICO

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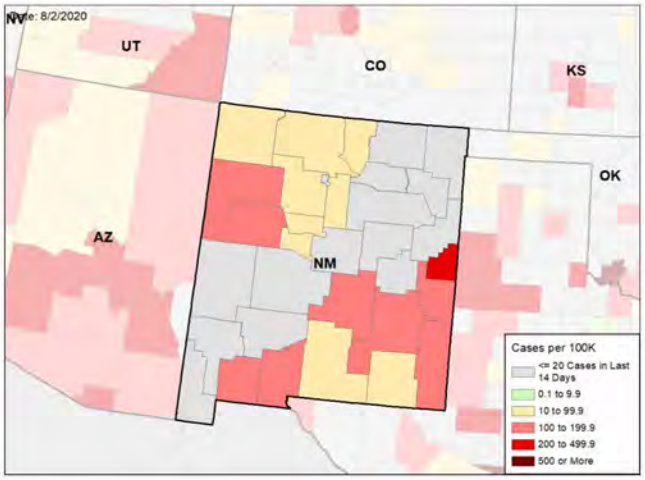
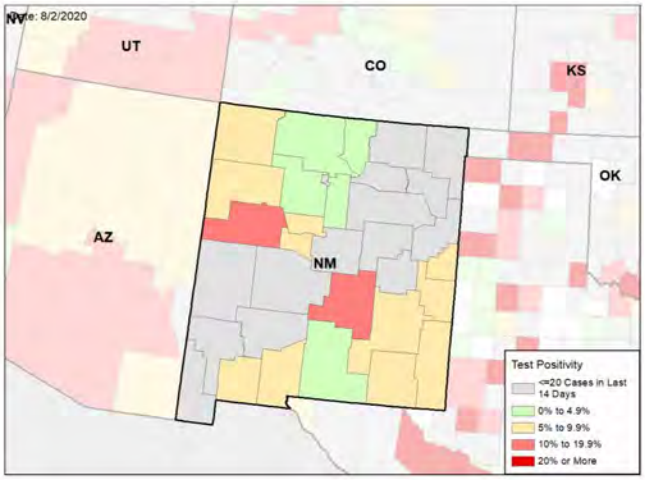
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

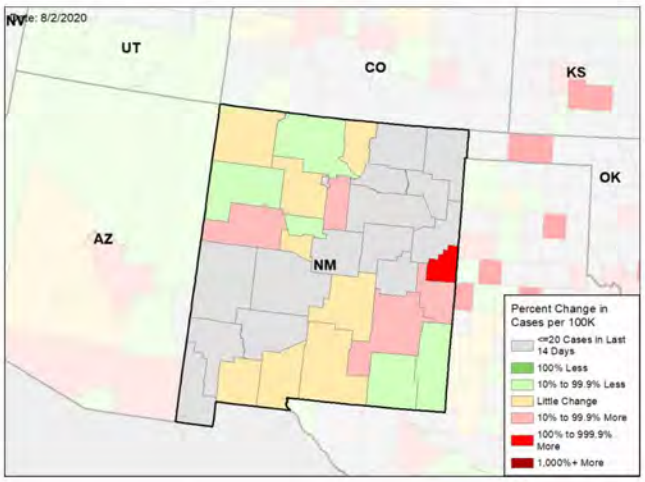
NEW CASES PER 100,000 DURING LAST WEEK



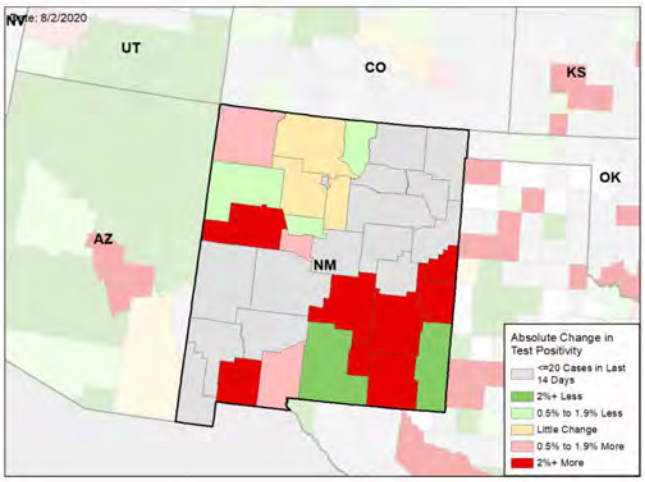
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



DATA SOURCES

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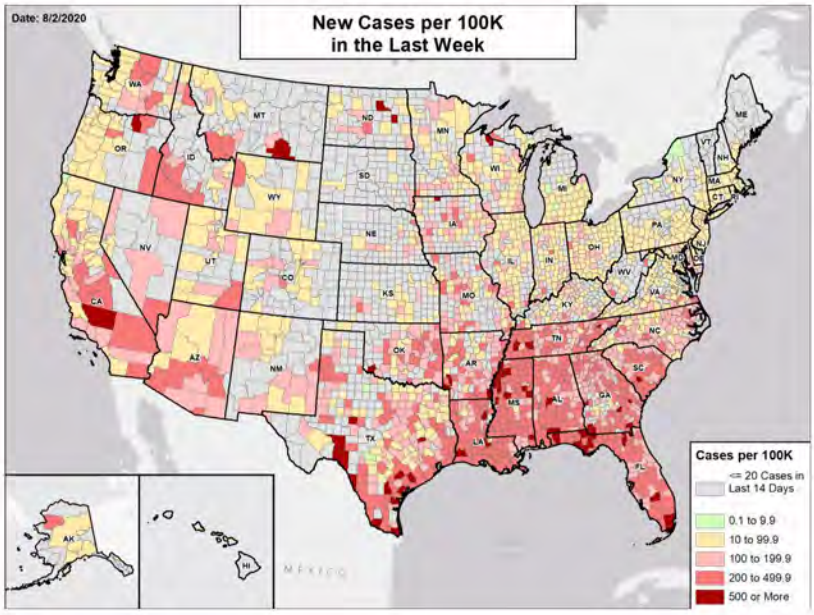
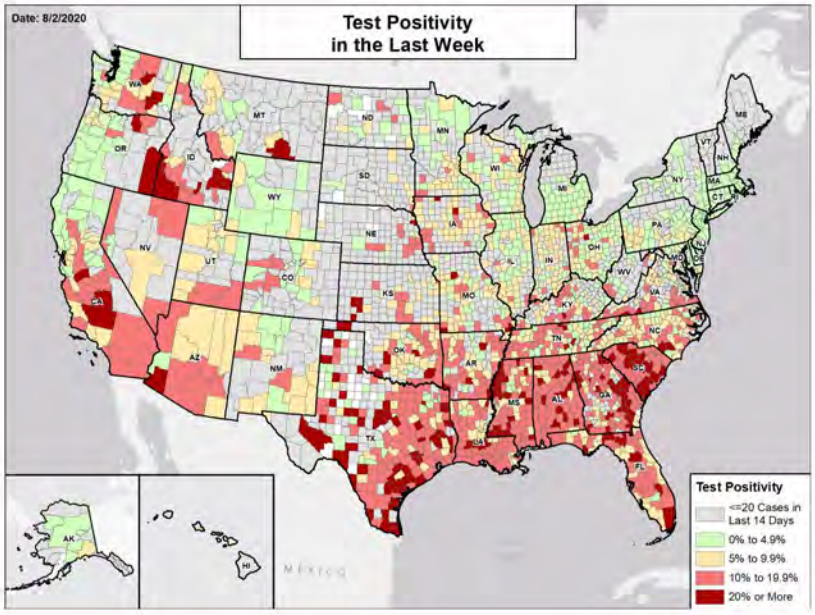
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

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COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

NEW YORK

STATE REPORT | 08.02.2020

SUMMARY

- New York is in the yellow zone for cases, indicating between 10 to 100 new cases per 100,000 population last week, and the green zone for test positivity, indicating a rate below 5%.
- New York has seen stability in new cases and stability in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Kings County, 2. Queens County, and 3. Bronx County. These counties represent 33.4 percent of new cases in New York.
- New York had 24 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 70 to support operations activities from FEMA; 3 to support operations activities from ASPR; 2 to support testing activities from CDC; 1 to support epidemiology activities from CDC; 20 to support operations activities from USCG; and 2 to support medical activities from VA.
- Between Jul 25 - Jul 31, on average, 75 patients with confirmed COVID-19 and 356 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in New York. An average of 82 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Continue to urge use of cloth face masks and 6 ft distancing for people outside of their homes, especially in all indoor environments.
- As public transportation expands and ridership increases, continue to educate and enforce social distancing, hand hygiene, and use of cloth face coverings or face masks.
- Continue active case investigation with contact tracing and early quarantine of contacts and isolation of cases. Intensify focus on populous areas with elevated or increasing transmission, such as Ulster, Broome, Herkimer, and Schenectady counties.
- Consider pooled testing as described below to increase access and reduce turnaround times. Consider pooled workplace testing for essential workers and pooled community testing for families and among demographic groups with demonstrated elevated risk.
- Maintain messaging of the risk of serious disease for older individuals and for individuals all age groups with preexisting medical conditions, including obesity, hypertension, and diabetes mellitus.
- Continue to track cases and case rates, test percent positivity, and hospitalizations closely at the county and city level. Follow tourist trends and surveillance signals closely for any increase in cases or test positivity during tourist season and respond early with restrictions and focused community mitigation efforts.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

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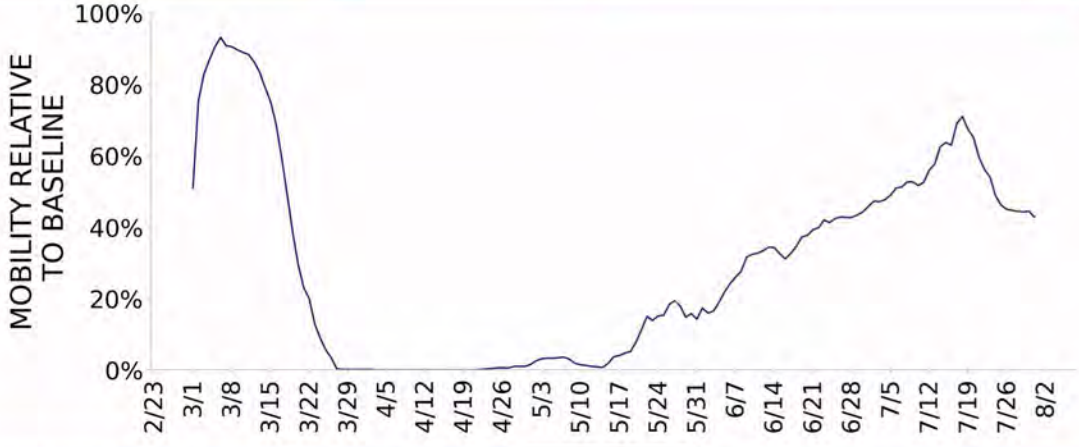
	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	4,576 (24)	-6.4%	7,891 (28)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	1.3%	-0.1%*	1.5%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	447,982** (2,303)	+3.9%**	583,832** (2,060)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	79 (0)	-46.3%	140 (0)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	5.0%	-2.7%*	5.7%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

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NEW YORK

STATE REPORT | 08.02.2020

COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	0	N/A
COUNTY LAST WEEK	0	N/A	0	N/A

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

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Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

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POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

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- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
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NEW YORK

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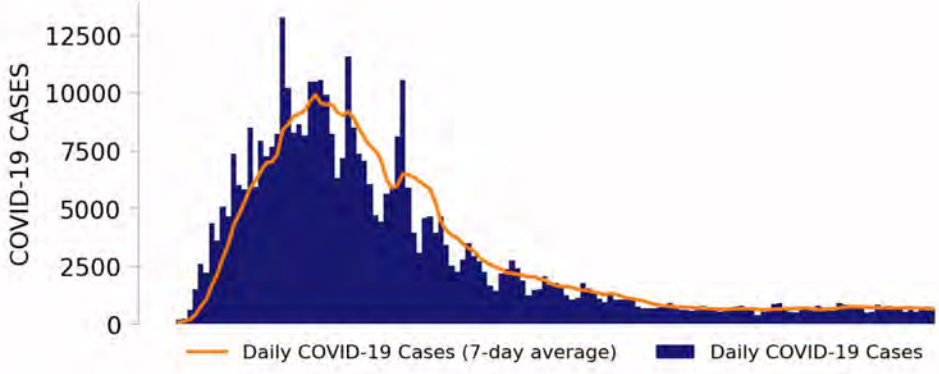
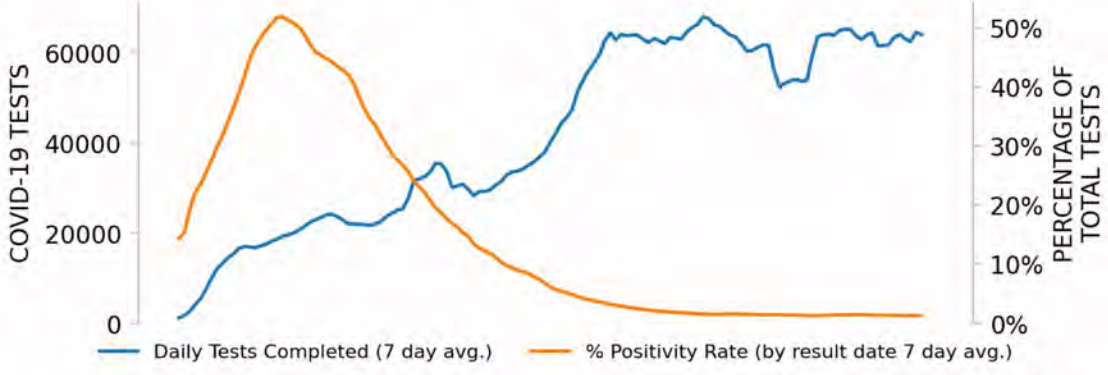
NEW CASES

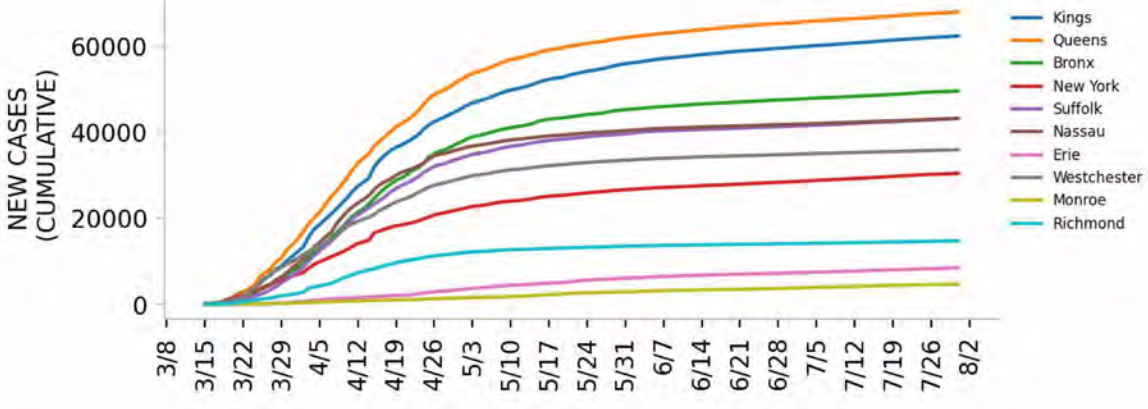


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)



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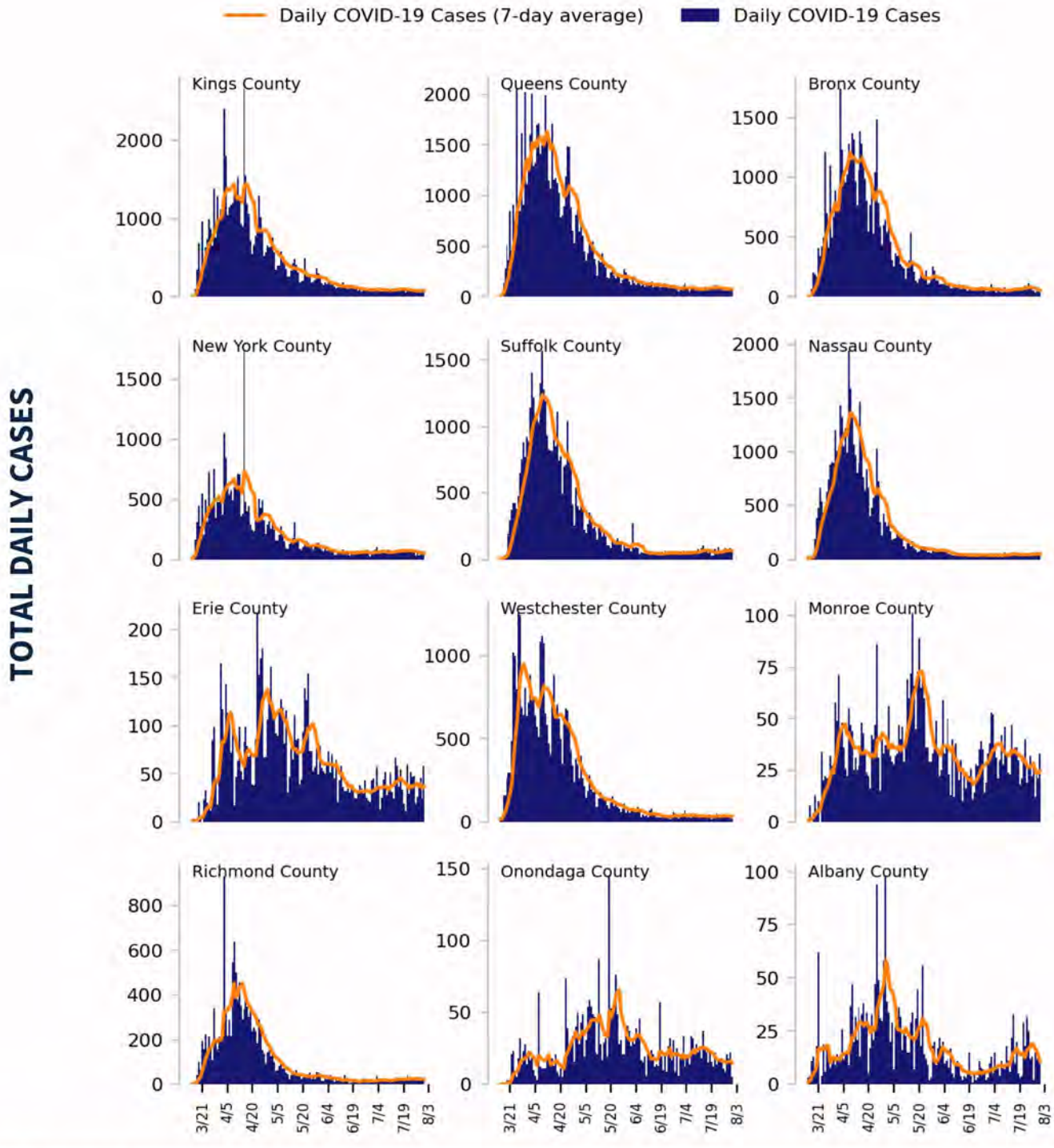
Top 12 counties based on number of new cases in the last 3 weeks



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NEW YORK

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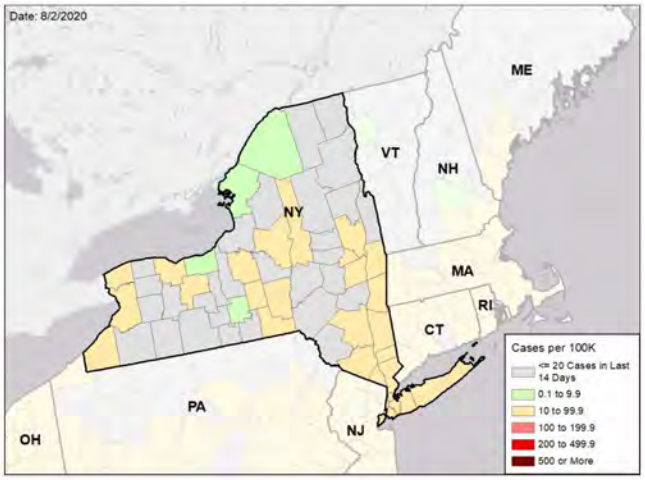
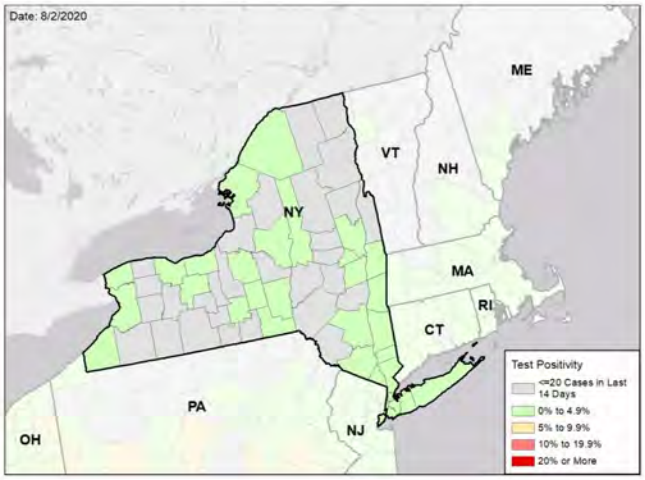
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

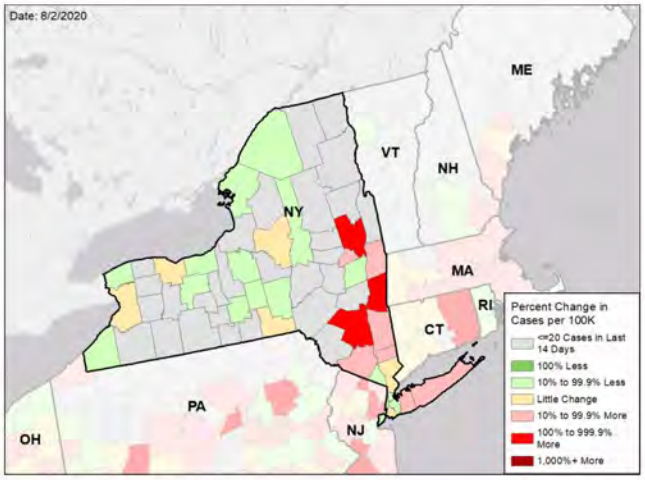
NEW CASES PER 100,000 DURING LAST WEEK



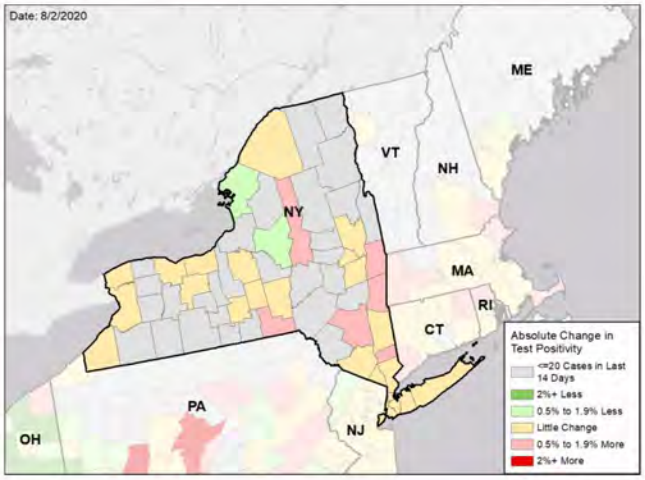
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

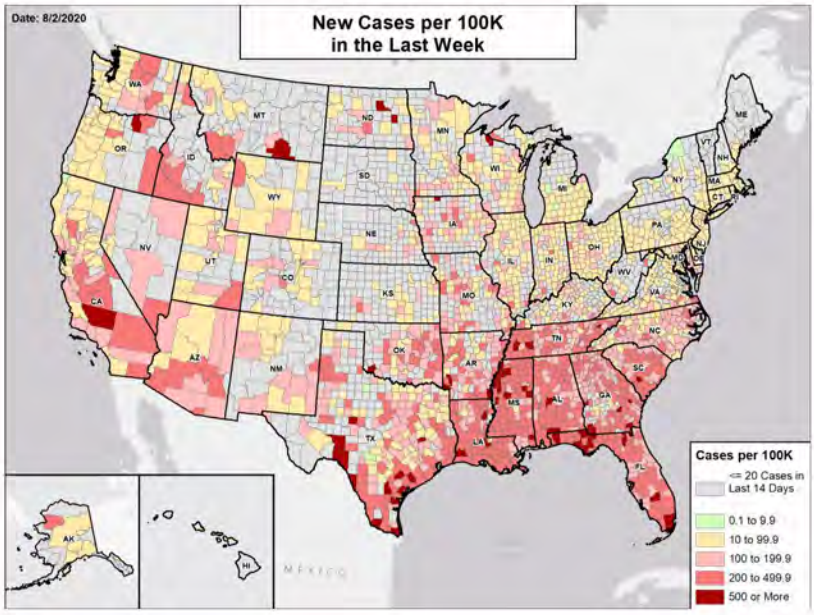


DATA SOURCES

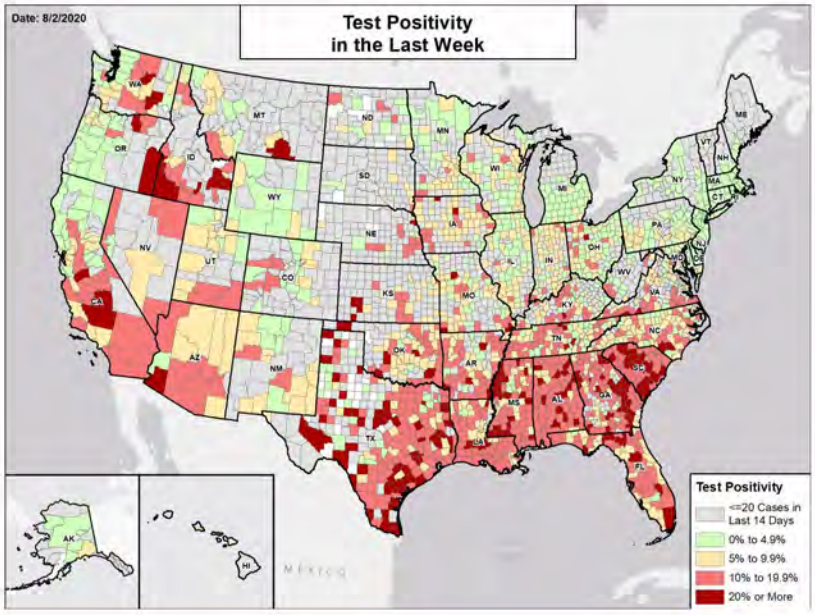
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



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Methods

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COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
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- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

NORTH CAROLINA

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SUMMARY

- North Carolina is in the red zone for cases, indicating more than 100 new cases per 100,000 population last week, and the yellow zone for test positivity, indicating a rate between 5% to 10%.
- North Carolina has seen stability in new cases and stability in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Mecklenburg County, 2. Wake County, and 3. Guilford County. These counties represent 29.3 percent of new cases in North Carolina.
- North Carolina had 125 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 3 to support operations activities from FEMA; 4 to support epidemiology activities from CDC; 7 to support operations activities from USCG; and 2 to support medical activities from VA.
- Between Jul 25 - Jul 31, on average, 123 patients with confirmed COVID-19 and 358 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in North Carolina. An average of 89 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Emphasize social distancing and requirements for face mask use with frequent PSAs and public outreach, especially in yellow- and red-zone counties or counties with evidence of increasing transmission. Monitor adherence closely and consider enforcement with fines for violations.
- Increase messaging of the risk of serious disease in the elderly and in all age groups with preexisting medical conditions, including obesity, hypertension, and diabetes mellitus.
- Increase public health messaging on face mask policy to all touristed counties, especially beachfront and mountain communities. Consider "beach ambassadors" to reinforce appropriate social distancing and use of masks.
- Recommend strict adherence to guidance below for all yellow- and red-zone counties, closing public indoor spaces as needed to reduce transmission.
- Monitor case rates and test positivity closely and ensure vigorous contact tracing, with early quarantine and isolation, especially in populous areas with increasing transmission, such as Mecklenburg, Robeson, and Cumberland counties.
- Ensure all public health labs are staffed and running 24/7, utilizing all platforms to reduce turnaround times. Institute pooling of test specimens on all high throughput machines as long as turnaround times are greater than 36 hours. For families and cohabiting households, screen entire households in a single test by pooling specimens.
- Require all universities with suitable platforms to use their equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

COVID-19

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	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	13,162 (125)	-2.5%	158,298 (237)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	8.8%	-0.2%*	13.6%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	173,814** (1,657)	-2.1%**	1,078,189** (1,611)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	178 (2)	+27.1%	2,494 (4)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	11.6%	-0.5%*	22.5%	12.3%

MOBILITY

* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	**15** Top 12 shown (full list below)	Charlotte-Concord-Gastonia Hickory-Lenoir-Morganton Fayetteville Wilmington Lumberton Jacksonville Myrtle Beach-Conway-North Myrtle Beach Roanoke Rapids Albemarle Mount Airy Marion Cullowhee	**21** Top 12 shown (full list below)	Raleigh-Cary Greensboro-High Point Durham-Chapel Hill Winston-Salem Asheville Greenville Burlington Rocky Mount Shelby Wilson Pinehurst-Southern Pines Forest City
COUNTY LAST WEEK	**27** Top 12 shown (full list below)	Mecklenburg Gaston Cumberland Johnston Robeson New Hanover Randolph Onslow Burke Stanly Surry Duplin	**52** Top 12 shown (full list below)	Wake Guilford Durham Forsyth Union Cabarrus Pitt Buncombe Alamance Catawba Iredell Henderson

All Red CBSAs: Charlotte-Concord-Gastonia, Hickory-Lenoir-Morganton, Fayetteville, Wilmington, Lumberton, Jacksonville, Myrtle Beach-Conway-North Myrtle Beach, Roanoke Rapids, Albemarle, Mount Airy, Marion, Cullowhee, Sanford, Washington, Virginia Beach-Norfolk-Newport News

All Yellow CBSAs: Raleigh-Cary, Greensboro-High Point, Durham-Chapel Hill, Winston-Salem, Asheville, Greenville, Burlington, Rocky Mount, Shelby, Wilson, Pinehurst-Southern Pines, Forest City, Morehead City, Henderson, Elizabeth City, Rockingham, North Wilkesboro, Kinston, Kill Devil Hills, Laurinburg, Brevard

All Red Counties: Mecklenburg, Gaston, Cumberland, Johnston, Robeson, New Hanover, Randolph, Onslow, Burke, Stanly, Surry, Duplin, McDowell, Halifax, Lee, Hoke, Beaufort, Montgomery, Bladen, Davie, Yadkin, Greene, Hertford, Chowan, Martin, Clay, Jones

All Yellow Counties: Wake, Guilford, Durham, Forsyth, Union, Cabarrus, Pitt, Buncombe, Alamance, Catawba, Iredell, Rowan, Henderson, Caldwell, Cleveland, Wilson, Brunswick, Davidson, Nash, Lincoln, Harnett, Franklin, Moore, Pender, Rutherford, Granville, Sampson, Jackson, Craven, Edgecombe, Chatham, Cherokee, Carteret, Vance, Haywood, Richmond, Macon, Wilkes, Alexander, Pasquotank, Lenoir, Dare, Scotland, Stokes, Northampton, Transylvania, Washington, Warren, Ashe, Currituck, Swain, Alleghany

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
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- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

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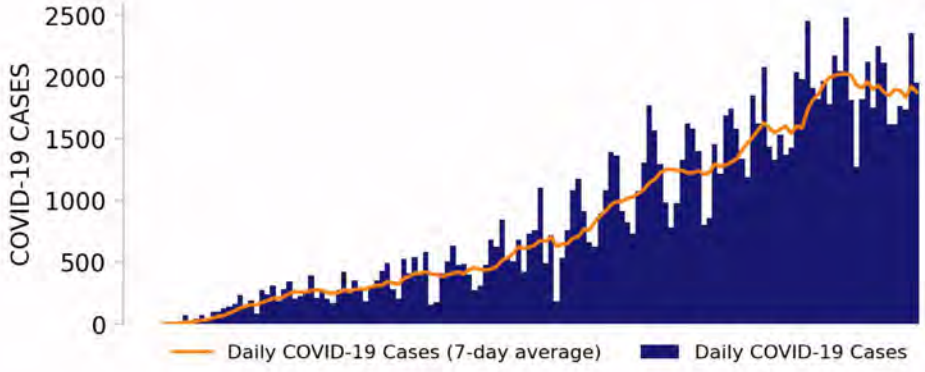
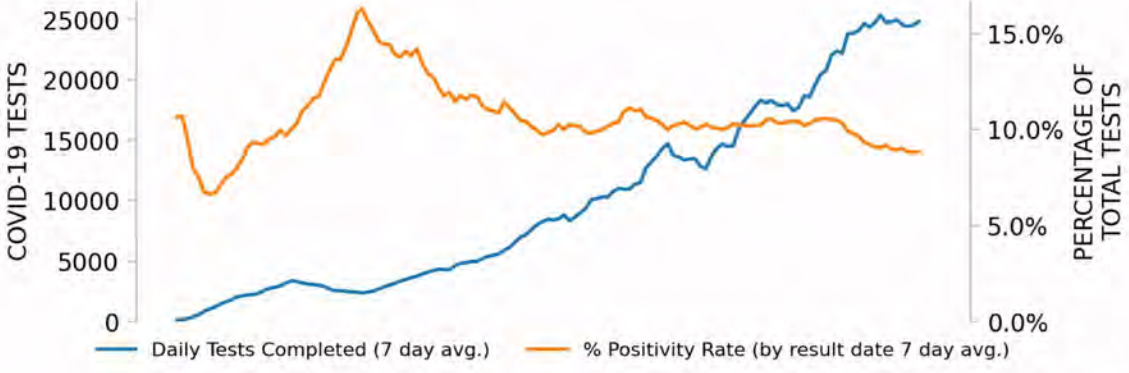
NEW CASES

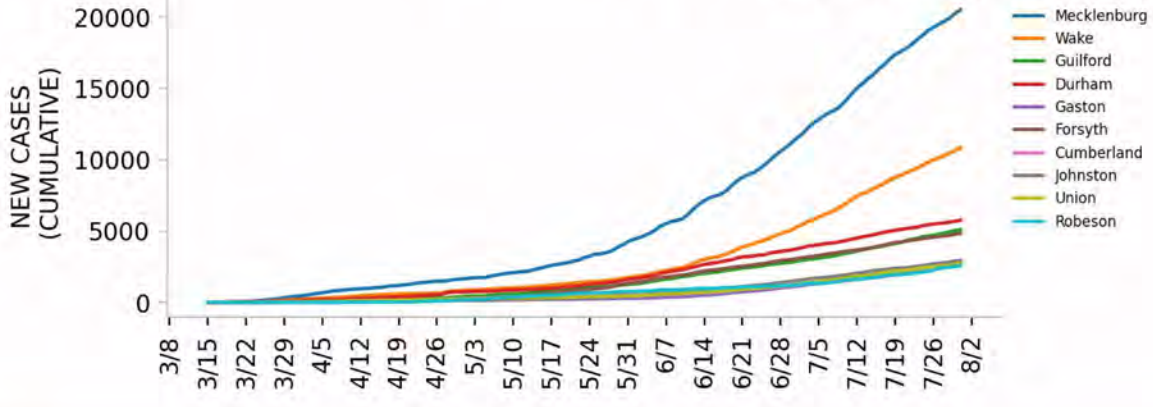


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)



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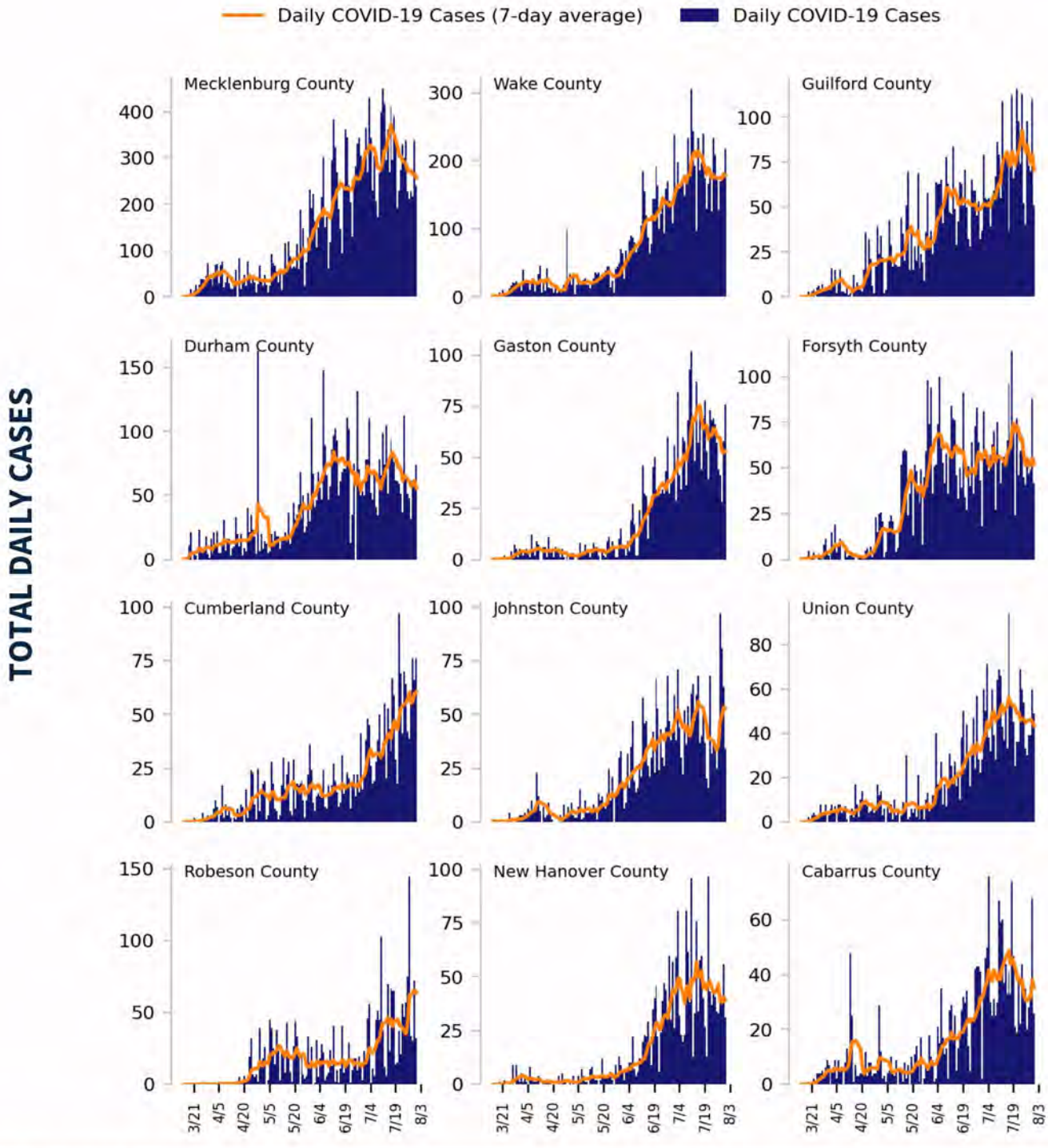
Top 12 counties based on number of new cases in the last 3 weeks



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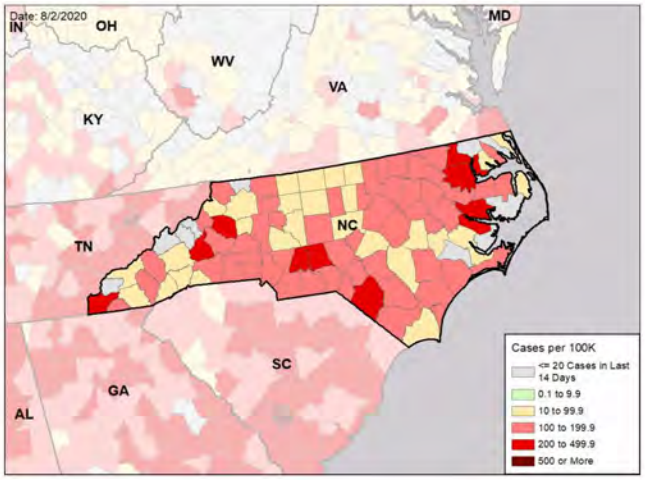
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

NEW CASES PER 100,000 DURING LAST WEEK



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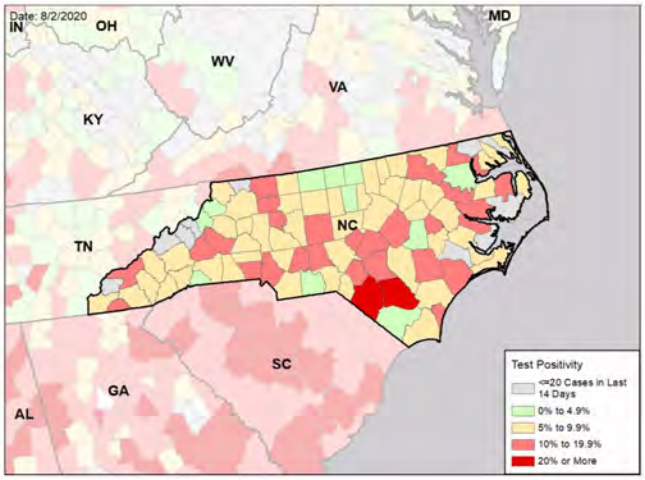
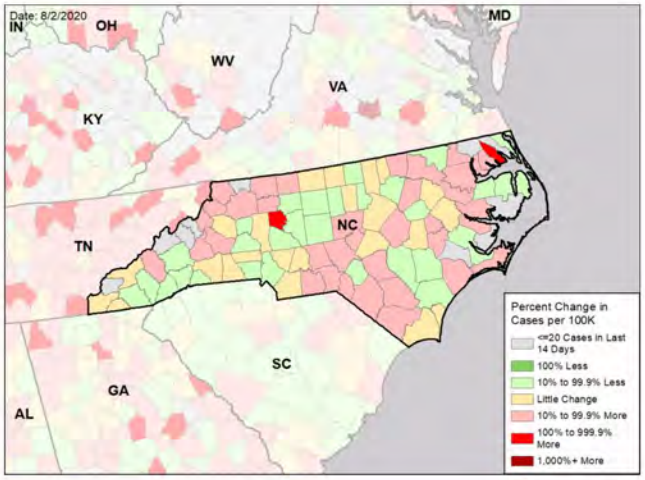
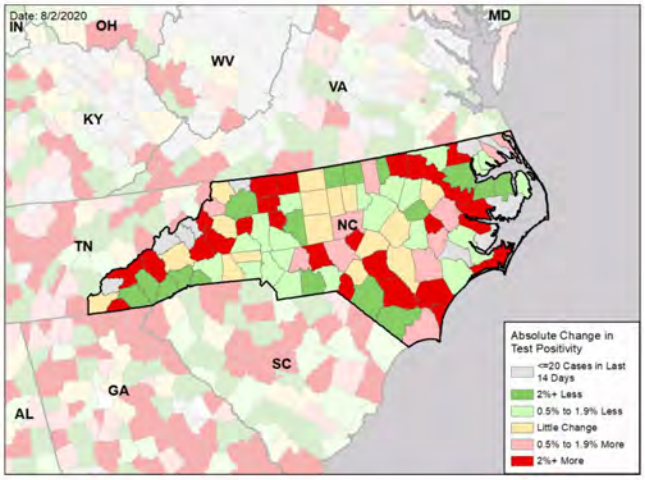


WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



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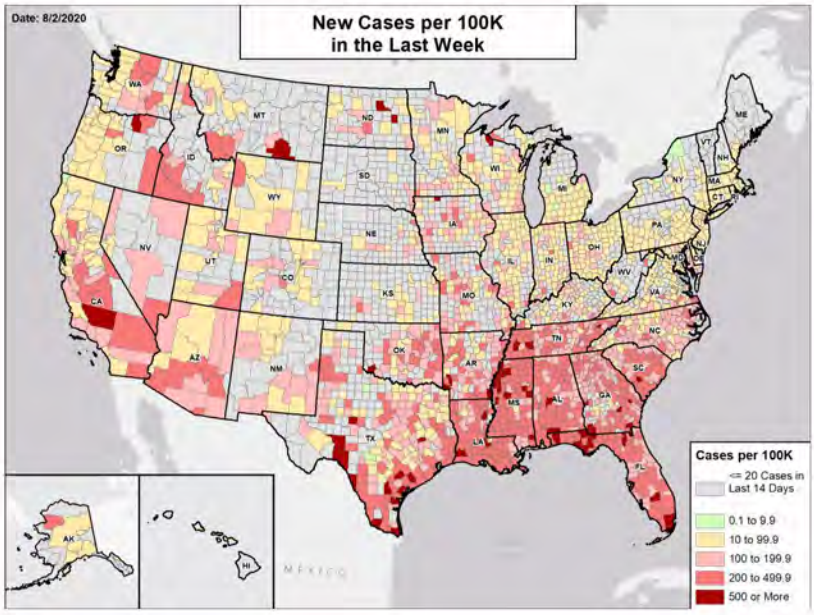

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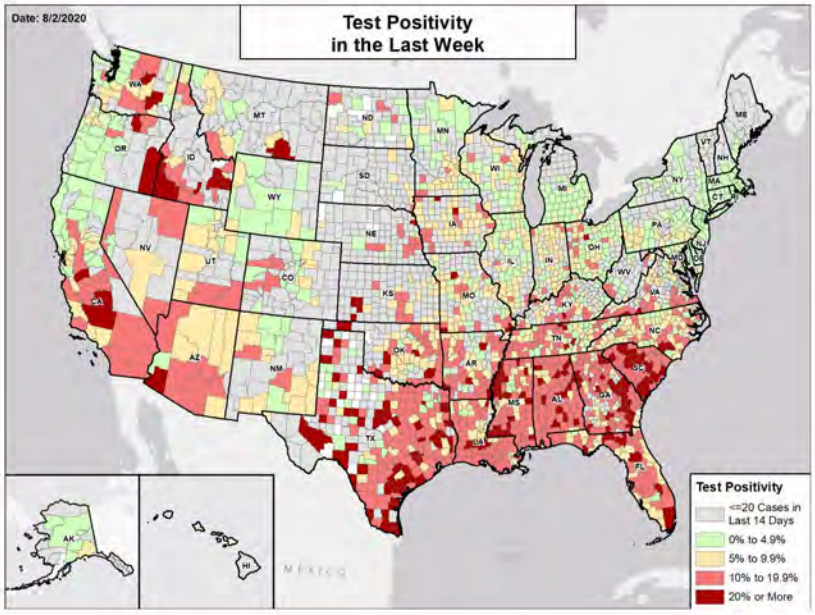

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Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

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- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

NORTH DAKOTA

STATE REPORT | 08.02.2020

SUMMARY

- North Dakota remains in the red zone for cases, indicating more than 100 new cases per 100,000 population last week, and in the green zone for test positivity, indicating a rate below 5%.
- North Dakota has seen stability in new cases and stability in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Burleigh County, 2. Cass County, and 3. Grand Forks County. These counties are the urban centers and represent 50.9 percent of new cases in North Dakota.
- However, cases also continued to be reported from most counties in North Dakota last week. Among counties with elevated incidence in the week to July 25, the counties west of Minot along US-2 reported declines last week while Benson County reported a sharp increase.
- North Dakota had 112 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- Between Jul 25 - Jul 31, on average, 9 patients with confirmed COVID-19 and 12 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in North Dakota. An average of 64 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Consider restrictions on occupancy and operating hours of bars and restaurants, and on gathering sizes in counties with sustained increases in cases.
- Continue scale-up of contact tracing.
- Continue intensive testing as is currently being conducted and monitor testing data to identify additional sites of increased transmission and focus public health resources on them. The creation of a taskforce for the Bismarck area is noted and commended.
- Continue weekly testing of all workers in assisted living and long-term care facilities and require masks and social distancing for all visitors.
- Protect those in nursing homes and long-term care facilities by ensuring access to rapid facility-wide testing in response to a resident or staff member with COVID-19. Address staff and supply shortages. Ensure social distancing and universal facemask use.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

NORTH DAKOTA

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	856 (112)	+4.0%	9,748 (80)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	3.8%	+0.5%*	5.7%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	31,352** (4,114)	-8.9%**	205,390** (1,675)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	4 (1)	-55.6%	102 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	10.3%	+5.2%*	4.7%	12.3%

MOBILITY

* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

NORTH DAKOTA

STATE REPORT | 08.02.2020

COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	4	Bismarck Williston Dickinson Wahpeton
COUNTY LAST WEEK	2	Benson Griggs	4	Burleigh Williams Stark Richland

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

NORTH DAKOTA

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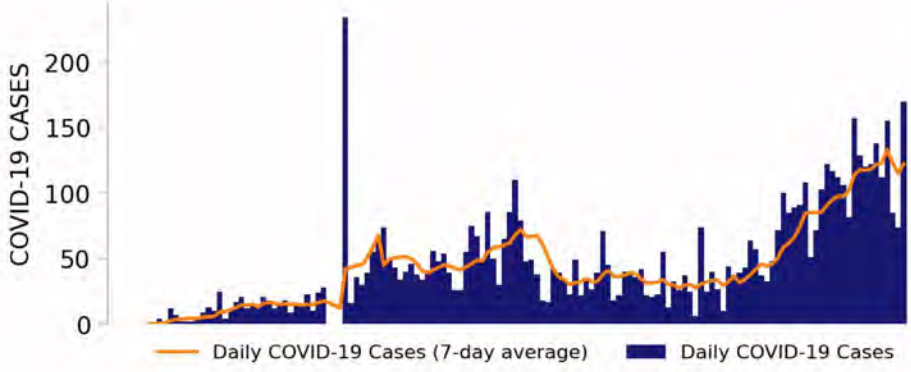
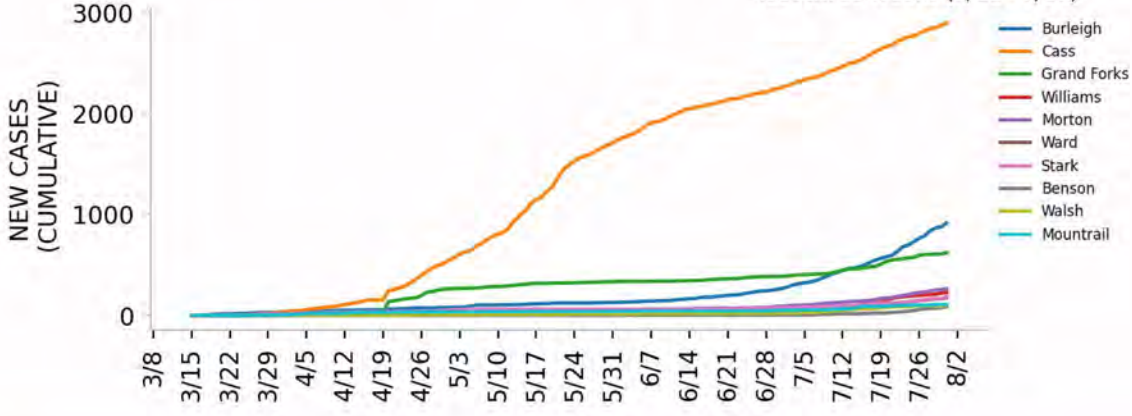
NEW CASES



TESTING

TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

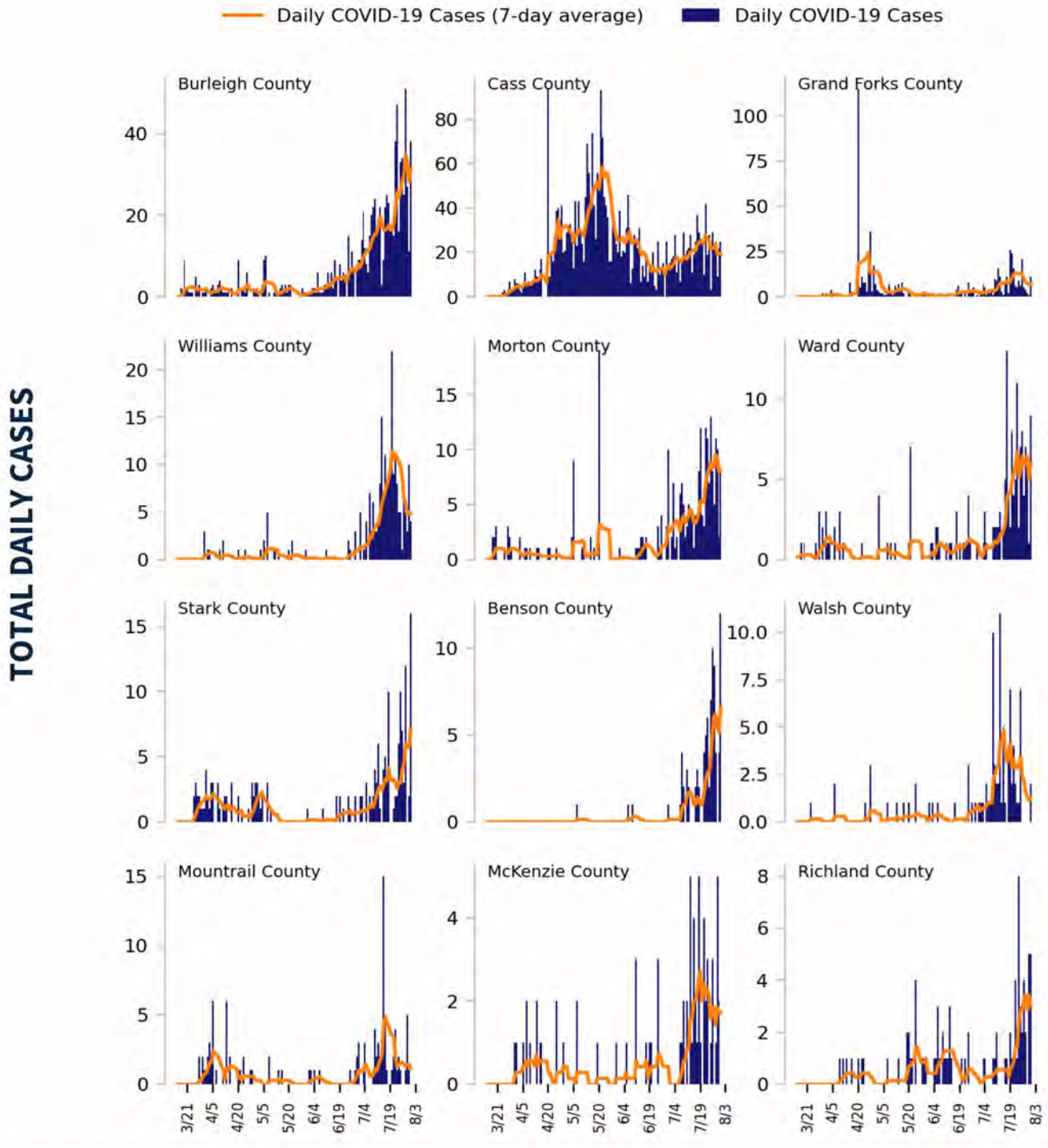


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

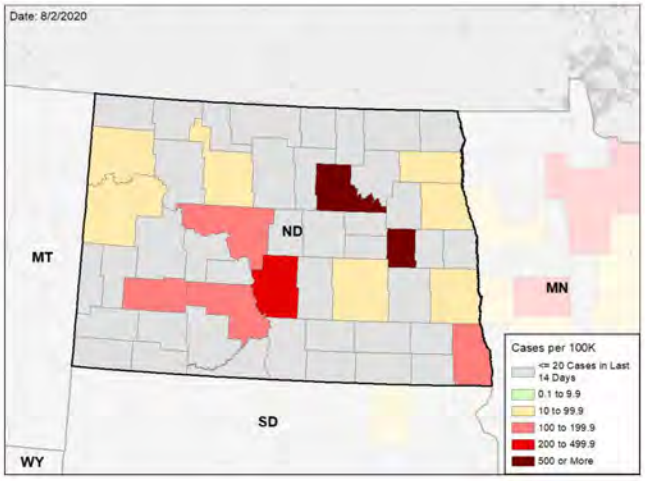
Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

NORTH DAKOTA

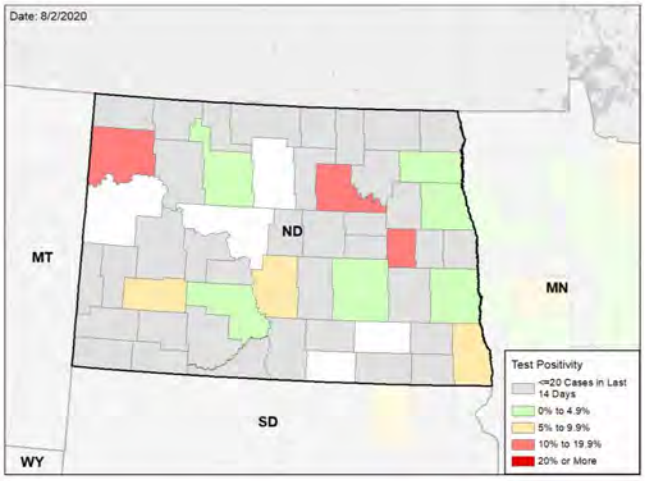
STATE REPORT | 08.02.2020

CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

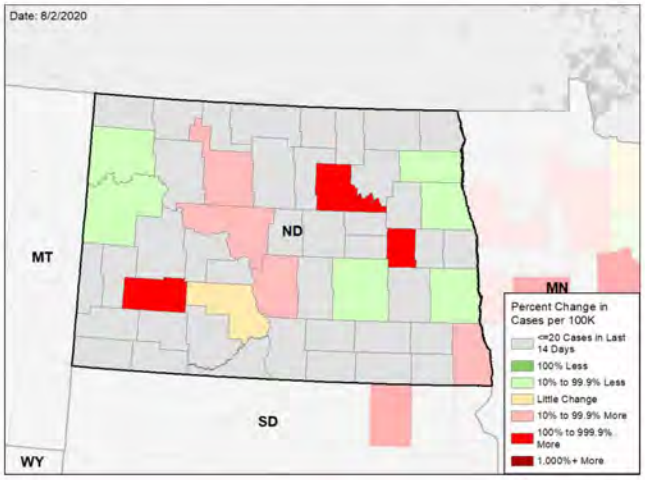
NEW CASES PER 100,000 DURING LAST WEEK



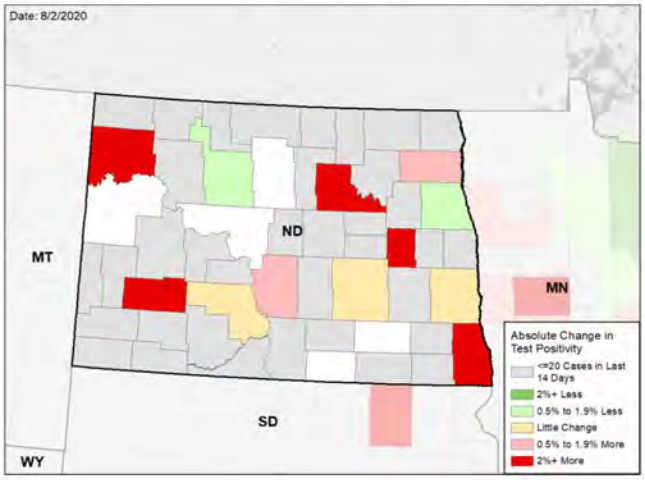
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

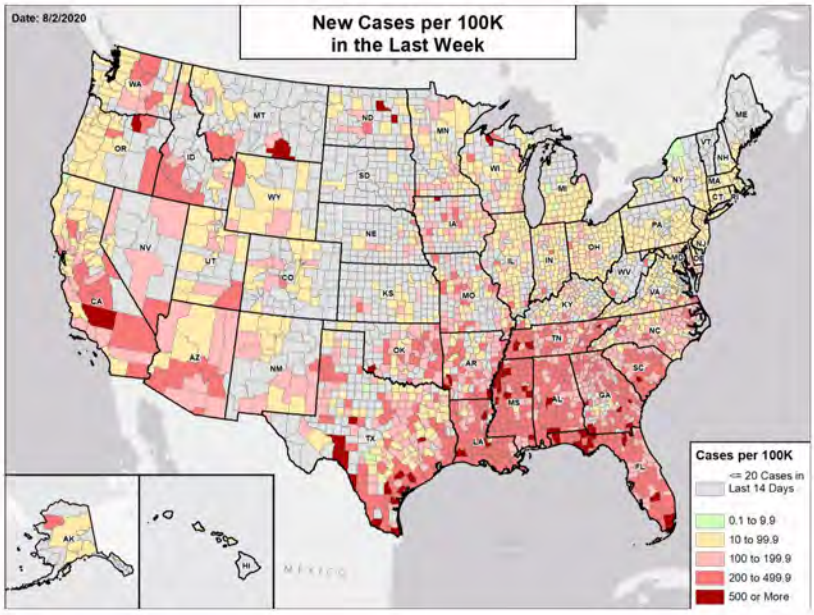


DATA SOURCES

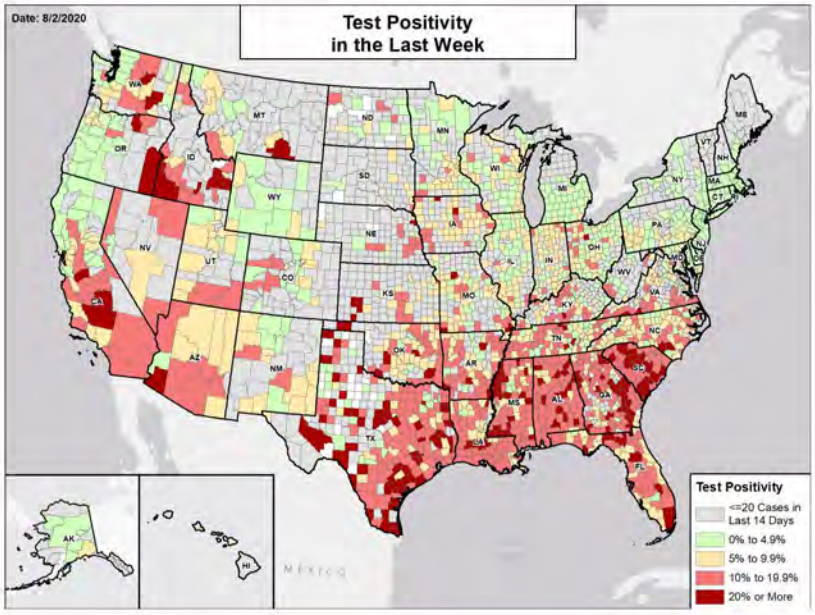
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
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Methods

STATE REPORT | 08.02.2020

COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
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- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

OHIO

STATE REPORT | 08.02.2020

SUMMARY

- Ohio is in the yellow zone for COVID-19 cases, indicating between 10 to 100 new cases per 100,000 population last week, and the yellow zone for COVID-19 test positivity, indicating a rate between 5% to 10%. With aggressive mitigation, Ohio can avoid moving into the red COVID zone.
- Ohio has seen stability in new cases and stability in testing positivity over the past week, showing early success of mitigation efforts.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Franklin County, 2. Cuyahoga County, and 3. Hamilton County. These counties represent 40.4 percent of new cases in Ohio.
- There is widespread community transmission throughout the state, which is currently mostly concentrated in urban and peri-urban areas, with some evidence of rural spread.
- Ohio had 81 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 11 to support operations activities from FEMA; 1 to support operations activities from ASPR; and 4 to support operations activities from USCG.
- Between Jul 25 - Jul 31, on average, 146 patients with confirmed COVID-19 and 476 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Ohio. An average of 74 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Continue protecting those in nursing homes, assisted living facilities, and long-term care facilities by ensuring access to rapid facility-wide testing in response to a resident or staff member with COVID-19. Ensure social distancing and universal facemask use.
- Continue the statewide mask mandate.
- Close establishments where social distancing and mask use cannot occur, such as bars, nightclubs, and entertainment venues in hotspots.
- Move to outdoor dining and limit indoor dining to less than 25% of normal capacity in hot spots.
- Ask citizens to limit social gatherings to fewer than 10 people.
- Encourage individuals that have participated in any large social gatherings to get tested.
- Increase messaging of the risk of serious disease in all age groups with preexisting medical conditions, including obesity, hypertension, and diabetes mellitus.
- Continue the scale-up of testing, moving to community-led neighborhood testing, ensuring asymptomatic cases are identified. Work with local communities to implement and provide clear guidance for households that test positive, including on individual isolation and quarantining procedures.
- Ohio has an excellent Public Health advisory system based on clear metrics. This is an excellent best practice that we are sharing with others.
- Continue to enhance contact tracing and ensure the ability of cases and contacts to quarantine or isolate safely.
- Continue to monitor testing data to identify additional sites of increased transmission and focus public health resources on them.
- Ensure every public health lab is fully staffed and running 24/7, utilizing all platforms to reduce turnaround times. Institute 4:1 pooling of test specimens on all high throughput machines as long as turnaround times are greater than 36 hours. For families and cohabiting households, screen entire households in a single test by pooling specimens.
- Require all universities with RNA detection platforms to use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

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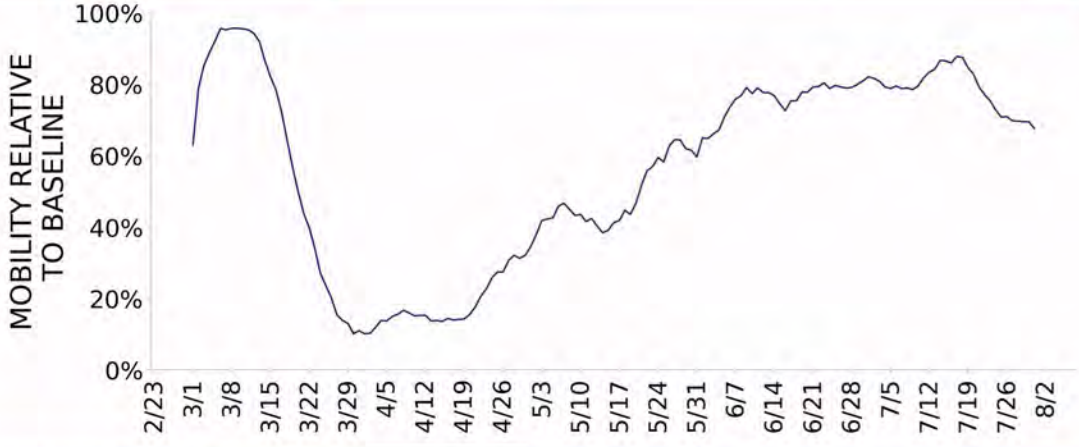
OHIO

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	9,413 (81)	-0.6%	41,885 (80)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	6.1%	-0.4%*	5.4%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	158,683** (1,358)	+3.3%**	945,428** (1,799)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	194 (2)	+6.0%	548 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	8.0%	+1.6%*	6.5%	12.3%

MOBILITY



* Indicates absolute change in percentage points.
** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

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SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

OHIO

STATE REPORT | 08.02.2020

COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	2	Lima Chillicothe	19 Top 12 shown (full list below)	Columbus Cleveland-Elyria Cincinnati Toledo Dayton-Kettering Findlay Salem Celina New Philadelphia-Dover Norwalk Portsmouth Mount Vernon
COUNTY LAST WEEK	5	Wood Allen Miami Ross Wyandot	33 Top 12 shown (full list below)	Franklin Cuyahoga Lucas Montgomery Butler Warren Fairfield Licking Delaware Lake Trumbull Greene

All Yellow CBSAs: Columbus, Cleveland-Elyria, Cincinnati, Toledo, Dayton-Kettering, Findlay, Salem, Celina, New Philadelphia-Dover, Norwalk, Portsmouth, Mount Vernon, Weirton-Steubenville, Sidney, Defiance, Greenville, Urbana, Washington Court House, Point Pleasant

All Yellow Counties: Franklin, Cuyahoga, Lucas, Montgomery, Butler, Warren, Fairfield, Licking, Delaware, Lake, Trumbull, Greene, Hancock, Columbiana, Mercer, Tuscarawas, Huron, Pickaway, Scioto, Knox, Shelby, Defiance, Preble, Fulton, Highland, Henry, Holmes, Darke, Putnam, Champaign, Pike, Fayette, Paulding

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
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OHIO

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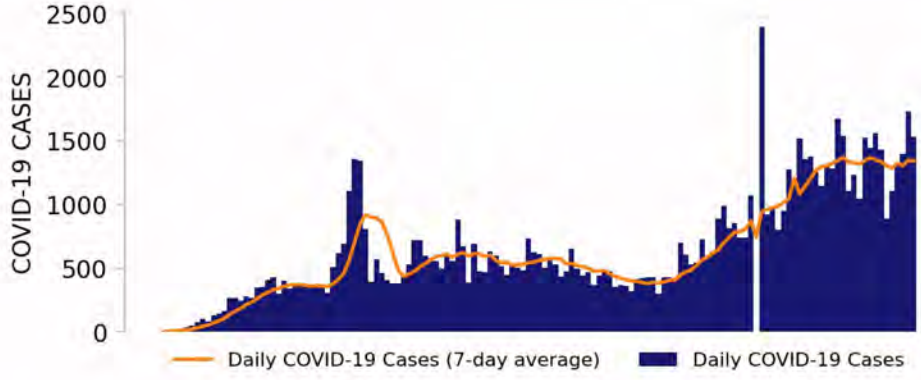
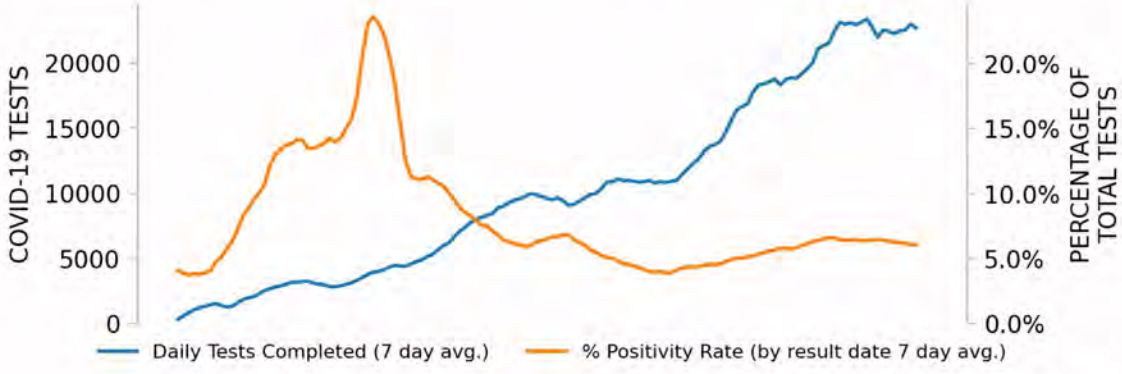
NEW CASES

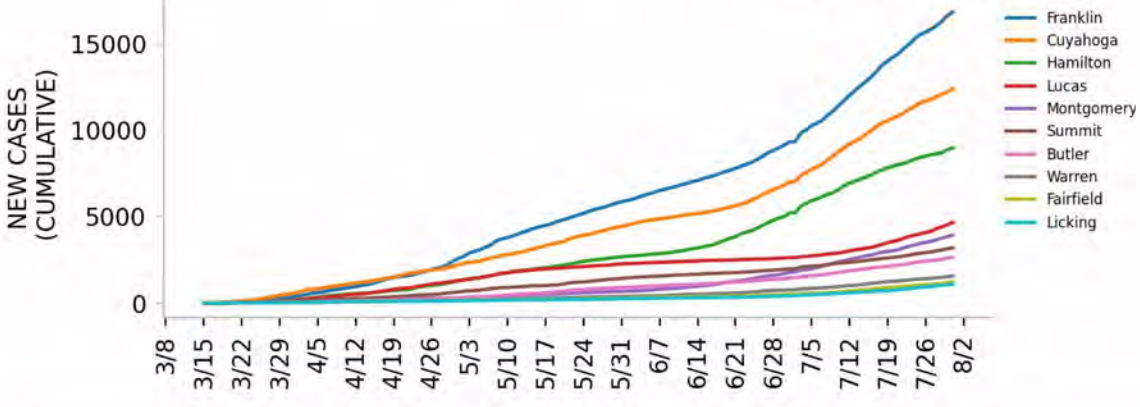


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)



DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

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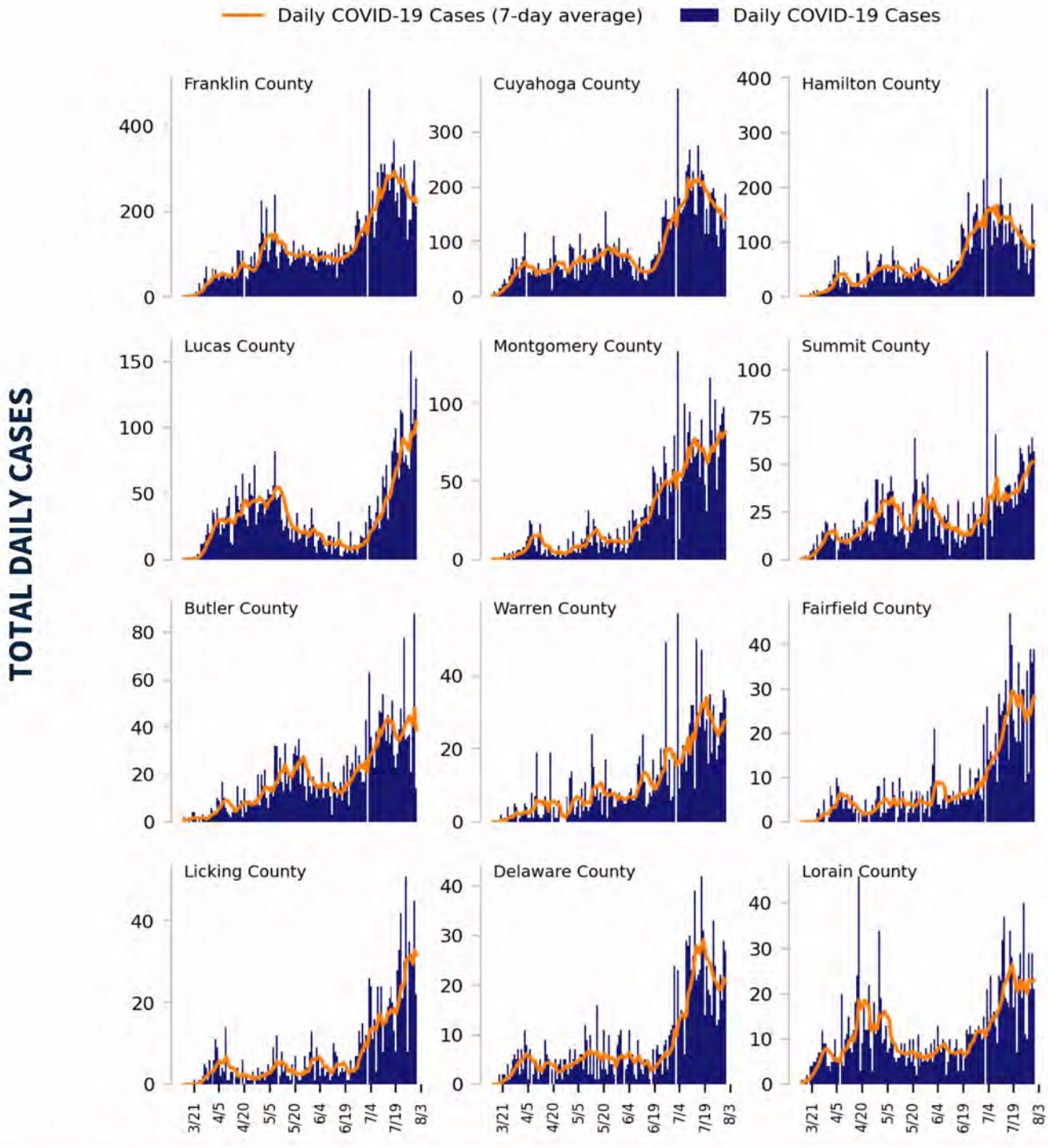
Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

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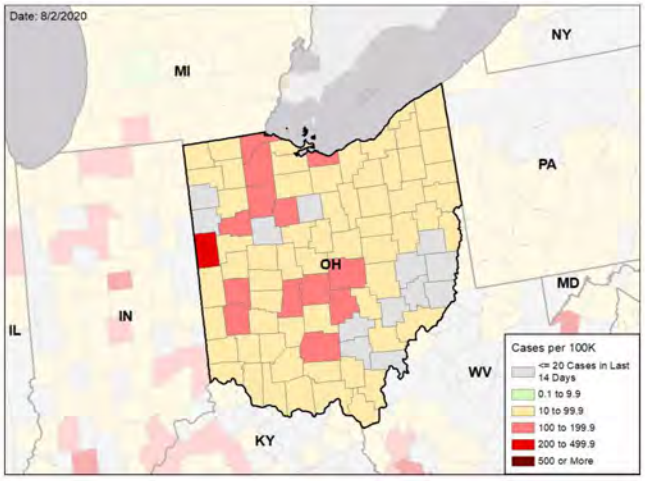
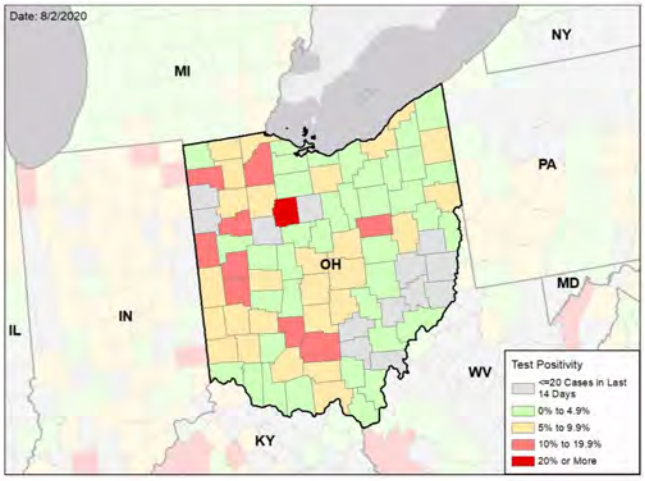
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

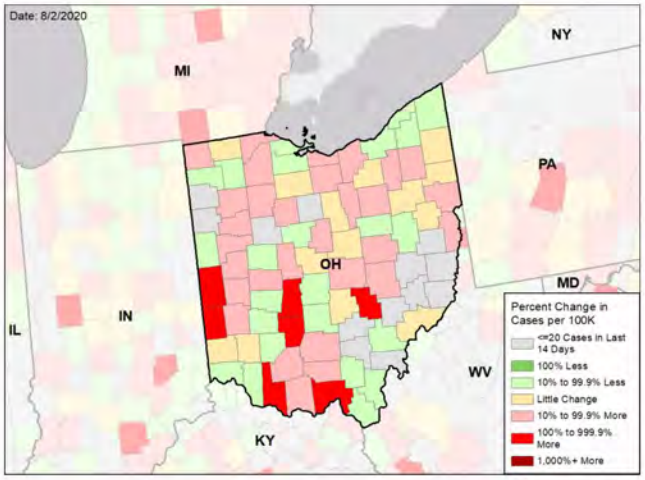
NEW CASES PER 100,000 DURING LAST WEEK



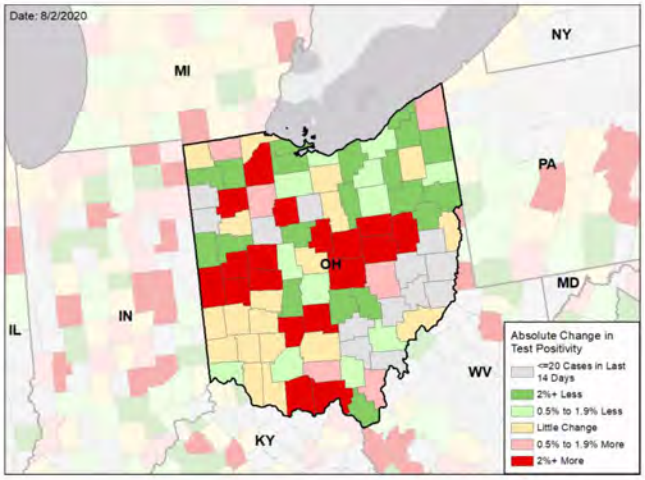
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

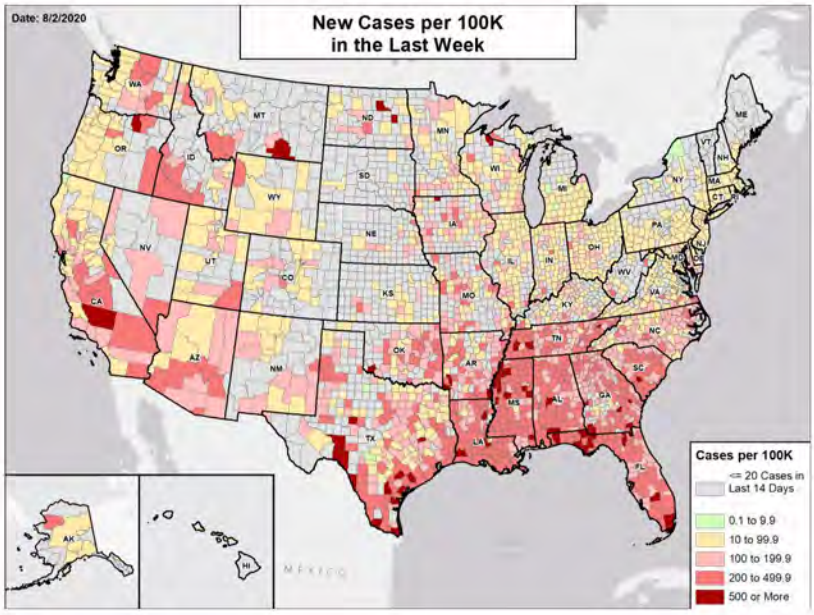


DATA SOURCES

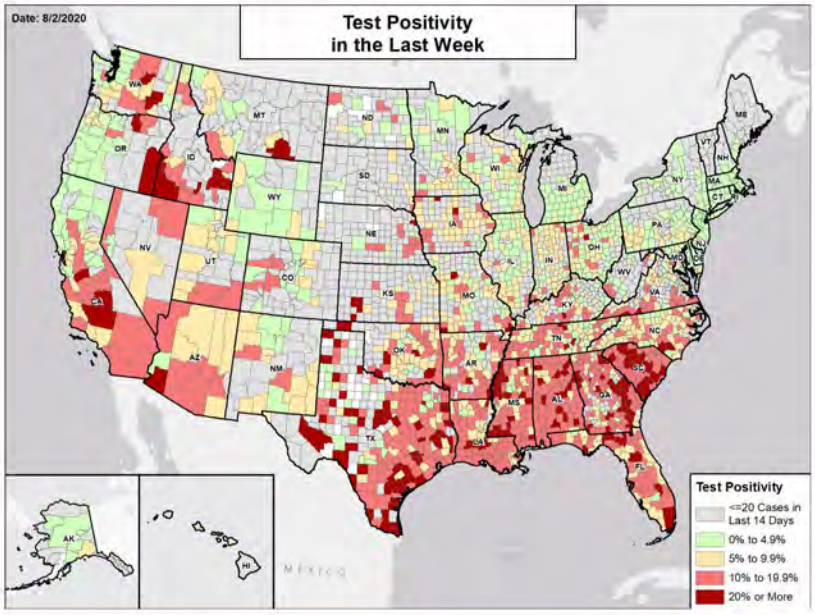
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

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COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

OKLAHOMA

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SUMMARY

- Oklahoma is in the red zone for cases, indicating more than 100 new cases per 100,000 population last week, and the yellow zone for test positivity, indicating a rate between 5% to 10%.
- Oklahoma has seen an increase in new cases and remained at high levels in test positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Oklahoma County, 2. Tulsa County, and 3. Cleveland County. These counties represent 55.9 percent of new cases in Oklahoma. The virus is spreading deeper into the rural areas of the state.
- Oklahoma had 186 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 6 to support operations activities from FEMA; 2 to support epidemiology activities from CDC; and 1 to support operations activities from CDC.
- Between Jul 25 - Jul 31, on average, 58 patients with confirmed COVID-19 and 89 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Oklahoma. An average of 53 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Consider closing bars in yellow zones to prevent further spread. In red zones, limit the size of social gatherings to 10 or fewer people; in the yellow zones, limit social gatherings to 25 or fewer people.
- Put in mask requirement statewide; work with local communities to ensure high usage rates. Identify mechanisms to assess compliance with local regulations.
- The nursing home facilities with more than 2 confirmed or suspected COVID-19 cases are largely in red zones. Preventing further spread in these counties is critical to protect the vulnerable nursing home population. Protect vulnerable populations in assisted living and long-term care facilities through weekly testing of all workers and requiring masks. In facilities with workers who tested positive, ensure all residents have been promptly tested and appropriate cohorting measures are in place. Conduct on-site inspections to ensure COVID-19 safety guidance and considerations are being implemented.
- Providing timely test results to individuals so they can isolate and stop the spread is critical. Implement the following to increase testing capacity and decrease turnaround times:
    - (1) For family and cohabitating households, screen entire households in a single test by pooling a sample of each member's specimen. For households that test positive, isolate and conduct follow-up individual tests.
    - (2) Expand testing capacity in public health labs by adding shifts, including weekend shifts, to reduce turnaround times.
    - (3) Require all universities with RNA detection platforms to use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Message to residents that if they vacation in an area with high COVID prevalence and return to an area with low COVID prevalence, they should: remain socially distanced, stay masked in all public spaces, and avoid all indoor gatherings where social distancing and masks cannot be maintained.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

OKLAHOMA

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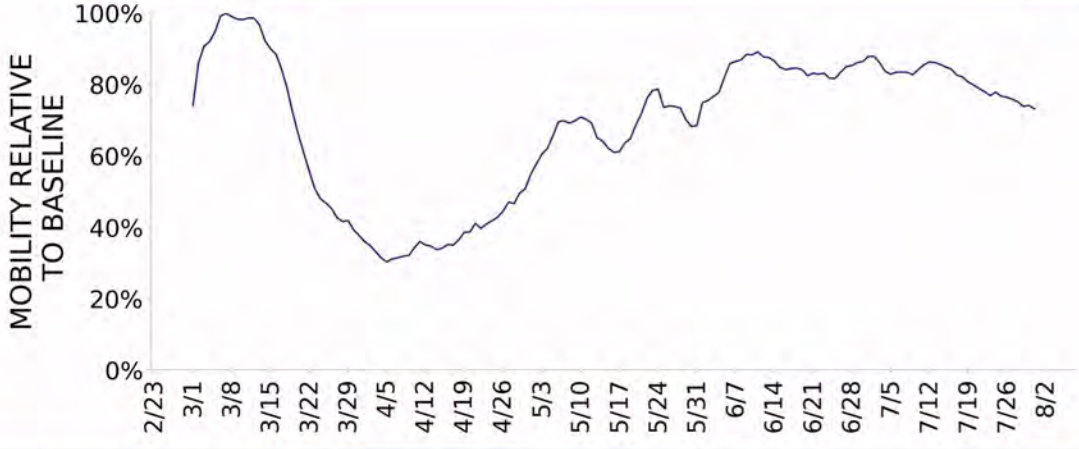
	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	7,367 (186)	+48.1%	87,300 (204)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	9.8%	-0.3%*	12.2%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	33,323** (842)	+7.5%**	317,760** (744)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	57 (1)	+46.2%	2,954 (7)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	6.4%	+0.9%*	21.6%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	**7**	Tulsa Altus Lawton Muskogee Durant Miami Fort Smith	**13** **Top 12 shown (full list below)**	Oklahoma City Enid Shawnee Tahlequah Stillwater Ardmore Weatherford Bartlesville McAlester Duncan Ponca City Elk City
COUNTY LAST WEEK	**22** **Top 12 shown (full list below)**	Tulsa Canadian Rogers Jackson Wagoner Comanche Muskogee McCurtain Bryan Ottawa Le Flore Sequoyah	**27** **Top 12 shown (full list below)**	Oklahoma Cleveland Creek Okmulgee Garfield Pottawatomie Cherokee Payne Grady Delaware Mayes McClain

All Yellow CBSAs: Oklahoma City, Enid, Shawnee, Tahlequah, Stillwater, Ardmore, Weatherford, Bartlesville, McAlester, Duncan, Ponca City, Elk City, Guymon

All Red Counties: Tulsa, Canadian, Rogers, Jackson, Wagoner, Comanche, Muskogee, McCurtain, Bryan, Ottawa, Le Flore, Sequoyah, Osage, Adair, Caddo, Lincoln, Pushmataha, Kingfisher, McIntosh, Marshall, Okfuskee, Tillman

All Yellow Counties: Oklahoma, Cleveland, Creek, Okmulgee, Garfield, Pottawatomie, Cherokee, Payne, Grady, Delaware, Mayes, McClain, Seminole, Carter, Custer, Washington, Pittsburg, Stephens, Hughes, Garvin, Kay, Latimer, Craig, Choctaw, Beckham, Texas, Blaine

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

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POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
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- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
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POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
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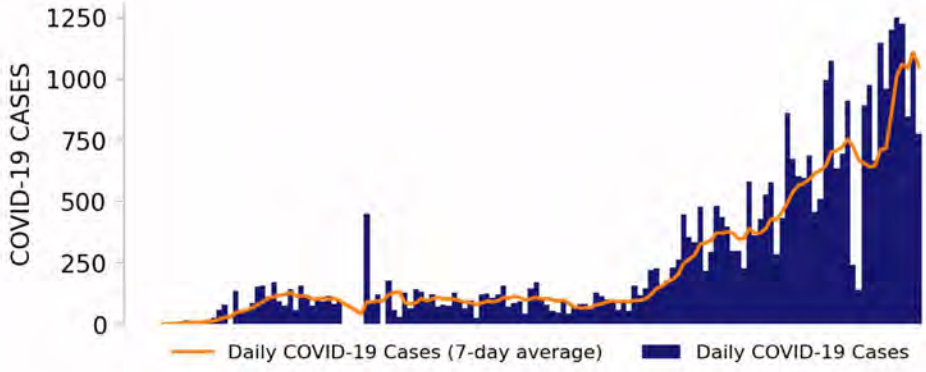
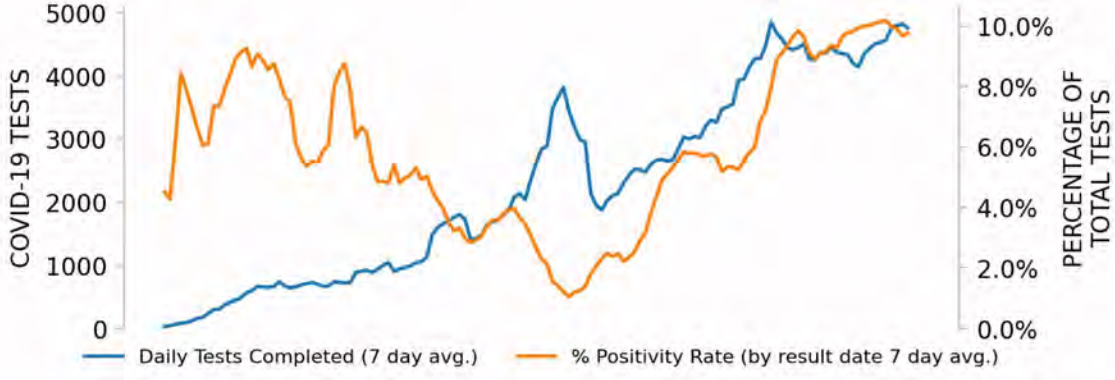
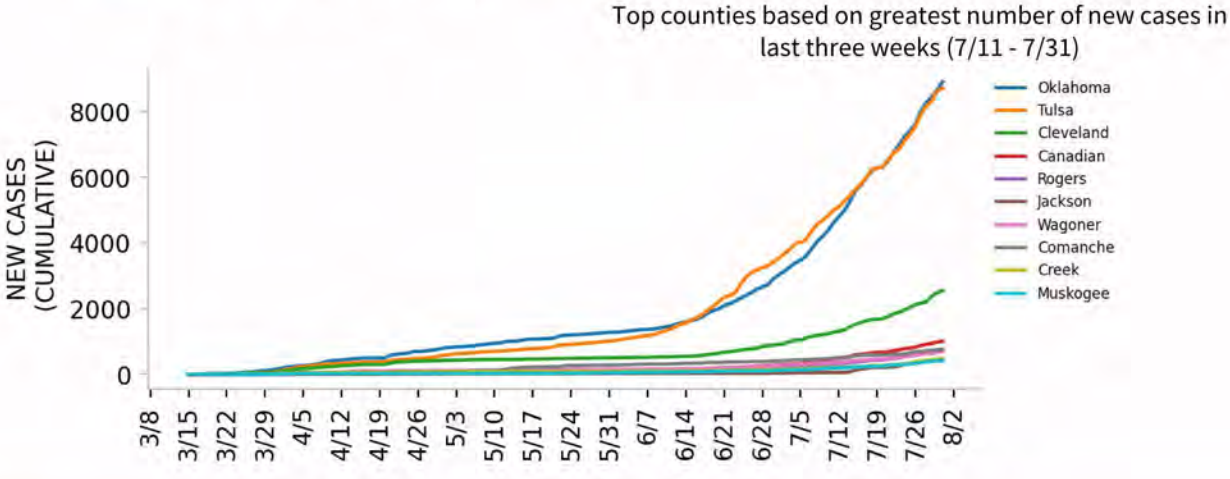
NEW CASES



TESTING



TOP COUNTIES



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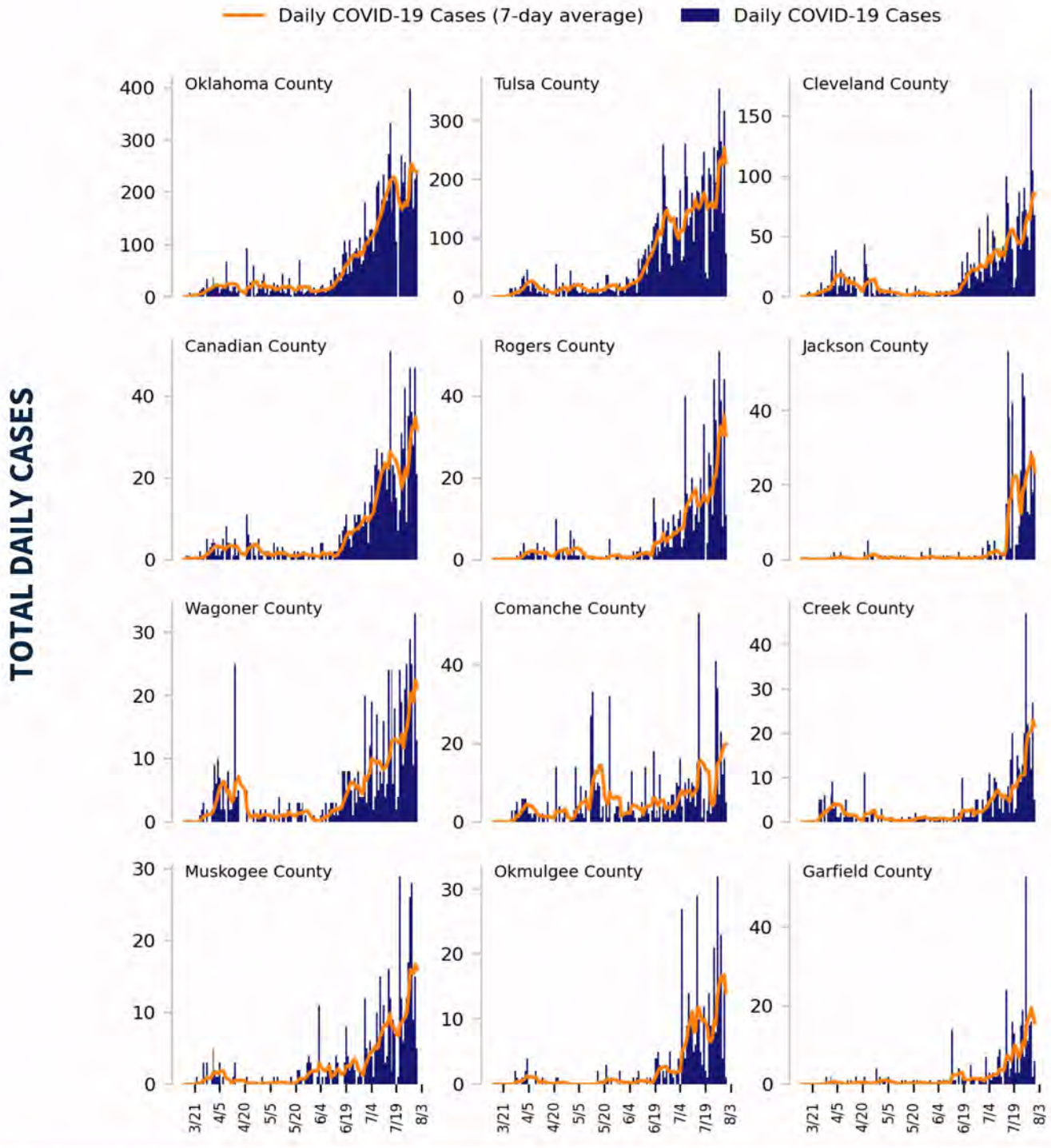
Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

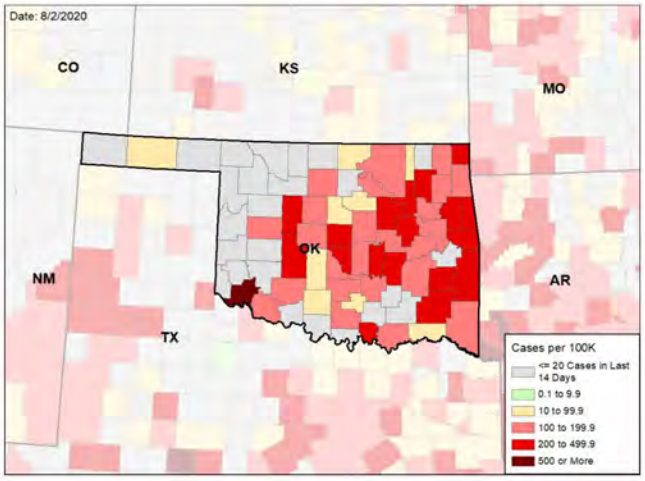
Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

OKLAHOMA

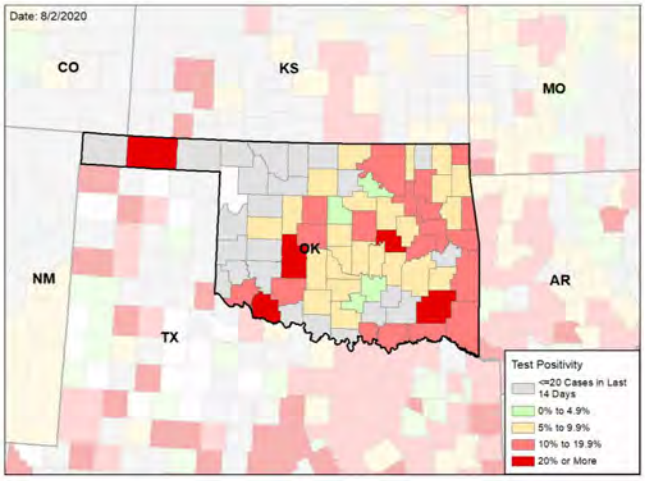
STATE REPORT | 08.02.2020

CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

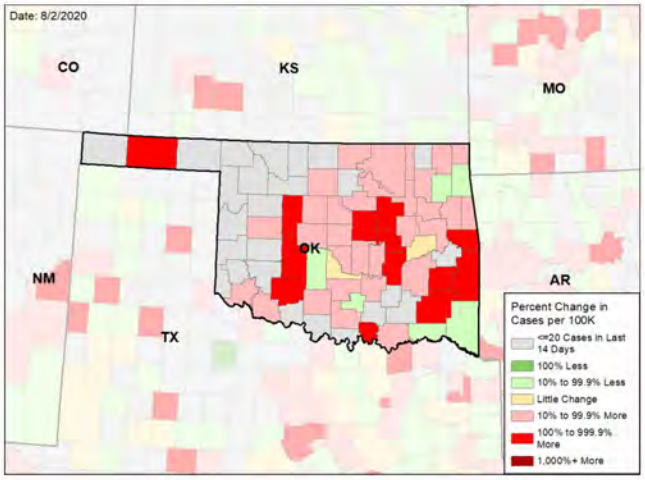
NEW CASES PER 100,000 DURING LAST WEEK



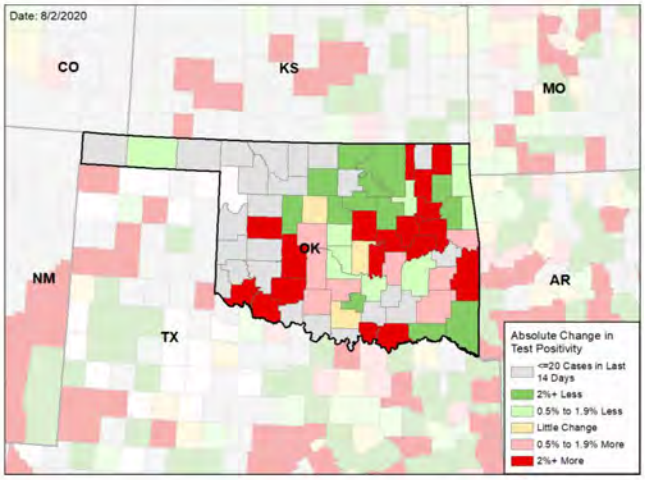
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
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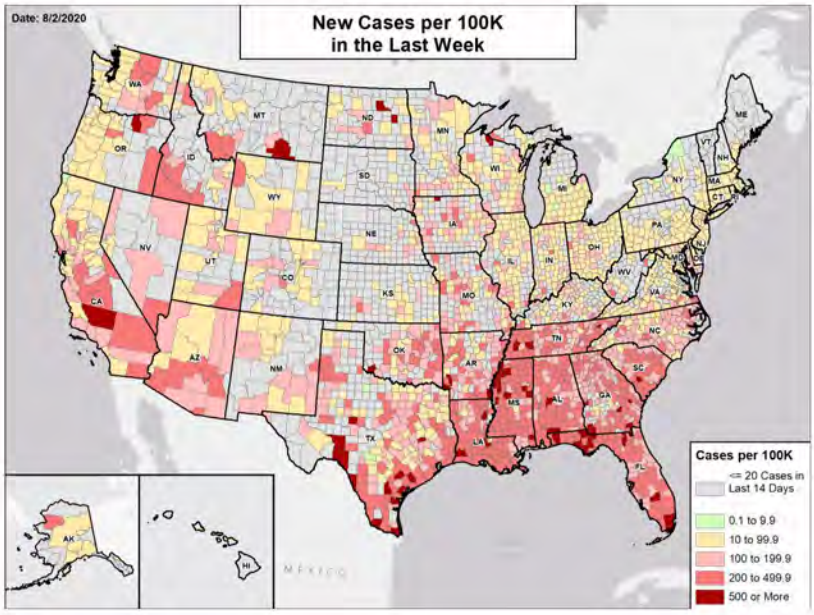
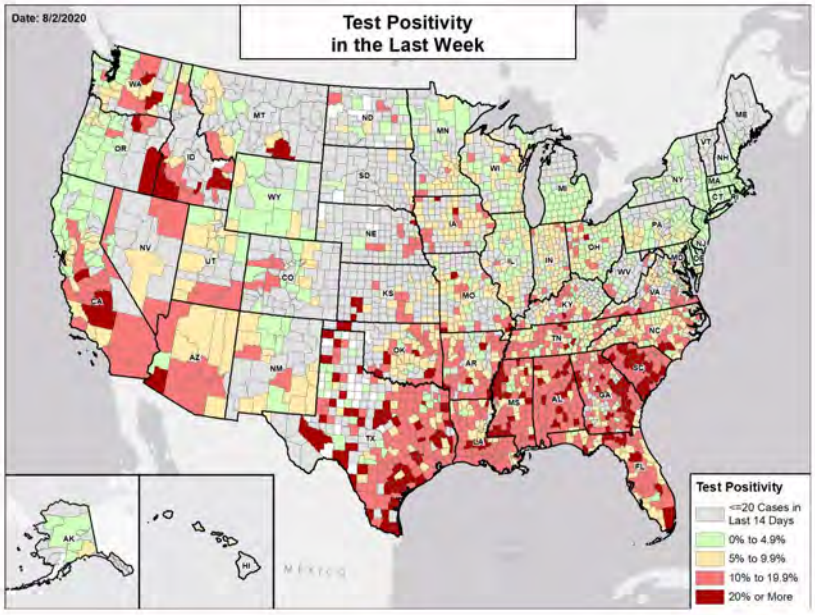
National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



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Methods

STATE REPORT | 08.02.2020

COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
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- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

OREGON

STATE REPORT | 08.02.2020

SUMMARY

- Oregon is in the yellow zone for cases, indicating between 10 to 100 new cases per 100,000 population last week, and the green zone for test positivity, indicating a rate below 5%.
- Oregon has seen stability in new cases and an increase in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Multnomah County, 2. Umatilla County, and 3. Washington County. These counties represent 51.0 percent of new cases in Oregon.
- Oregon had 57 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 30 to support operations activities from FEMA; 2 to support epidemiology activities from CDC; 5 to support operations activities from USCG; and 20 to support operations activities from VA.
- Between Jul 25 - Jul 31, on average, 14 patients with confirmed COVID-19 and 107 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Oregon. An average of 79 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Maintain requirement for face masks in all indoor settings outside of the home and where physical distancing is not possible.
- Implement all recommendations for yellow and red-zone localities as described below, with particular focus on Hermiston-Pendleton and Ontario and in Umatilla, Morrow, Malheur, Marion, Multnomah and Jefferson counties.
- Intensify contact tracing, with early quarantine and isolation, in counties with elevated or increasing transmission.
- Where testing capacity is limited or turnaround times long, consider pooled testing as described below to increase access and reduce turnaround times.
- Tribal Nations: Continue to promote social distancing and face covering recommendations. Develop specific culturally relevant education and public health messaging. Pooled testing should be instituted for multi-generational households. Spaces to provide quarantine of contacts and isolation of cases should be provided as needed.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

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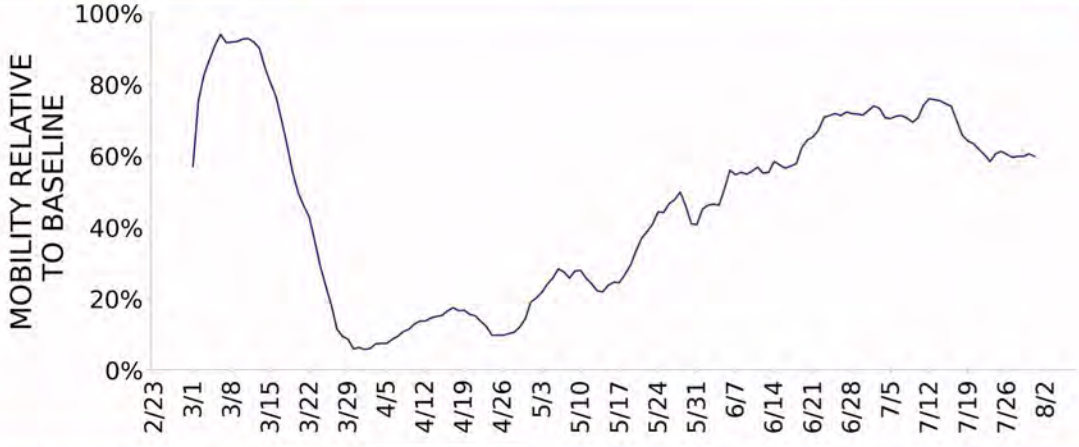
	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	2,388 (57)	+3.7%	11,560 (81)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	4.9%	+0.7%*	7.0%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	54,532** (1,293)	-25.5%**	194,557** (1,356)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	40 (1)	+42.9%	165 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	4.2%	+1.0%*	7.8%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

OREGON

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	2	Hermiston-Pendleton Ontario	1	Salem
COUNTY LAST WEEK	4	Umatilla Malheur Morrow Jefferson	4	Multnomah Marion Yamhill Polk

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

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POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
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OREGON

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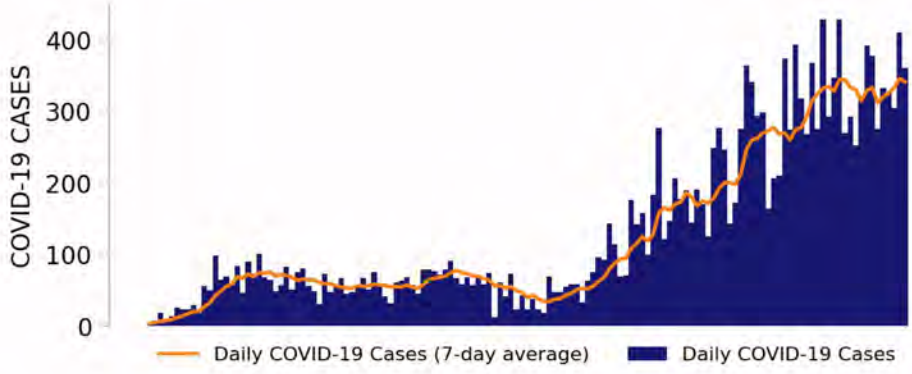
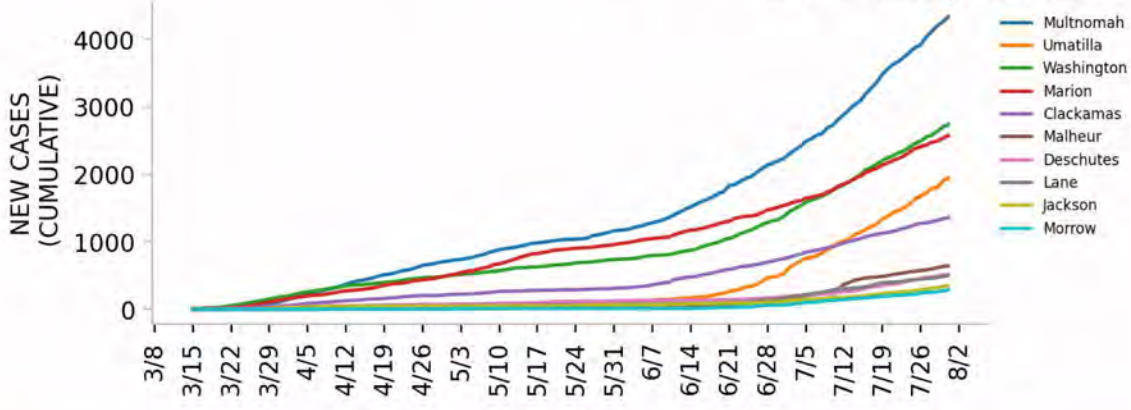
NEW CASES



TESTING

TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)



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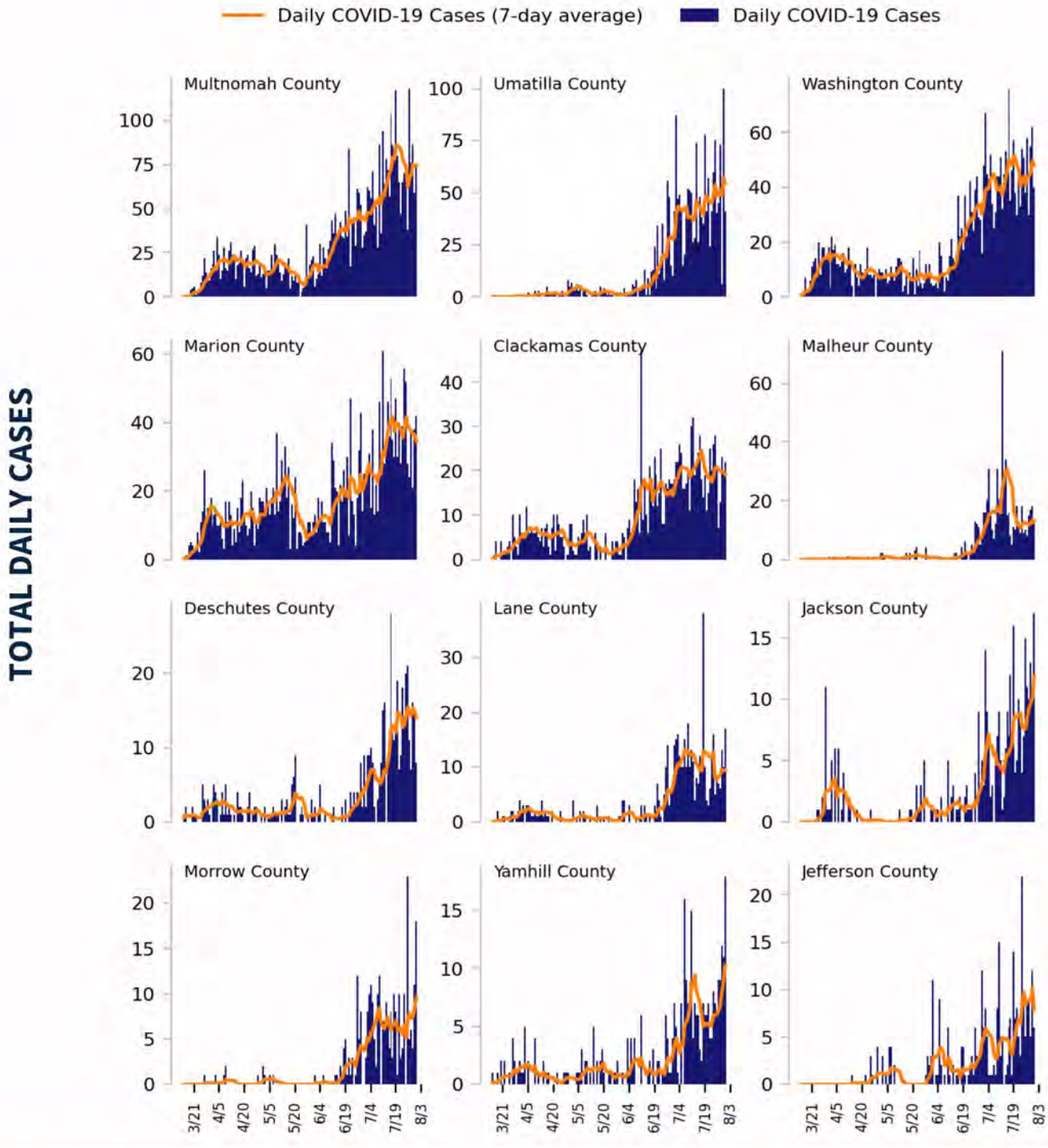

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OREGON

STATE REPORT | 08.02.2020

CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

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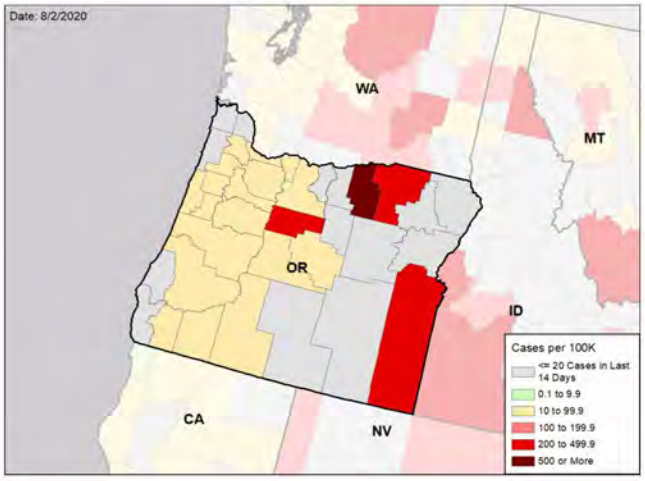

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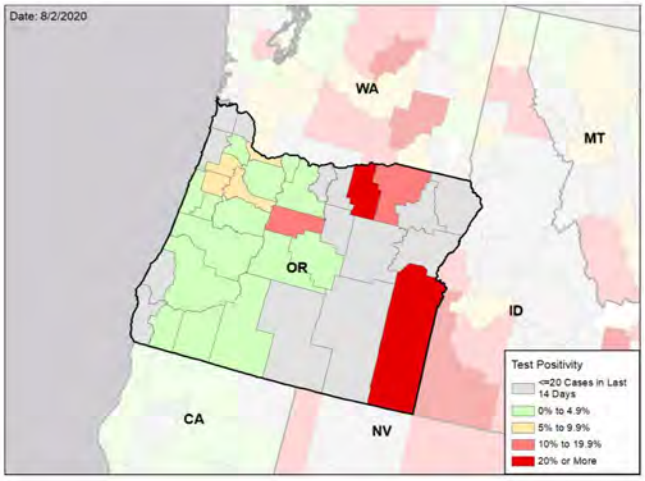

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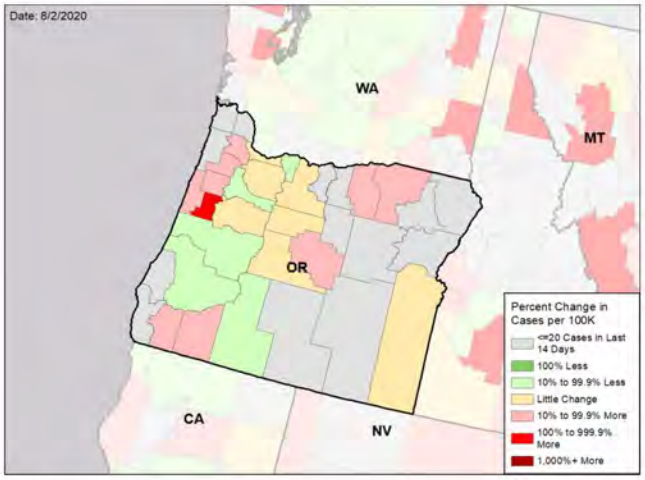
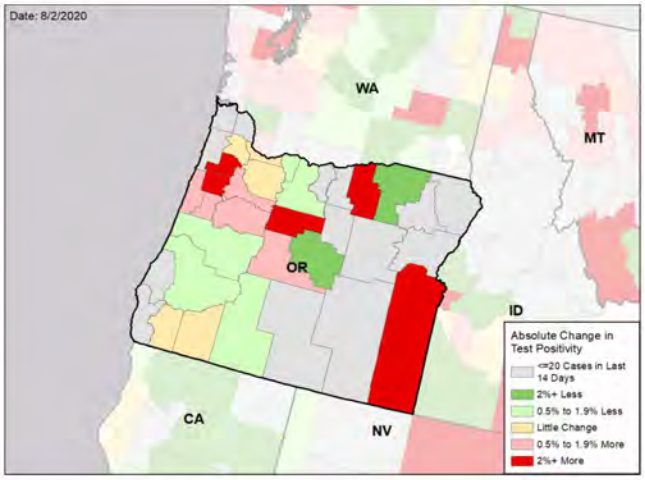


WEEKLY CHANGE IN TEST POSITIVITY



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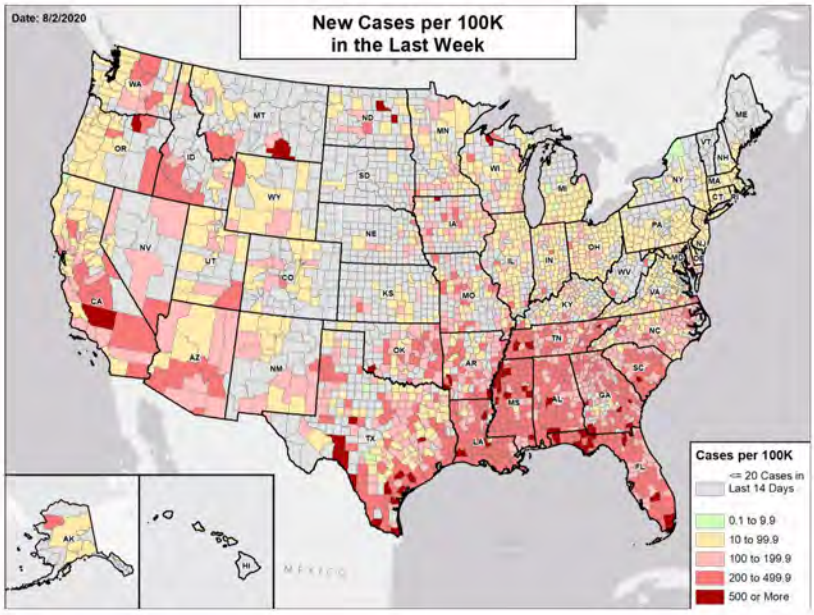
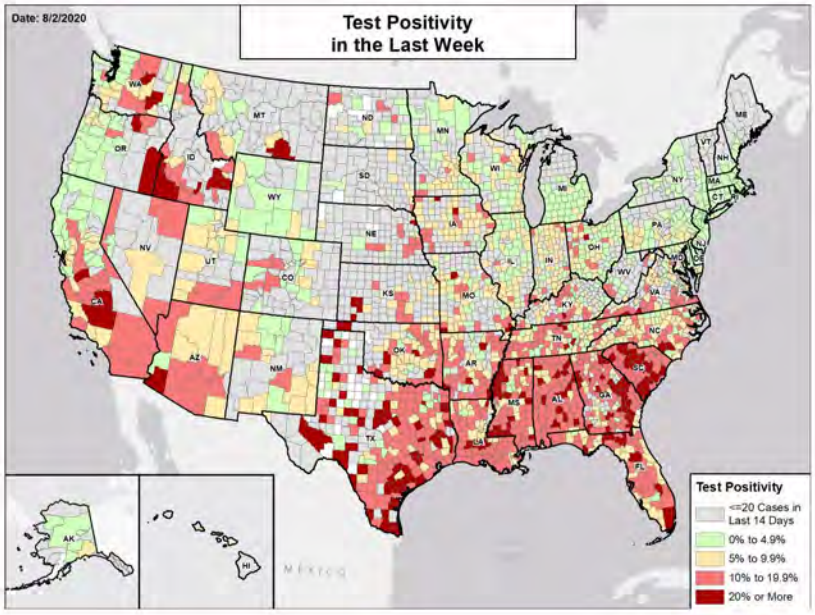
National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



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Methods

STATE REPORT | 08.02.2020

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Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
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COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

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PENNSYLVANIA

STATE REPORT | 08.02.2020

SUMMARY

- Pennsylvania is in the yellow zone for cases, indicating between 10 to 100 new cases per 100,000 population last week, and the yellow zone for test positivity, indicating a rate between 5% to 10%.
- Pennsylvania has seen stability in new cases and stability in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Allegheny County, 2. Philadelphia County, and 3. Delaware County. These counties represent 42.1 percent of new cases in Pennsylvania.
- Pennsylvania had 51 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 74 to support operations activities from FEMA; 15 to support operations activities from ASPR; 1 to support operations activities from USCG; and 10 to support medical activities from VA.
- Between Jul 25 - Jul 31, on average, 123 patients with confirmed COVID-19 and 357 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Pennsylvania. An average of 70 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Message to residents that if they have vacationed in, or had visitors from, areas with high COVID-19 prevalence including the South and West of the United States, they should: avoid vulnerable individuals; remain socially distanced and masked when around others for a minimum of 14 days; avoid indoor gatherings where social distancing and masks cannot be maintained; and get tested if anyone in their family develops symptoms. Also, message that they can transmit the virus even when asymptomatic.
- Identify mechanisms to assess compliance with local regulations, including face masks.
- Providing timely test results to individuals so they can isolate and stop the spread is critical. Implement the following to increase testing capacity and decrease turnaround times:
    - (1) For family and cohabitating households, screen entire households in a single test by pooling a sample of each member's specimen. For households that test positive, isolate and conduct follow-up individual tests.
    - (2) Expand testing capacity in public health labs by adding shifts, including weekend shifts, to reduce turnaround times.
    - (3) Require all universities with RNA detection platforms to use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Increase messaging and monitor hot spots, such as Delaware County. Consider implementing additional social distancing restrictions until cases decline.
- Ensure adequate testing is available for nursing home residents and staff to support the recommended weekly testing.
- Target messaging to young adults as colleges and universities begin to re-open.
- Make the contact tracing app operational before schools reopen for the fall semester.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

PENNSYLVANIA

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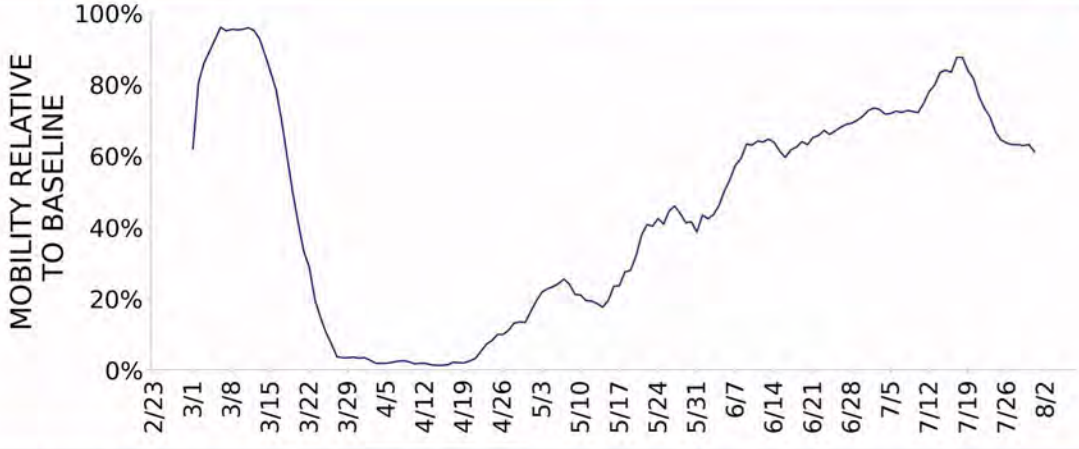
	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	6,474 (51)	+6.2%	22,651 (73)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	5.0%	+0.0%*	6.0%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	173,672** (1,357)	+14.7%**	545,608** (1,768)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	88 (1)	-19.3%	293 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	10.7%	+0.2%*	9.9%	12.3%

MOBILITY



* Indicates absolute change in percentage points.
** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	9	Pittsburgh Lancaster Harrisburg-Carlisle Reading Chambersburg-Waynesboro New Castle Indiana State College Huntingdon
COUNTY LAST WEEK	0	N/A	18 **Top 12 shown (full list below)**	Allegheny Philadelphia Delaware Chester Lancaster Berks Westmoreland Beaver Dauphin Washington Franklin Cumberland

All Yellow Counties: Allegheny, Philadelphia, Delaware, Chester, Lancaster, Berks, Westmoreland, Beaver, Dauphin, Washington, Franklin, Cumberland, Fayette, Lawrence, Indiana, Centre, Armstrong, Huntingdon

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

PENNSYLVANIA

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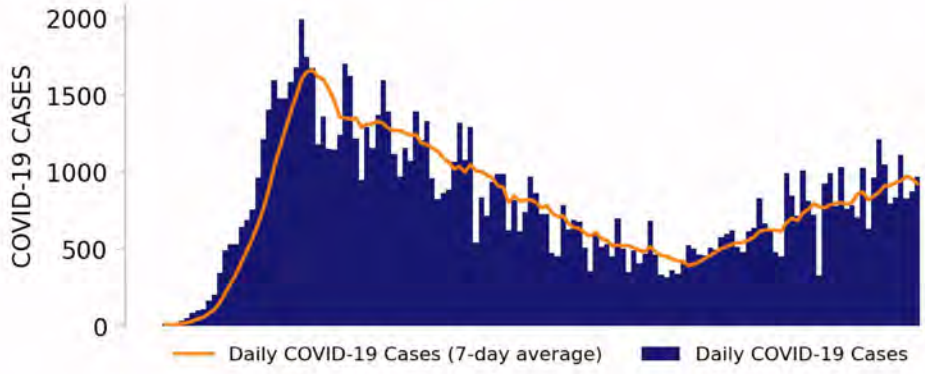
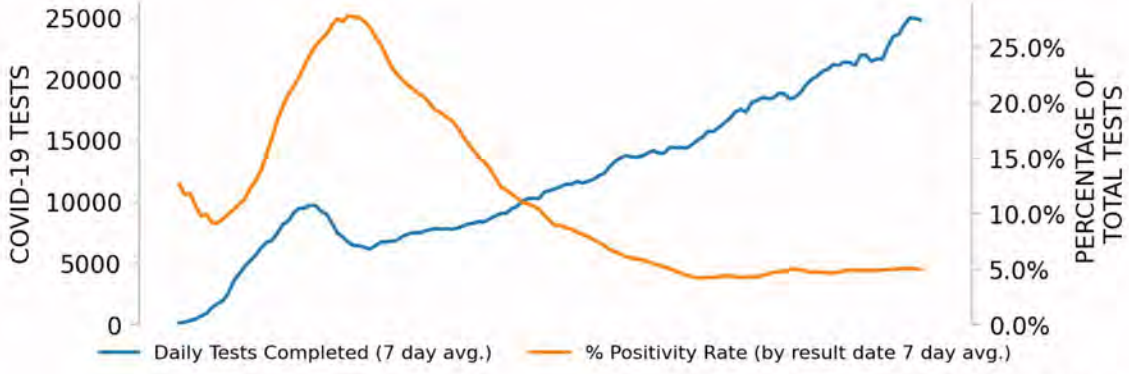
NEW CASES

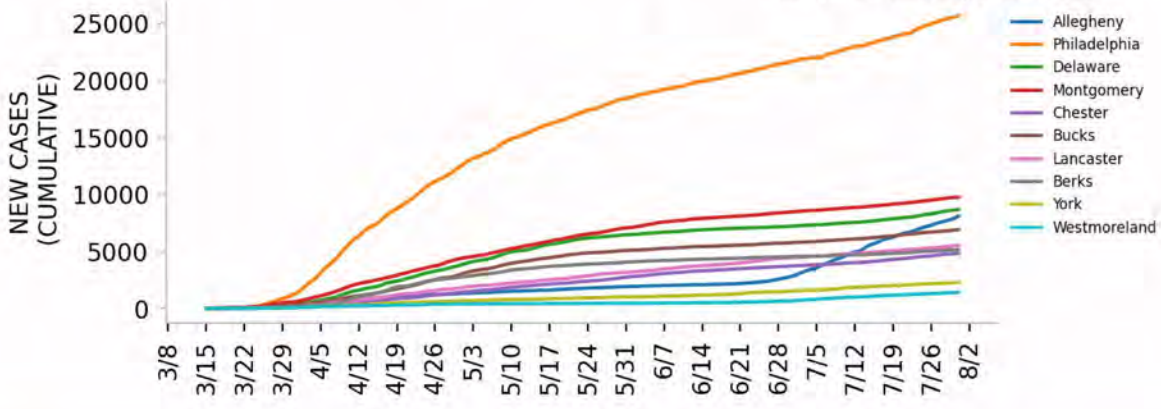


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

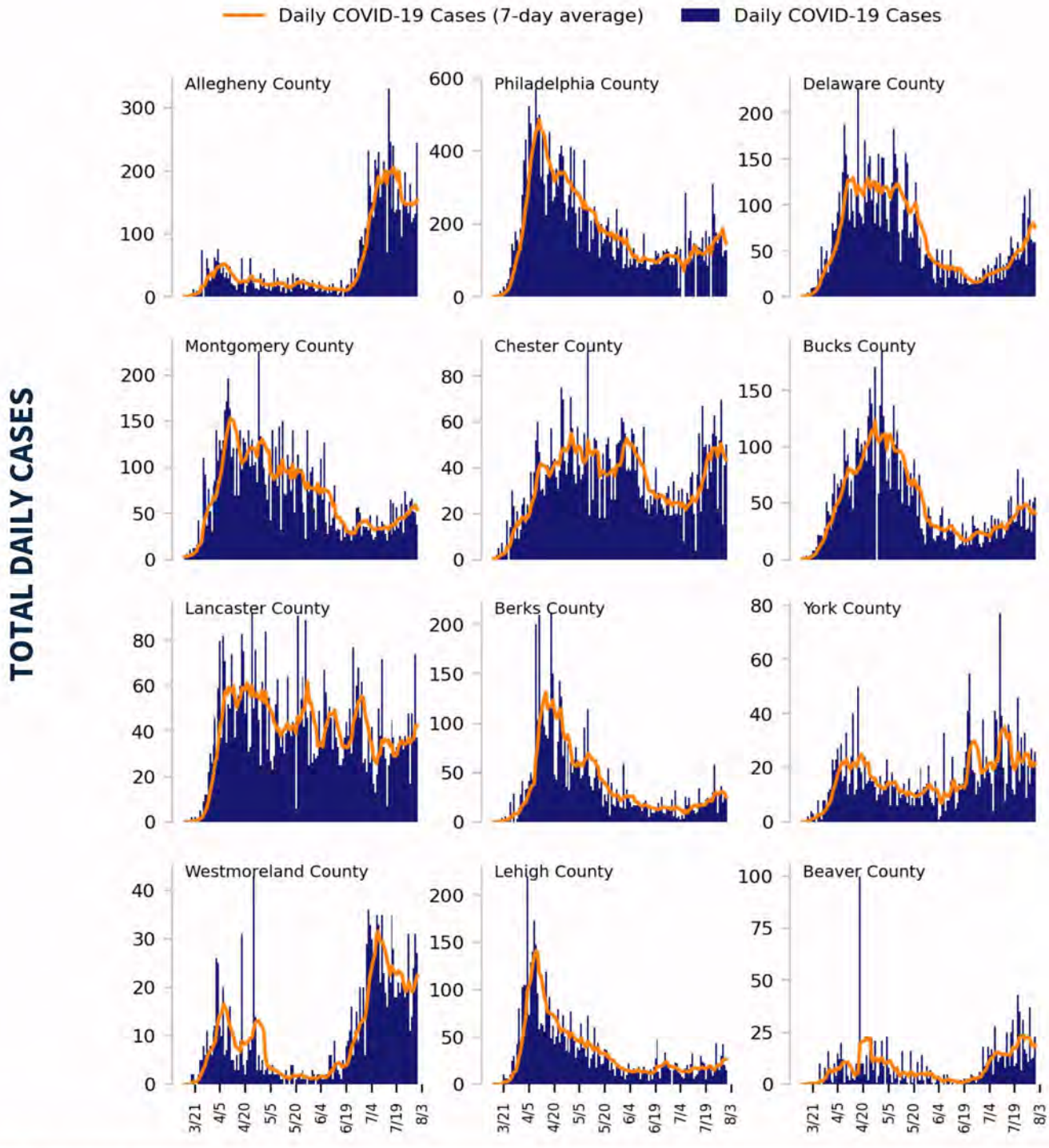


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

PENNSYLVANIA

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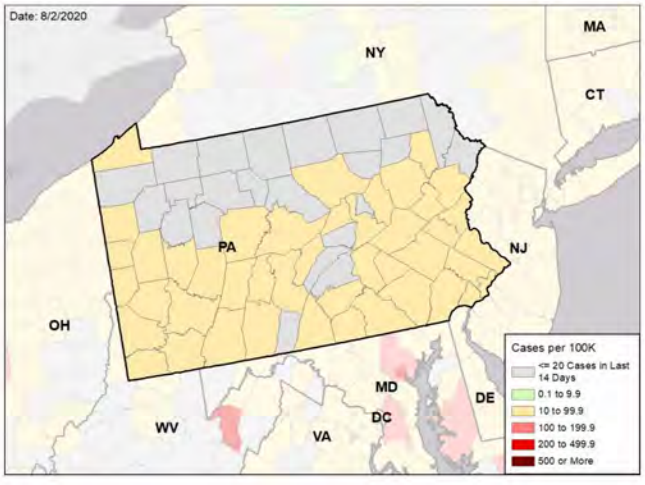
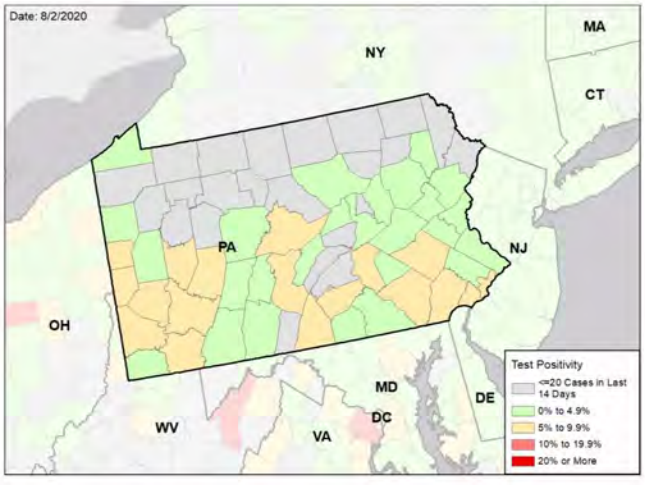
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

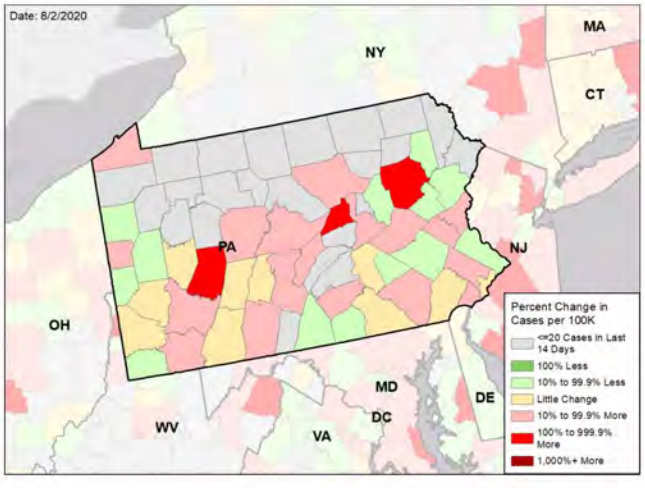
NEW CASES PER 100,000 DURING LAST WEEK



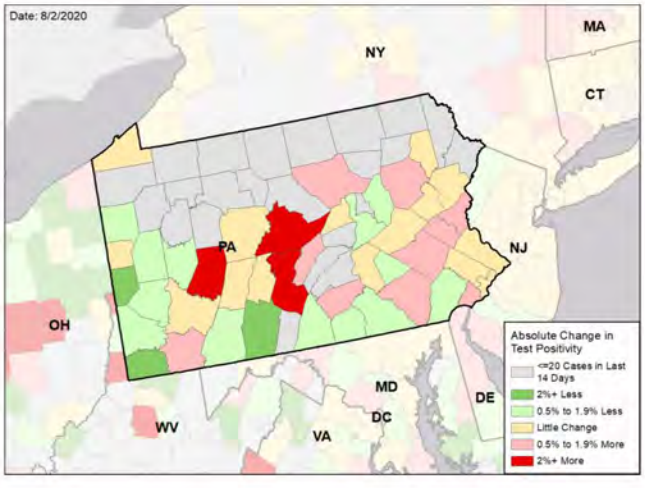
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

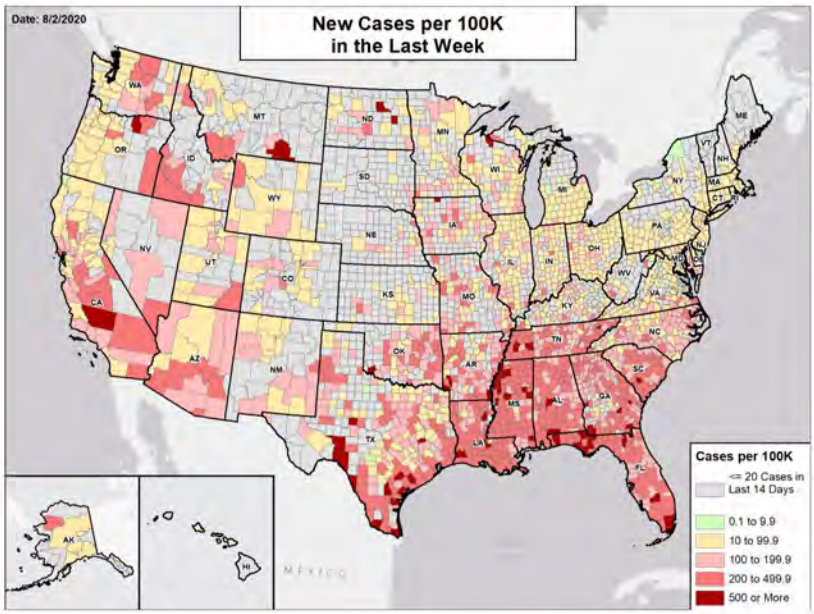


DATA SOURCES

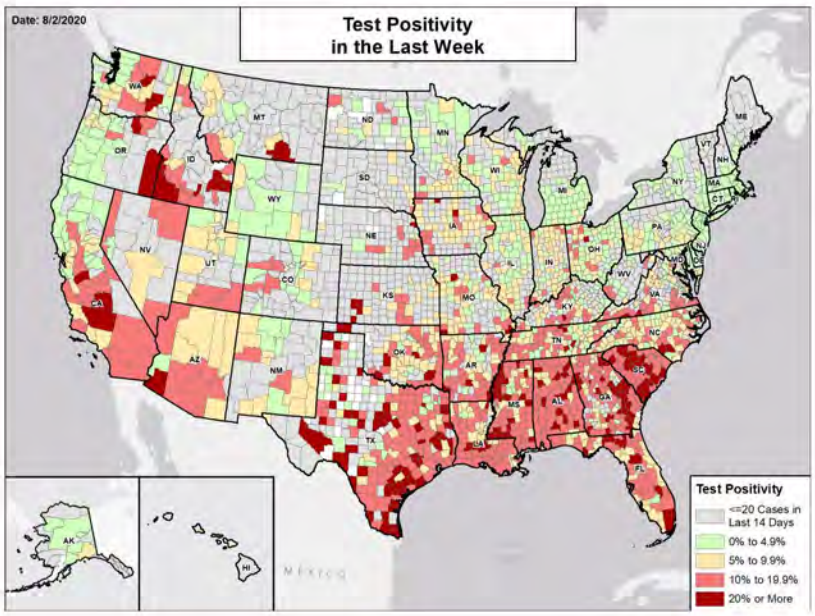
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

STATE REPORT | 08.02.2020

COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

RHODE ISLAND

STATE REPORT | 08.02.2020

SUMMARY

- Rhode Island is in the yellow zone for cases, indicating between 10 to 100 new cases per 100,000 population last week, and the green zone for test positivity, indicating a rate below 5%.
- Rhode Island has seen an increase in new cases and stability in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Providence County, 2. Kent County, and 3. Washington County. These counties represent 94.4 percent of new cases in Rhode Island.
- Rhode Island had 75 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 4 to support operations activities from FEMA.
- Between Jul 25 - Jul 31, on average, 8 patients with confirmed COVID-19 and 28 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Rhode Island. An average of 64 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Continue community mitigation efforts, such as promotion of face coverings and social distancing, with imposition of fines for violations.
- Maintain public health messaging and education, particularly in Providence and touristed areas, targeted to groups with highest increases in case rates.
- Consider pooled testing, as described below, in Providence or areas with insufficient testing or long turnaround times.
- Continue policies in nursing homes and long-term care facilities, with periodic testing of staff and residents and required face coverings for all staff.
- Continue vigorous case investigation with contact tracing and early quarantine of contacts and isolation of all known or suspected cases.
- Continue close monitoring of case rates, test positivity and hospitalizations. Any signs of sustained increased transmission should prompt further restrictions and intensified community mitigation efforts.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

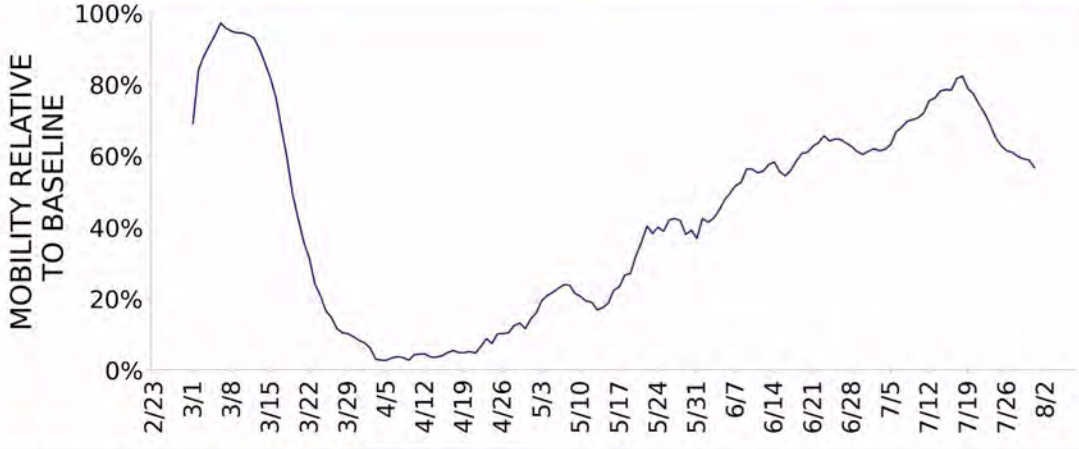
** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

RHODE ISLAND

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	798 (75)	+85.2%	4,853 (33)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	3.0%	+0.0%*	1.9%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	29,468** (2,782)	+18.7%**	229,303** (1,545)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	14 (1)	+100.0%	144 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	5.8%	-1.4%*	4.3%	12.3%

MOBILITY



* Indicates absolute change in percentage points.
** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

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Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

RHODE ISLAND

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	0	N/A
COUNTY LAST WEEK	0	N/A	0	N/A

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
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RHODE ISLAND

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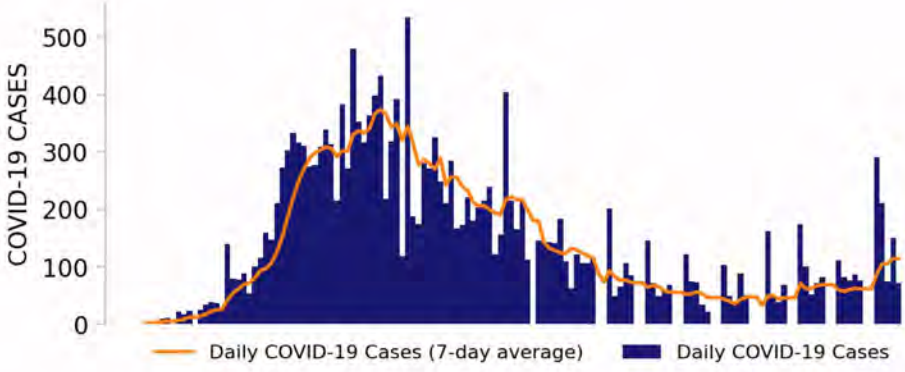
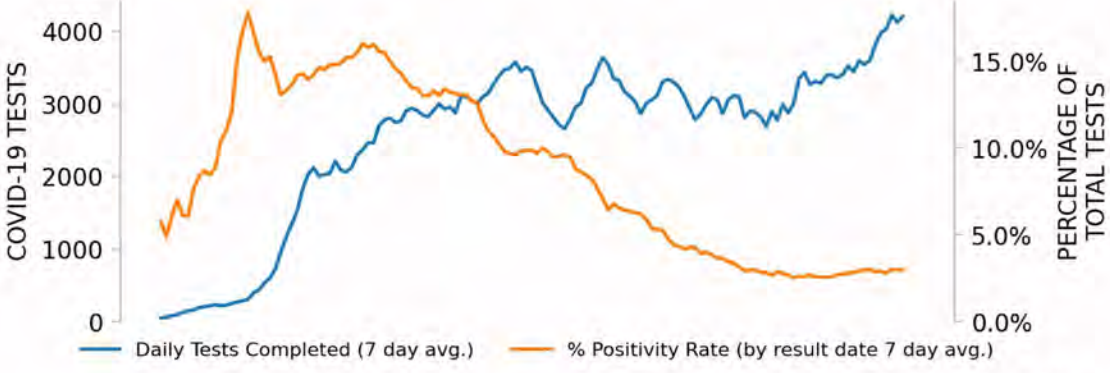
NEW CASES

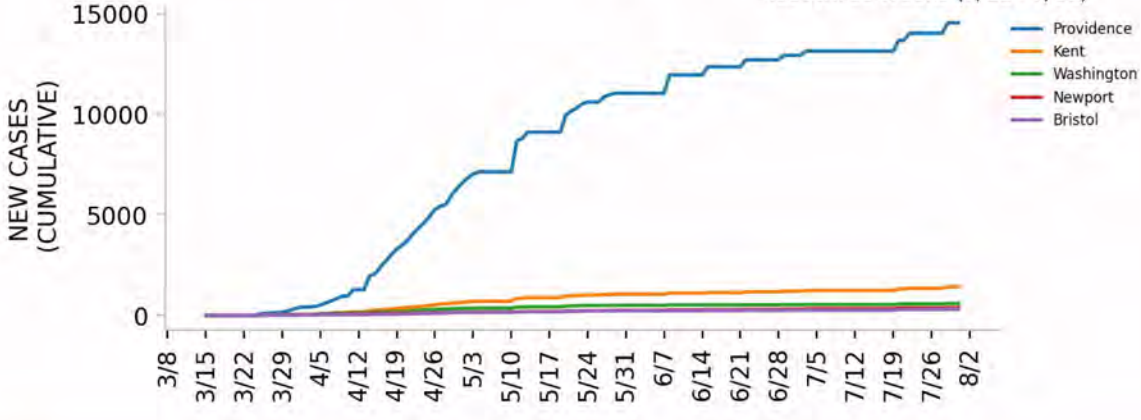


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

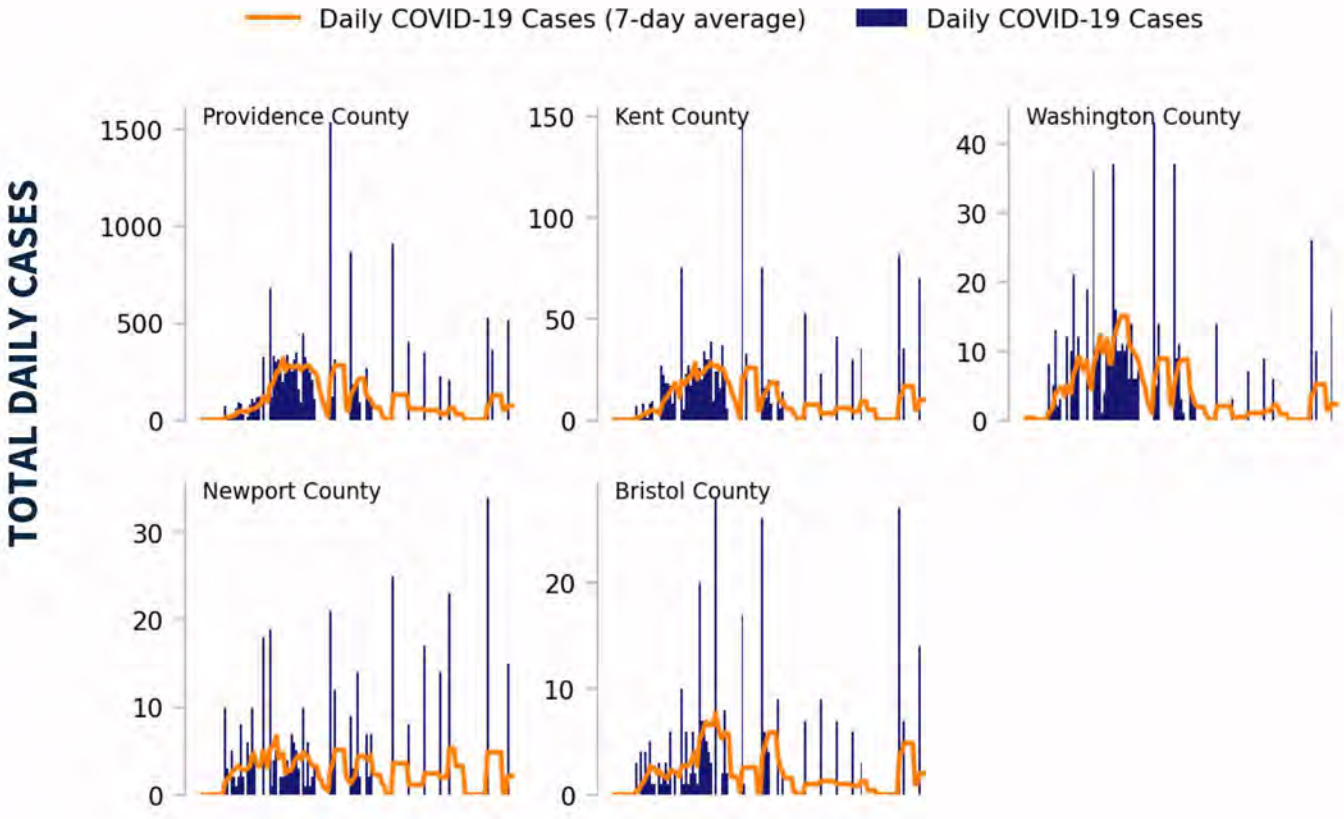


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

RHODE ISLAND

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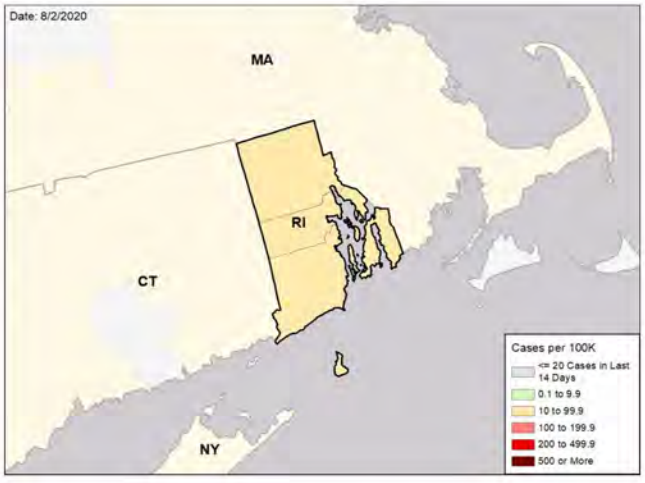
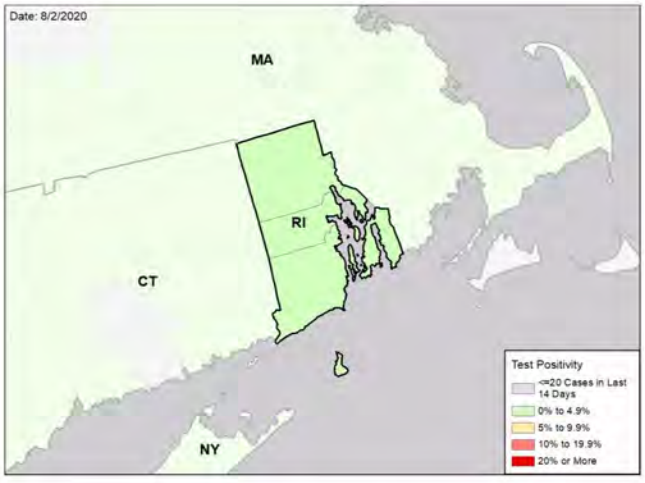
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

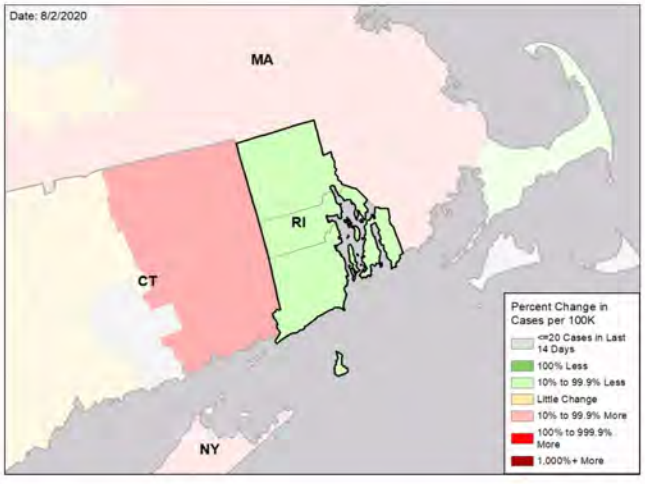
NEW CASES PER 100,000 DURING LAST WEEK



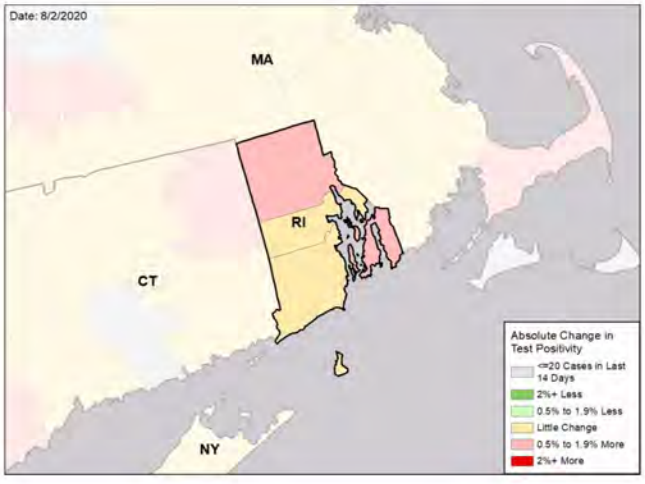
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

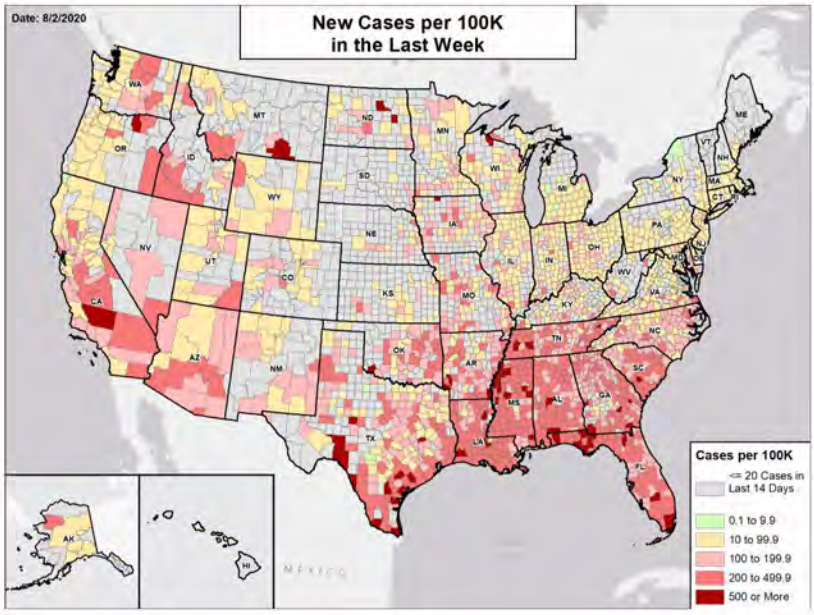


DATA SOURCES

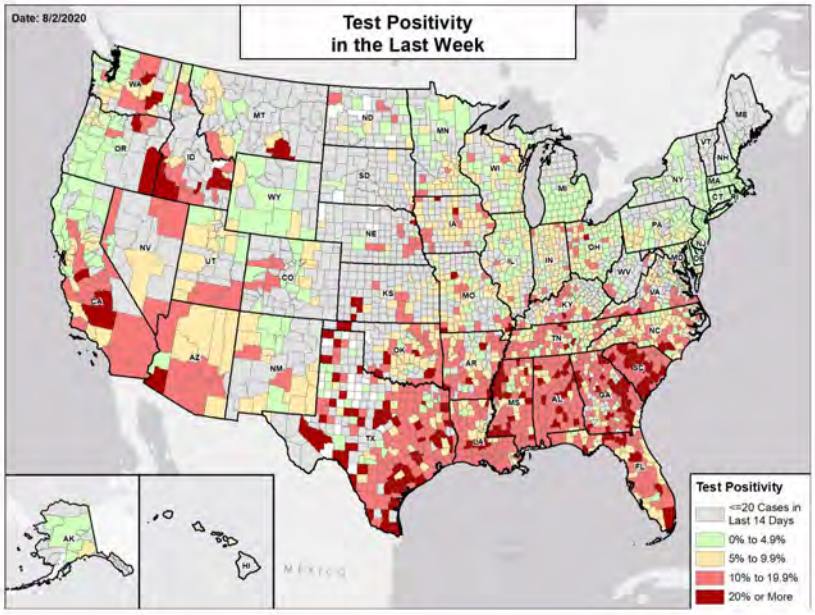
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

STATE REPORT | 08.02.2020

COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

SOUTH CAROLINA

STATE REPORT | 08.02.2020

SUMMARY

- South Carolina is in the red zone for COVID-19 cases, indicating more than 100 new cases per 100,000 population last week, and the red zone for COVID-19 test positivity, indicating a rate above 10%.
- South Carolina has seen a slight decrease in new cases but no decrease in testing positivity over the past week. Aggressive continuation of mitigation efforts will be required.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Charleston County, 2. Greenville County, and 3. Richland County. These counties represent 30.0 percent of new cases in South Carolina.
- South Carolina is experiencing widespread community spread throughout the state in urban, periurban, and rural areas. Ensuring all citizens are following the core mitigation efforts is essential to controlling the pandemic in South Carolina.
- South Carolina had 199 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 8 to support operations activities from USCG.
- Between Jul 25 - Jul 31, on average, 181 patients with confirmed COVID-19 and 97 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in South Carolina. An average of 84 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Expand the protection of those in nursing homes, assisted living facilities, and long-term care facilities by ensuring access to rapid facility-wide testing in response to a resident or staff member with COVID-19. Ensure social distancing and universal facemask use.
- Enforce and expand mask mandates in all current and evolving hot spots.
- Close establishments where social distancing and mask use cannot occur, such as bars and all evening entertainment venues.
- Move to outdoor dining and limit indoor dining to less than 25% of normal capacity.
- Ask citizens to limit social gatherings to fewer than 10 people.
- Encourage individuals that have participated in large social gatherings to get tested.
- Increase messaging of the risk of serious disease in all age groups with preexisting medical conditions, including obesity, hypertension, and diabetes mellitus.
- Continue the scale-up of testing, moving to community-led neighborhood testing. Work with local communities to implement and provide clear guidance for households that test positive, including individual isolation and quarantining procedures.
- Continue to enhance contact tracing and ensure the ability of cases and contacts to quarantine or isolate safely.
- Monitor testing data to identify additional sites of increased transmission and focus public health resources there.
- Ensure the public health lab is fully staffed and running 24/7, utilizing all platforms to reduce turnaround times. Institute 3:1 or 2:1 pooling of test specimens on all high throughput machines as long as turnaround times are greater than 36 hours.
- Require all universities with RNA detection platforms to use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

SOUTH CAROLINA

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	10,225 (199)	-17.8%	158,298 (237)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	19.1%	+0.4%*	13.6%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	55,282** (1,074)	-18.5%**	1,078,189** (1,611)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	307 (6)	+17.6%	2,494 (4)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	27.2%	-5.4%*	22.5%	12.3%

MOBILITY

* Indicates absolute change in percentage points.
** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

SOUTH CAROLINA

STATE REPORT | 08.02.2020

COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	**17** Top 12 shown (full list below)	Charleston-North Charleston Columbia Greenville-Anderson Myrtle Beach-Conway-North Myrtle Beach Charlotte-Concord-Gastonia Hilton Head Island-Bluffton Florence Sumter Orangeburg Augusta-Richmond County Georgetown Greenwood	**1**	Spartanburg
COUNTY LAST WEEK	**43** Top 12 shown (full list below)	Charleston Greenville Richland Horry Lexington Berkeley Beaufort Dorchester Florence York Orangeburg Anderson	**2**	Spartanburg Abbeville

All Red CBSAs: Charleston-North Charleston, Columbia, Greenville-Anderson, Myrtle Beach-Conway-North Myrtle Beach, Charlotte-Concord-Gastonia, Hilton Head Island-Bluffton, Florence, Sumter, Orangeburg, Augusta-Richmond County, Georgetown, Greenwood, Newberry, Seneca, Gaffney, Union, Bennettsville

All Red Counties: Charleston, Greenville, Richland, Horry, Lexington, Berkeley, Beaufort, Dorchester, Florence, York, Orangeburg, Anderson, Sumter, Aiken, Pickens, Georgetown, Greenwood, Laurens, Darlington, Kershaw, Lancaster, Williamsburg, Newberry, Colleton, Oconee, Cherokee, Clarendon, Chester, Bamberg, Chesterfield, Jasper, Hampton, Marion, Barnwell, Union, Fairfield, Dillon, Edgefield, Calhoun, Lee, Saluda, Allendale, Marlboro

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

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POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
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SOUTH CAROLINA

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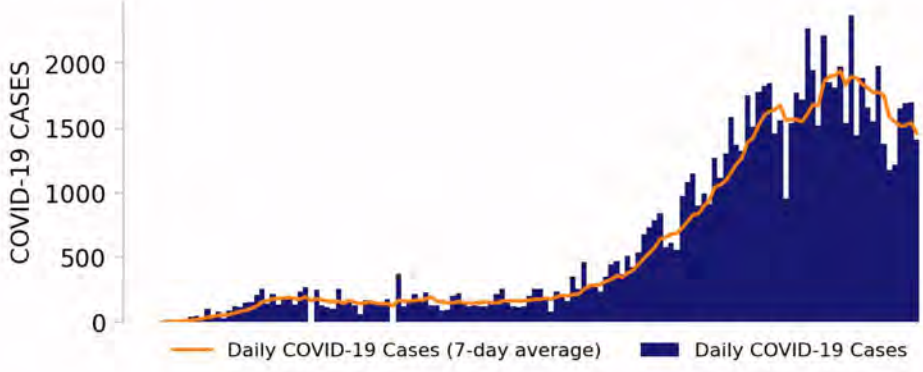
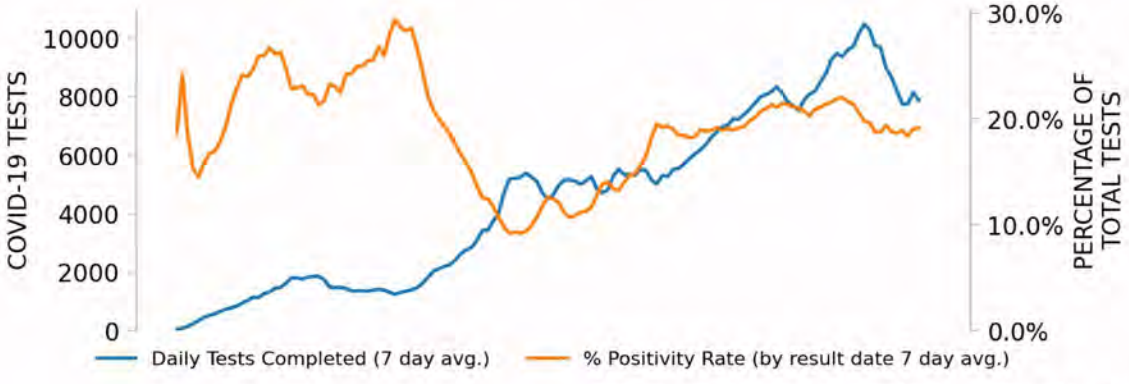
NEW CASES

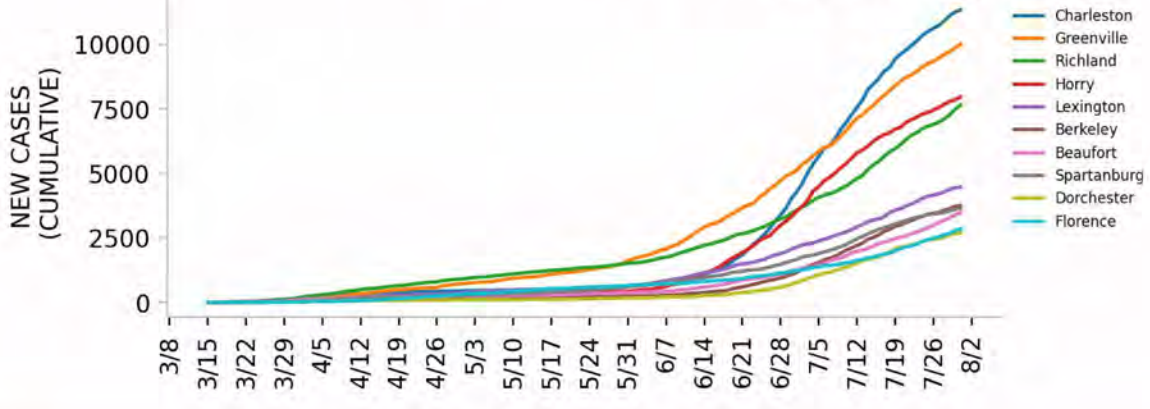


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)



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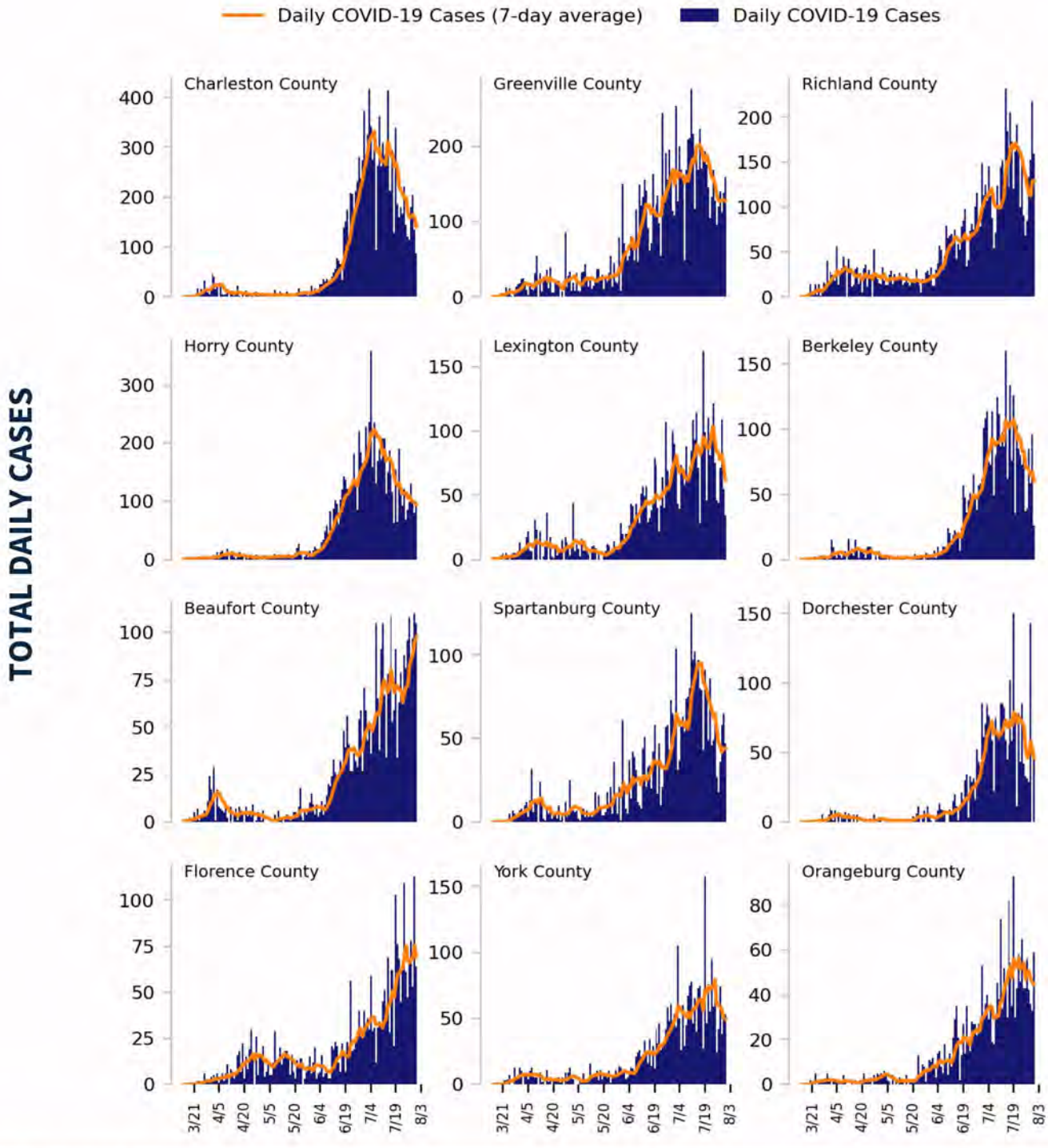
Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

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SOUTH CAROLINA

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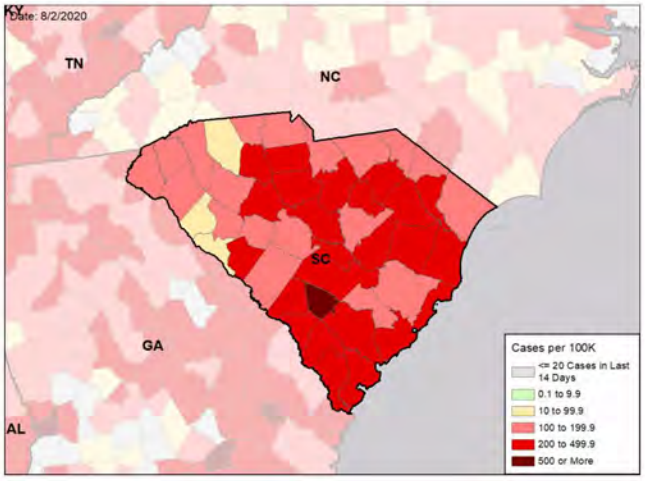
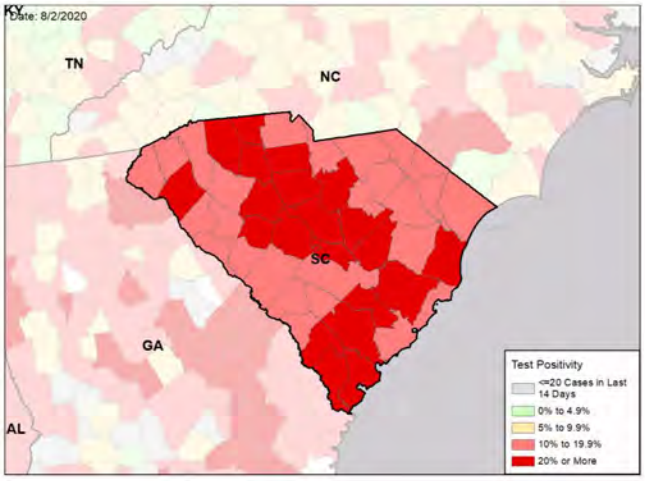
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

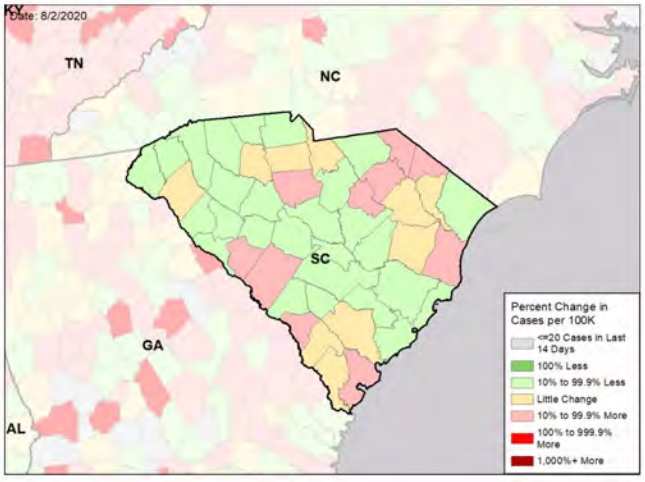
NEW CASES PER 100,000 DURING LAST WEEK



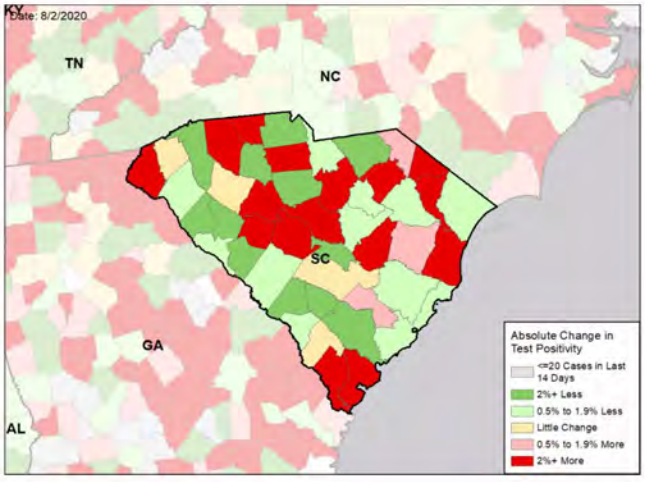
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



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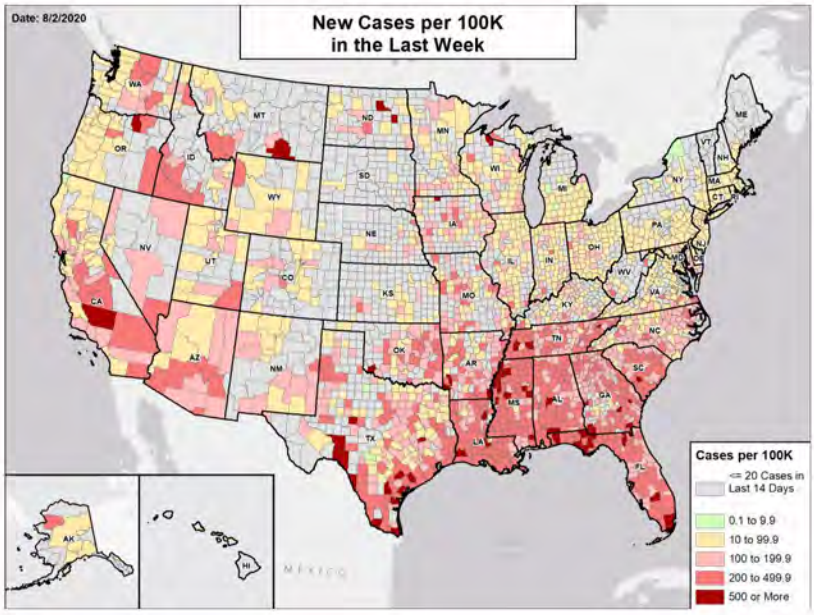
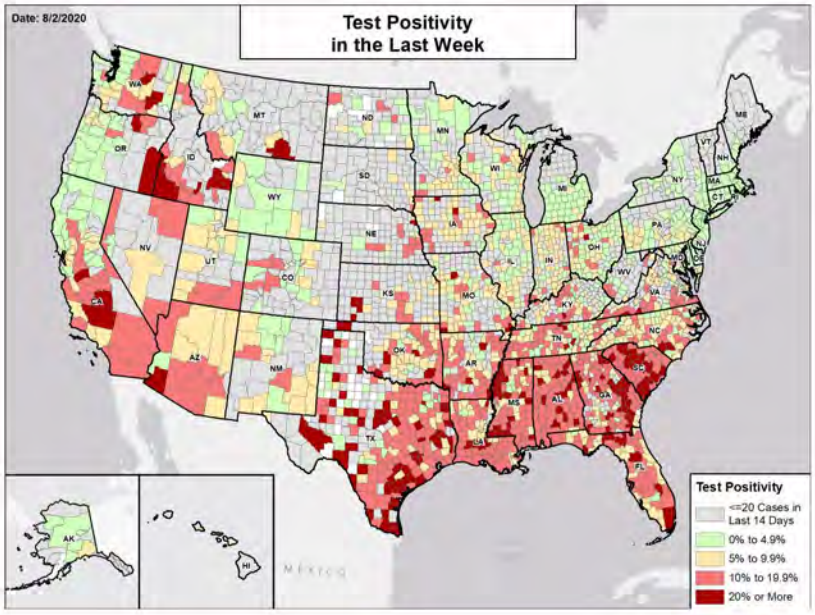
National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

STATE REPORT | 08.02.2020

COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

SOUTH DAKOTA

STATE REPORT | 08.02.2020

SUMMARY

- South Dakota is in the yellow zone for cases, indicating between 10 to 100 new cases per 100,000 population last week, and the yellow zone for test positivity, indicating a rate between 5% to 10%.
- South Dakota has seen an increase in new cases and an increase in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Minnehaha County, 2. Pennington County, and 3. Lincoln County. These counties represent 55.4 percent of new cases in South Dakota.
- South Dakota had 64 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 5 to support operations activities from FEMA; 6 to support epidemiology activities from CDC; and 1 to support medical activities from VA.
- Between Jul 25 - Jul 31, on average, 8 patients with confirmed COVID-19 and 5 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in South Dakota. An average of 67 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Recommend implementing community mitigation efforts for all yellow and red-zone areas as described below and require face masks in indoor public settings.
- Increase community education and public health messaging, with emphasis on the risk of serious disease in older individuals and in all age groups with preexisting medical conditions, including obesity, hypertension, and diabetes mellitus.
- Develop messaging and allocate resources to encourage mask use and social distancing at the upcoming Sturgis Motorcycle Rally.
- In areas with insufficient testing and long turnaround times, increase testing capacity by implementing pooled testing as described below.
- Ensure vigorous contact tracing, with early quarantine and isolation, focusing efforts in populous counties and where transmission is increasing, such as Sioux Falls, Vermillion, and Minnehaha, Lincoln, Union, Lake, and Clay counties.
- In all crowded workplace settings, such as meat processing or packing plants, enforce implementation of social distancing, the use of face masks, and early and vigorous contact investigation for all identified cases.
- Tribal Nations: Continue to promote social distancing and mask recommendations. Develop specific culturally relevant education and public health messaging. Pooled testing should be instituted for multi-generational households. Spaces to provide quarantine of contacts and isolation of cases should be provided as needed.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

SOUTH DAKOTA

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	564 (64)	+37.6%	9,748 (80)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	5.6%	+1.6%*	5.7%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	9,495** (1,073)	+2.1%**	205,390** (1,675)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	8 (1)	+33.3%	102 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	1.0%	-1.9%*	4.7%	12.3%

MOBILITY

* Indicates absolute change in percentage points.
** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

SOUTH DAKOTA

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	6	Sioux Falls Aberdeen Sioux City Mitchell Huron Vermillion
COUNTY LAST WEEK	1	Union	6	Minnehaha Lincoln Lake Brown Beadle Clay

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
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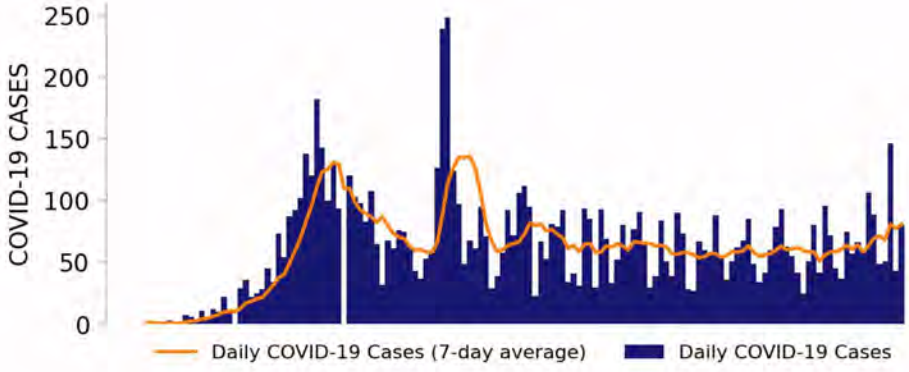
Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

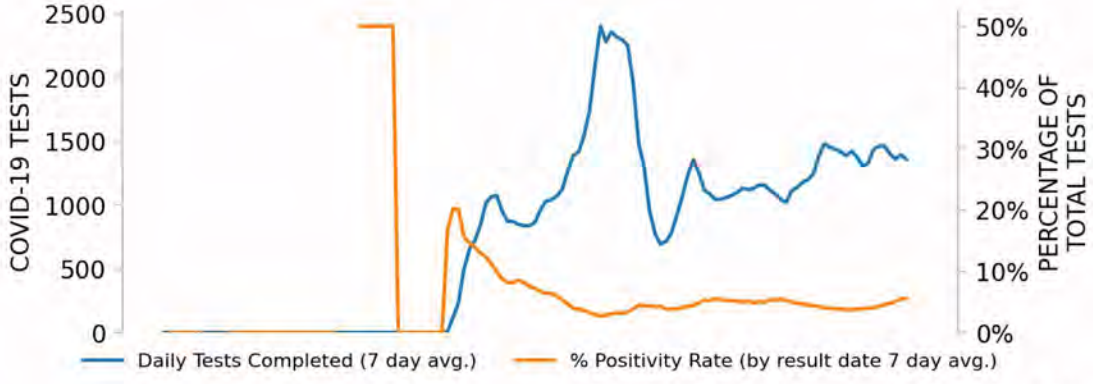
SOUTH DAKOTA

STATE REPORT | 08.02.2020

NEW CASES

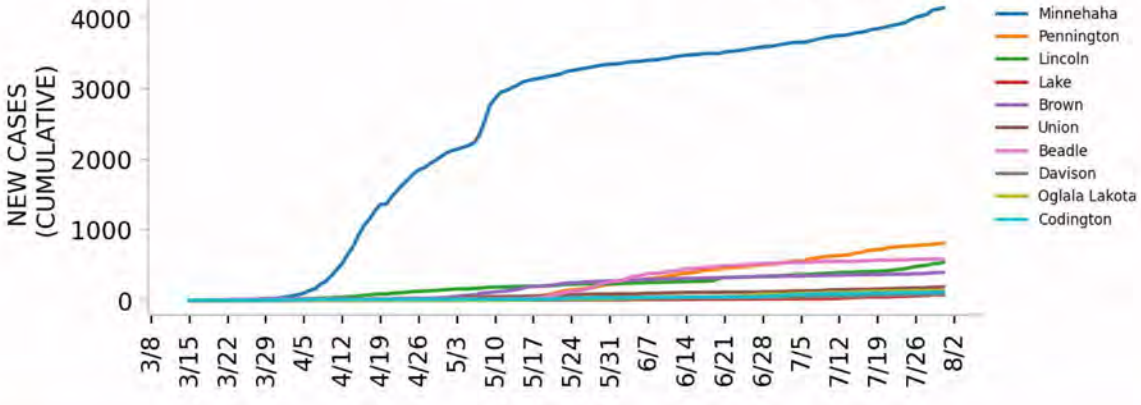


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

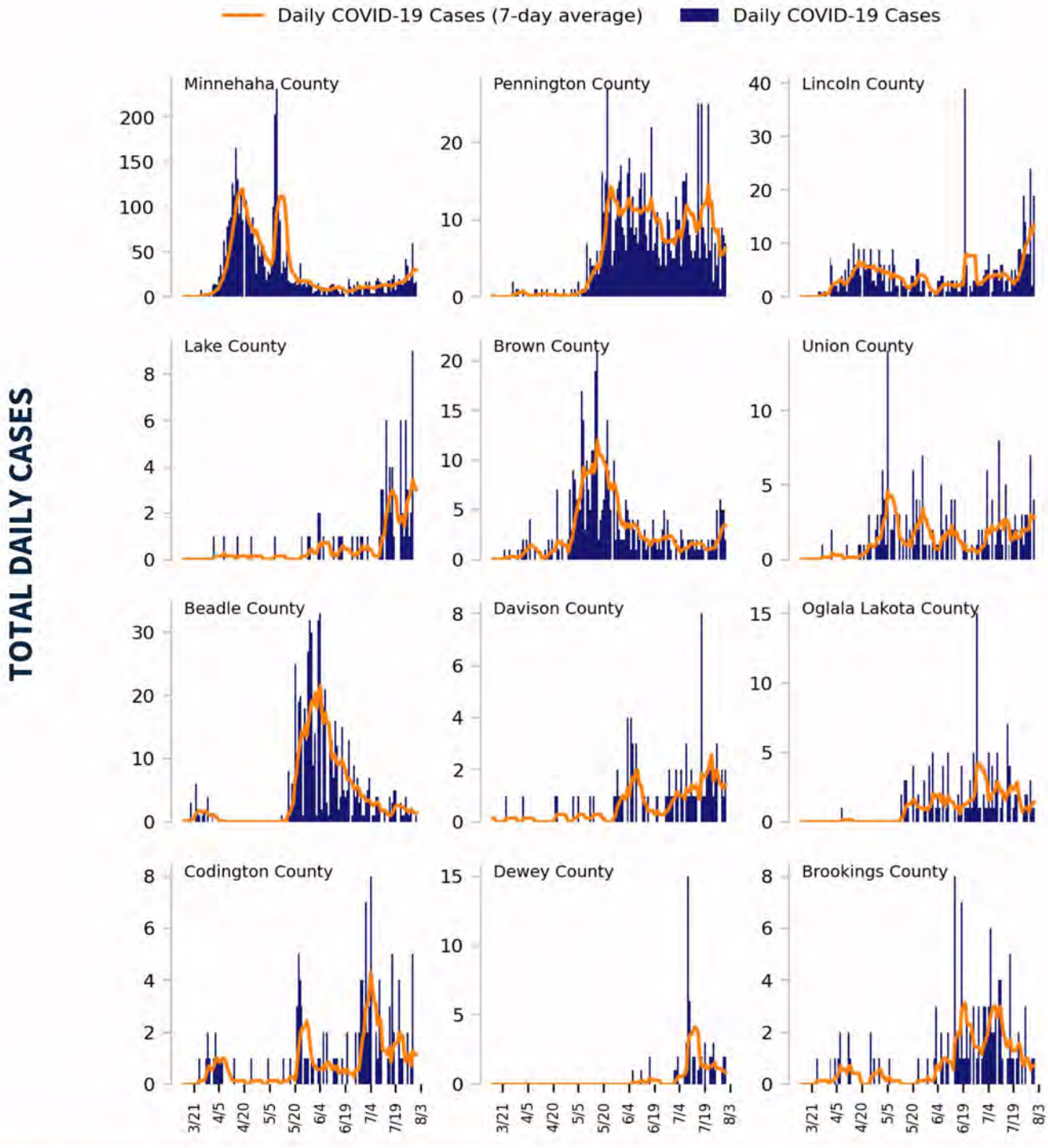


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

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SOUTH DAKOTA

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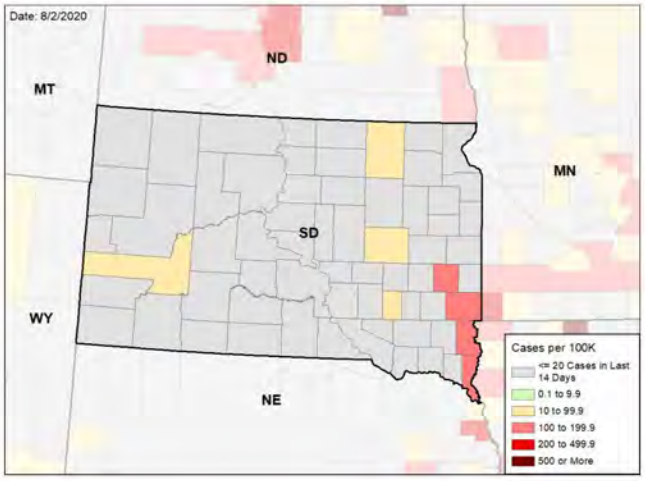
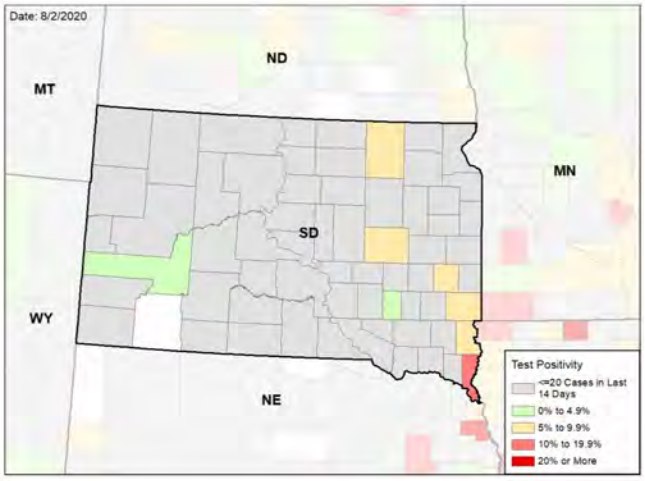
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

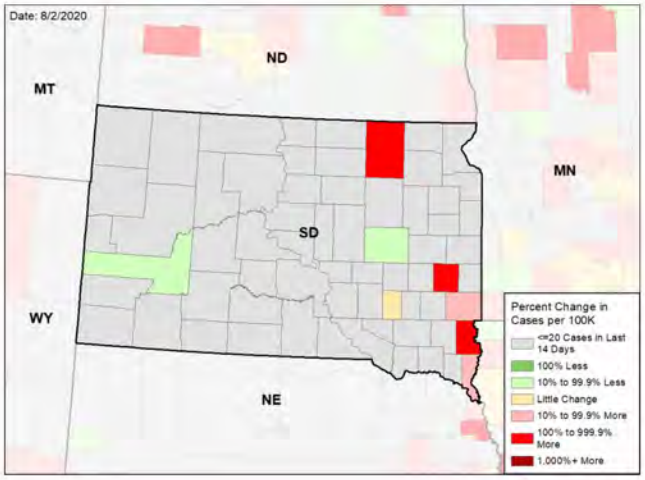
NEW CASES PER 100,000 DURING LAST WEEK



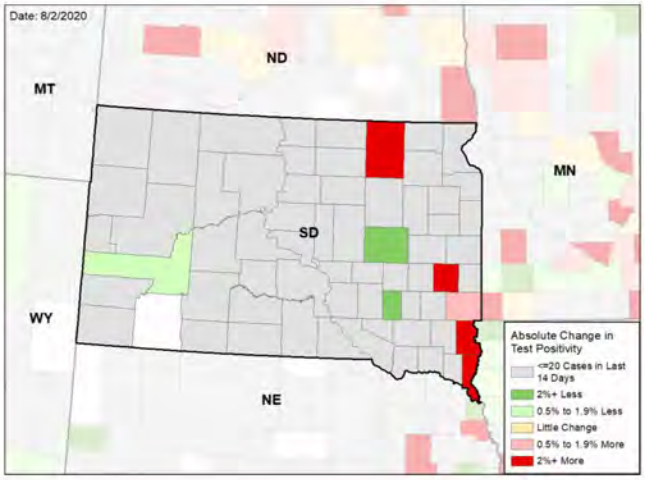
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



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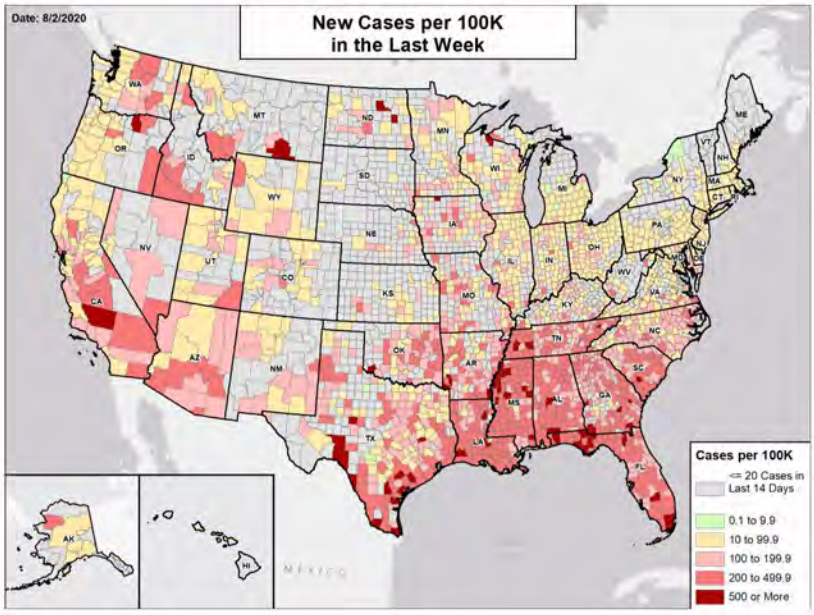
National Picture

NEW CASES PER 100,000 LAST WEEK



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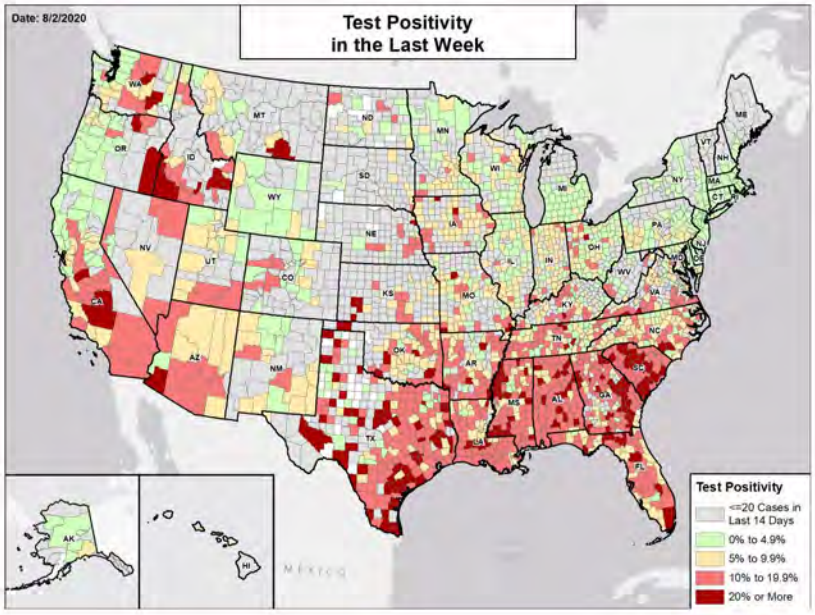

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Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

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TENNESSEE

STATE REPORT | 08.02.2020

SUMMARY

- Tennessee is in the red zone for cases, indicating more than 100 new cases per 100,000 population last week, and the yellow zone for test positivity, indicating a rate between 5% to 10%.
- Tennessee has seen an increase in new cases and a decrease in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Shelby County, 2. Davidson County, and 3. Rutherford County. These counties represent 34.5 percent of new cases in Tennessee.
- Tennessee had 247 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 3 to support operations activities from FEMA and 7 to support medical activities from VA.
- Between Jul 25 - Jul 31, on average, 144 patients with confirmed COVID-19 and 204 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Tennessee. An average of 85 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Implement mask requirement statewide; work with local communities to ensure high usage rates. Identify mechanisms to assess compliance with local regulations.
- Given continuing spread, limit social gatherings to 10 people or fewer.
- The nursing home facilities with more than 2 confirmed or suspected COVID-19 cases are largely in red and yellow zones. Preventing further spread in these counties is critical to protect the vulnerable nursing home population. Protect vulnerable populations in assisted living and long-term care facilities through weekly testing of all workers and requiring masks. In facilities with workers who tested positive, ensure all residents have been promptly tested and appropriate cohorting measures are in place. Conduct on-site inspections to ensure COVID-19 safety guidance and considerations are being implemented.
- Providing timely test results to individuals so they can isolate and stop the spread is critical. Implement the following to increase testing capacity and decrease turnaround times:
    - (1) For family and cohabitating households, screen entire households in a single test by pooling a sample of each member's specimen. For households that test positive, isolate and conduct follow-up individual tests.
    - (2) Expand testing capacity in public health labs by adding shifts, including weekend shifts, to reduce turnaround times.
    - (3) Require all universities with RNA detection platforms to use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Message to residents that if they vacation in an area with high COVID prevalence and return to an area with low COVID prevalence, they should: remain socially distanced, stay masked in all public spaces, and avoid all indoor gatherings where social distancing and masks cannot be maintained.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

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TENNESSEE

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	16,865 (247)	+11.9%	158,298 (237)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	9.6%	-1.8%*	13.6%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	58,430** (856)	+6.3%**	1,078,189** (1,611)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	123 (2)	+0.8%	2,494 (4)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	14.8%	+0.7%*	22.5%	12.3%

MOBILITY

* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

TENNESSEE

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	**12**	Memphis Morristown Jackson Cleveland Sevierville Kingsport-Bristol Tullahoma-Manchester Union City Brownsville Newport Shelbyville Lawrenceburg	**10**	Nashville-Davidson--Murfreesboro--Franklin Knoxville Chattanooga Johnson City Clarksville McMinnville Dyersburg Athens Lewisburg Paris
COUNTY LAST WEEK	**42** **Top 12 shown (full list below)**	Shelby Sumner Montgomery Wilson Sevier Hamblen Bradley Maury Robertson Madison Tipton Hardeman	**33** **Top 12 shown (full list below)**	Davidson Rutherford Hamilton Knox Williamson Blount Washington Sullivan Putnam Gibson Jefferson Loudon

All Red Counties: Shelby, Sumner, Montgomery, Wilson, Sevier, Hamblen, Bradley, Maury, Robertson, Madison, Tipton, Hardeman, Henderson, Dickson, Obion, Cheatham, Macon, Haywood, Cocke, Lauderdale, Coffee, Bedford, Lawrence, DeKalb, Hawkins, McNairy, Smith, Crockett, Lincoln, Decatur, Hickman, Grainger, White, Johnson, Humphreys, Hancock, Jackson, Lake, Clay, Houston, Grundy, Van Buren

All Yellow Counties: Davidson, Rutherford, Hamilton, Knox, Williamson, Blount, Washington, Sullivan, Putnam, Gibson, Jefferson, Loudon, Warren, Roane, Fayette, Dyer, Giles, McMinn, Marshall, Franklin, Carroll, Claiborne, Henry, Chester, Unicoi, Benton, Trousdale, Cannon, Meigs, Fentress, Morgan, Perry, Bledsoe

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

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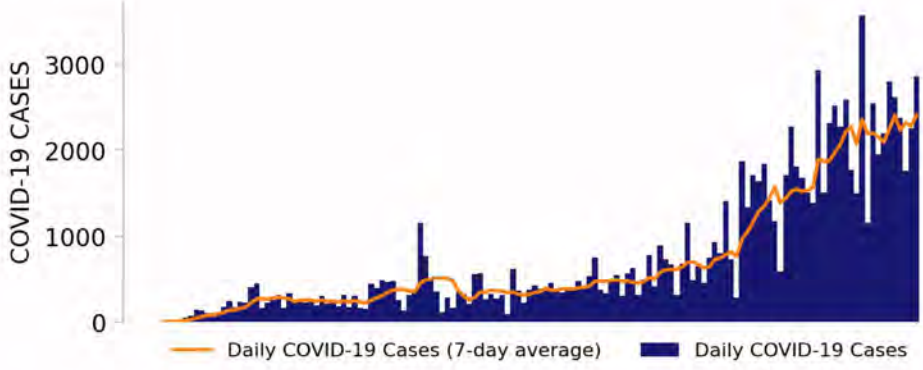
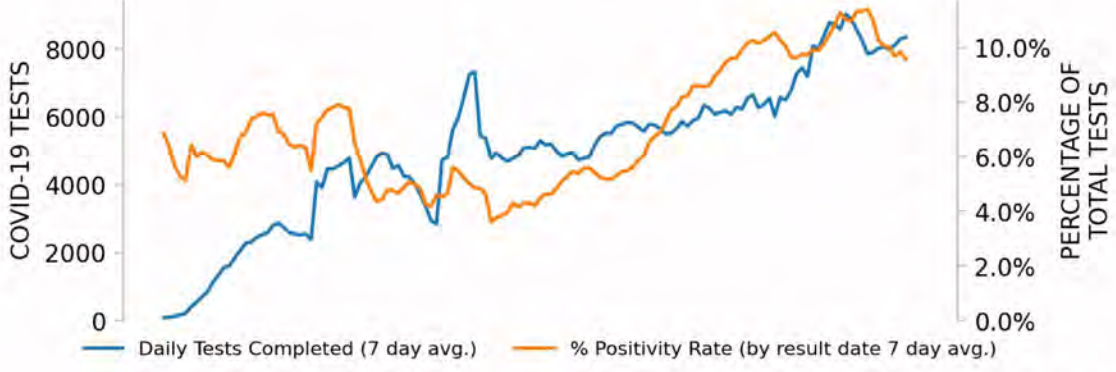
NEW CASES

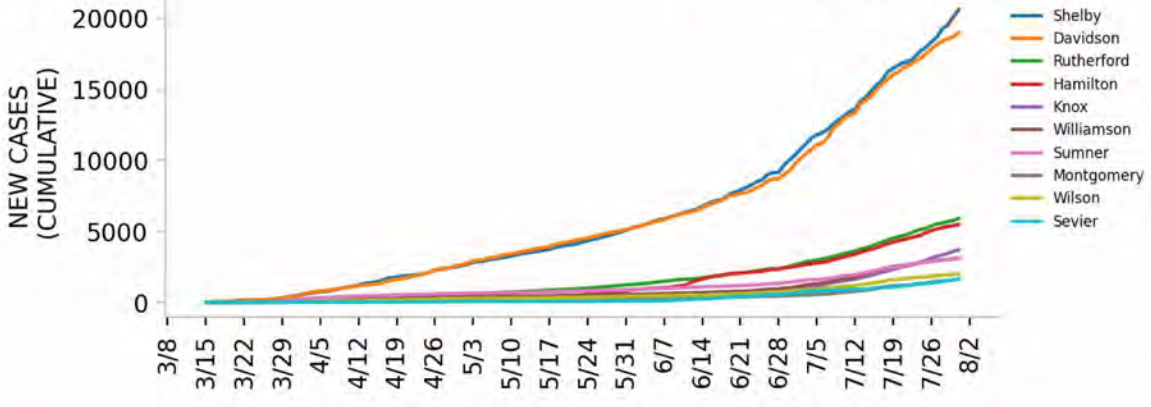


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

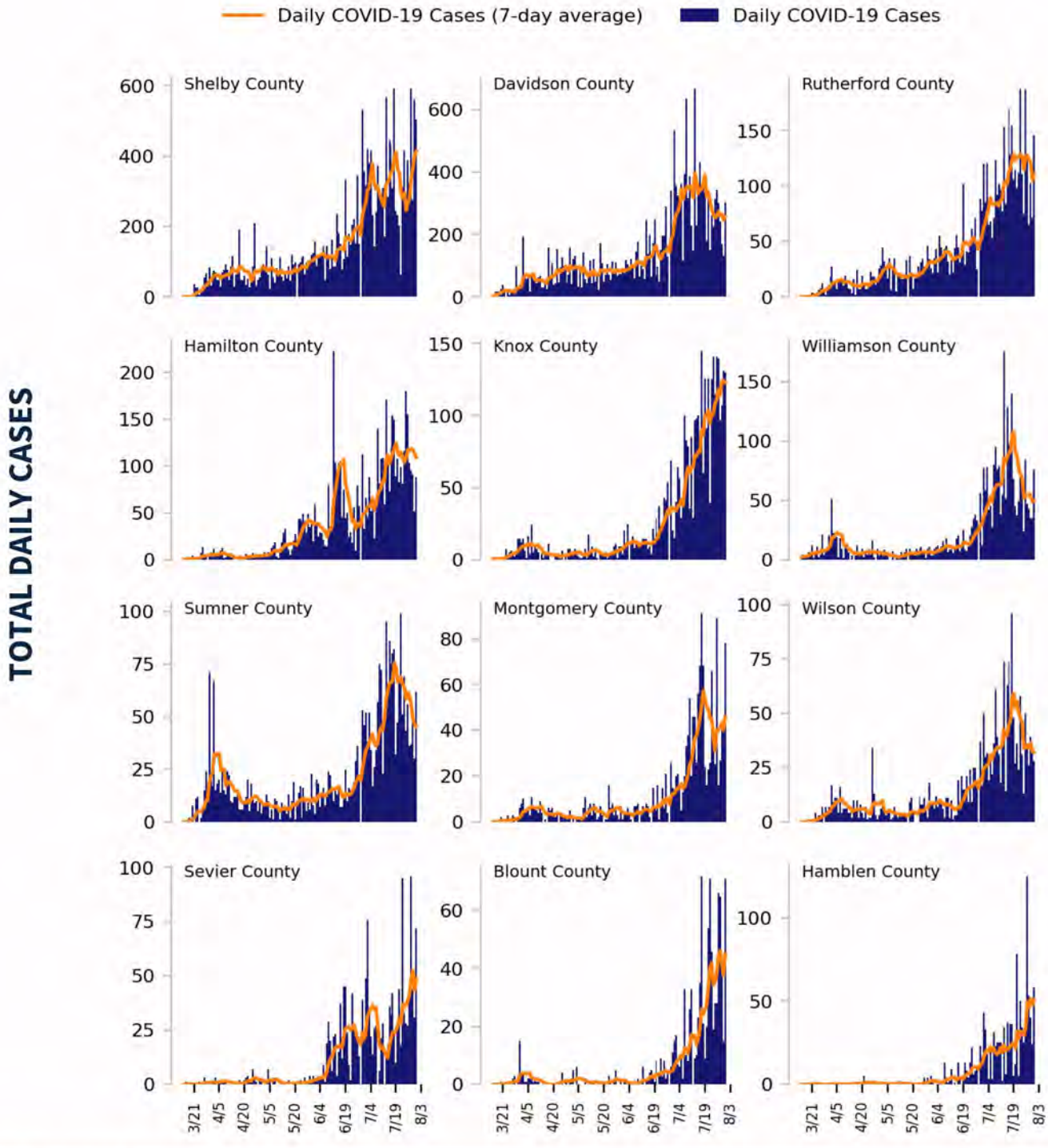


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

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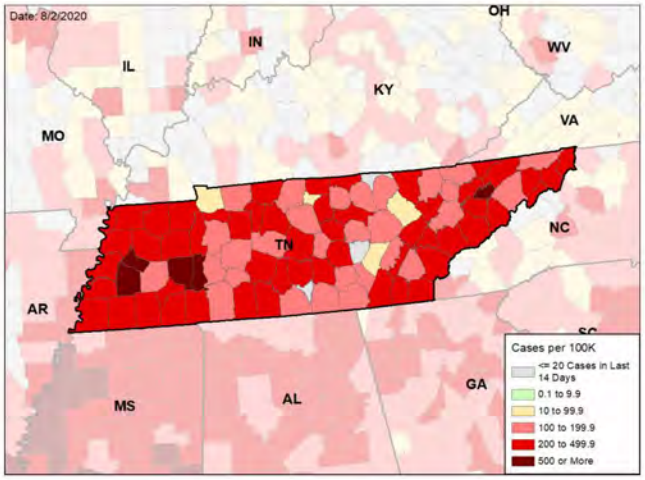
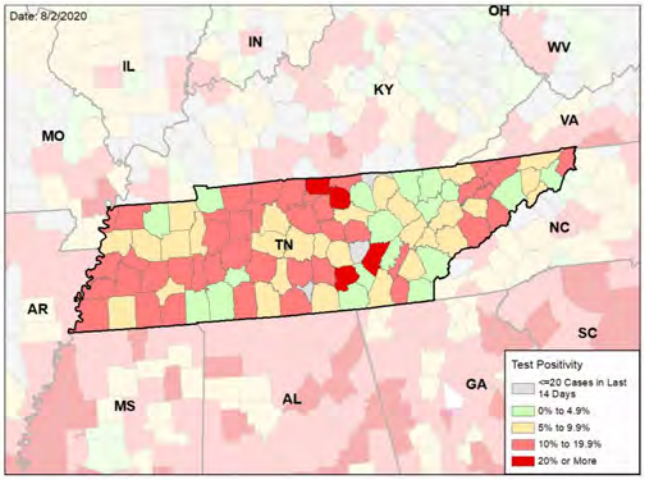
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

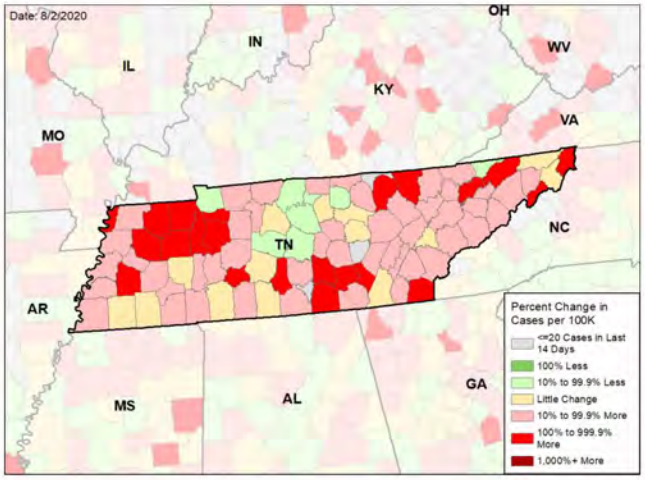
NEW CASES PER 100,000 DURING LAST WEEK



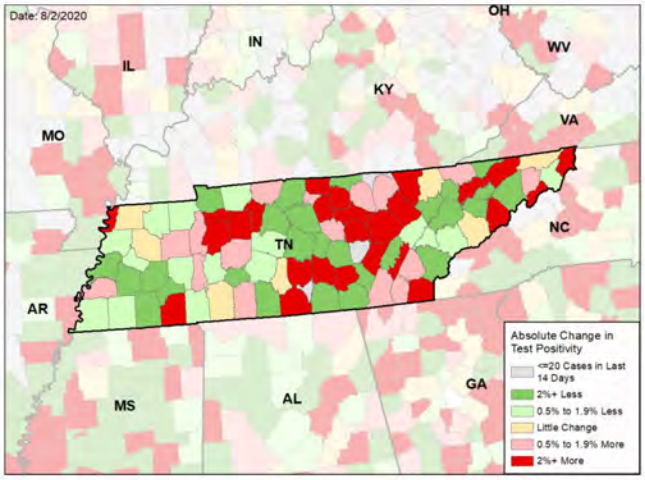
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

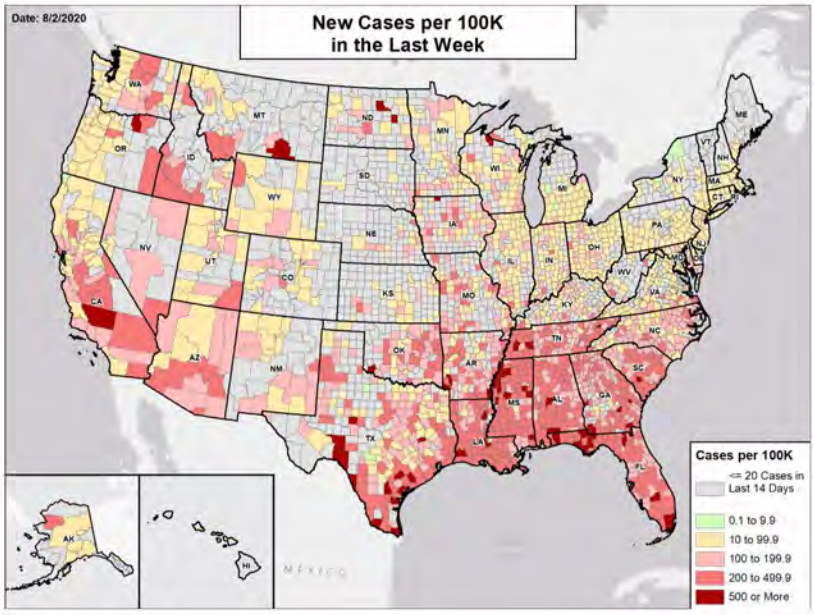


DATA SOURCES

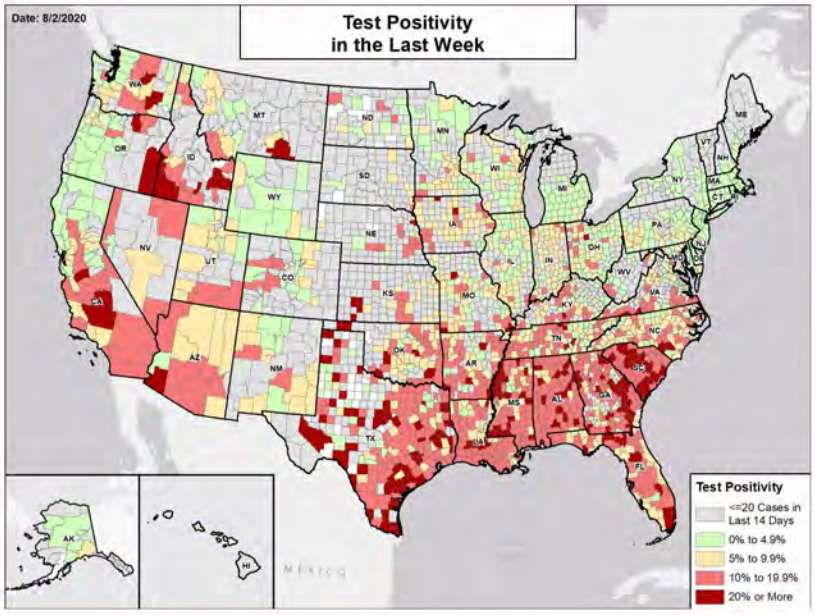
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

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COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

TEXAS

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SUMMARY

- Texas is in the red zone for COVID-19 cases, indicating more than 100 new cases per 100,000 population last week, and the red zone for COVID-19 test positivity, indicating a rate above 10%.
- Texas has seen stability in new cases and a decrease in testing positivity over the past week, indicating that mitigation efforts are beginning to work.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Harris County, 2. Bexar County, and 3. Dallas County. These counties represent 38.1 percent of new cases in Texas.
- Concerns remain regarding the Houston area, which has not seen the same level of improvement as many of the other counties and large metros.
- Texas had 207 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 578 to support medical activities from DOD; 10 to support operations activities from DOD; 72 to support operations activities from FEMA; 45 to support medical activities from ASPR; 19 to support operations activities from ASPR; 2 to support epidemiology activities from CDC; 12 to support operations activities from USCG; 26 to support medical activities from VA; and 1 to support operations activities from VA.
- Between Jul 25 - Jul 31, on average, 678 patients with confirmed COVID-19 and 620 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Texas. An average of 78 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Continue the aggressive protection of those in nursing homes, assisted living, and long-term care facilities by ensuring access to rapid facility-wide testing in response to a resident or staff member with COVID-19. Ensure social distancing and universal facemask use.
- Continue the statewide mask mandate in all counties with 20 or more cases. Multiple counties and metros are now in this category.
- Continue the bar closures in all counties with greater than 5% test positivity, increase outdoor dining opportunities, and limit indoor dining to 25% of normal capacity, especially in counties such as Harris that are improving at slower rates. Ensure every citizen knows to limit social gatherings to fewer than 10 people.
- Continue the scale-up of testing, moving to community-led neighborhood testing. Work with local community groups to increase household testing of multigenerational households, with clear guidance on test positive isolation procedures and mask use.
- Ensure all individuals and households engaged in any multi-household activities are immediately tested, either in pools or as individuals.
- Increase messaging of the risk of serious disease in all age groups with preexisting medical conditions, including obesity, hypertension, and diabetes mellitus.
- Expand testing capacity in public health labs by adding shifts and weekend shifts to reduce turnaround times. Institute 3:1 or 2:1 pools of test specimens.
- Require all universities with RNA detection platforms to use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

TEXAS

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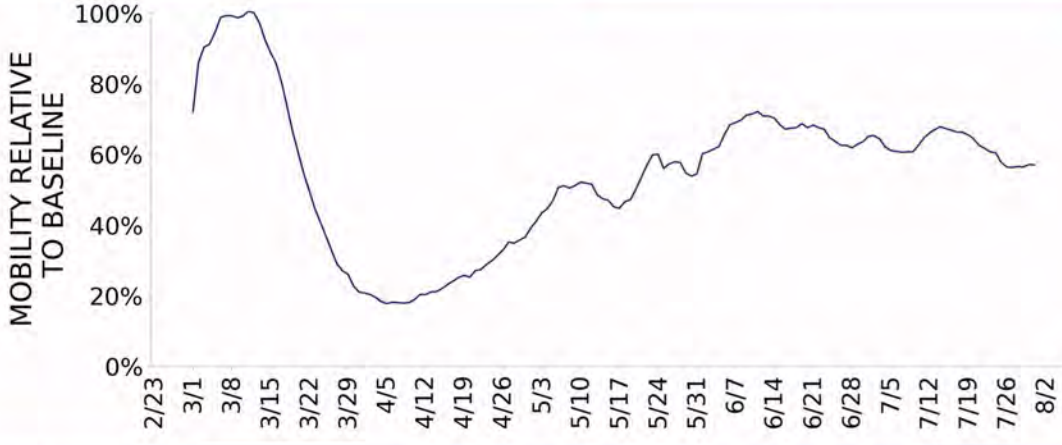
	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	60,001 (207)	-3.7%	87,300 (204)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	16.1%	-2.2%*	12.2%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	101,705** (351)	-50.7%**	317,760** (744)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	2,565 (9)	+230.1%	2,954 (7)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	25.1%	+0.1%*	21.6%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

TEXAS

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	48 Top 12 shown (full list below)	Houston-The Woodlands-Sugar Land Dallas-Fort Worth-Arlington San Antonio-New Braunfels Austin-Round Rock-Georgetown McAllen-Edinburg-Mission Brownsville-Harlingen Corpus Christi Laredo Beaumont-Port Arthur Waco Killeen-Temple Victoria	16 Top 12 shown (full list below)	El Paso Lubbock Tyler Longview Abilene Jacksonville Wichita Falls Athens Corsicana Sherman-Denison Brenham Gainesville
COUNTY LAST WEEK	95 Top 12 shown (full list below)	Harris Bexar Dallas Tarrant Hidalgo Cameron Nueces Webb Brazoria Galveston Denton Jefferson	49 Top 12 shown (full list below)	Travis El Paso Montgomery Fort Bend Collin Williamson Lubbock Smith Hays Guadalupe Parker DeWitt

All Red CBSAs: Houston-The Woodlands-Sugar Land, Dallas-Fort Worth-Arlington, San Antonio-New Braunfels, Austin-Round Rock-Georgetown, McAllen-Edinburg-Mission, Brownsville-Harlingen, Corpus Christi, Laredo, Beaumont-Port Arthur, Waco, Killeen-Temple, Victoria, Odessa, College Station-Bryan, Eagle Pass, Midland, Rio Grande City-Roma, Amarillo, Del Rio, Lufkin, San Angelo, Huntsville, Nacogdoches, Palestine, Plainview, Alice, Mount Pleasant, Beeville, Raymondville, Port Lavaca, El Campo, Uvalde, Granbury, Stephenville, Paris, Texarkana, Kingsville, Bay City, Brownwood, Hereford, Pearsall, Mineral Wells, Andrews, Rockport, Dumas, Zapata, Pecos, Vernon

All Yellow CBSAs: El Paso, Lubbock, Tyler, Longview, Abilene, Jacksonville, Wichita Falls, Athens, Corsicana, Sherman-Denison, Brenham, Gainesville, Fredericksburg, Big Spring, Bonham, Lamesa

All Red Counties: Harris, Bexar, Dallas, Tarrant, Hidalgo, Cameron, Nueces, Webb, Brazoria, Galveston, Denton, Jefferson, McLennan, Victoria, Bell, Ector, Maverick, Midland, Starr, Brazos, Val Verde, Ellis, Angelina, Tom Green, Kaufman, Johnson, Comal, Bastrop, Walker, Gregg, Randall, Madison, San Patricio, Orange, Nacogdoches, Potter, Caldwell, Anderson, Hale, Lavaca, Bee, Liberty, Chambers, Polk, Rockwall, Hunt, Jim Wells, Willacy, Burnet, Calhoun, Titus, Wharton, Gonzales, Uvalde, Hood, Erath, Lamar, Jackson, Jasper, Karnes, Matagorda, Grimes, Kleberg, Brown, Deaf Smith, Milam, Hill, Waller, Frio, Live Oak, Refugio, Palo Pinto, Robertson, Andrews, Limestone, Aransas, Cass, Moore, Dimmit, Zapata, Austin, Runnels, Shelby, Bosque, Comanche, Gaines, Duval, Newton, Reeves, Goliad, Brooks, Floyd, Wilbarger, Brewster, Childress

All Yellow Counties: Travis, El Paso, Montgomery, Fort Bend, Collin, Williamson, Lubbock, Smith, Hays, Guadalupe, Parker, DeWitt, Taylor, Hardin, Cherokee, Henderson, Wichita, Navarro, Grayson, Wilson, Medina, Coryell, Harrison, Bowie, Atascosa, Fayette, Wise, Zavala, Washington, Cooke, Gillespie, Upshur, Burleson, Howard, Colorado, Fannin, Tyler, Rusk, Trinity, Pecos, Freestone, Lee, Falls, Dawson, Leon, Lampasas, Eastland, Rains, Montague

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
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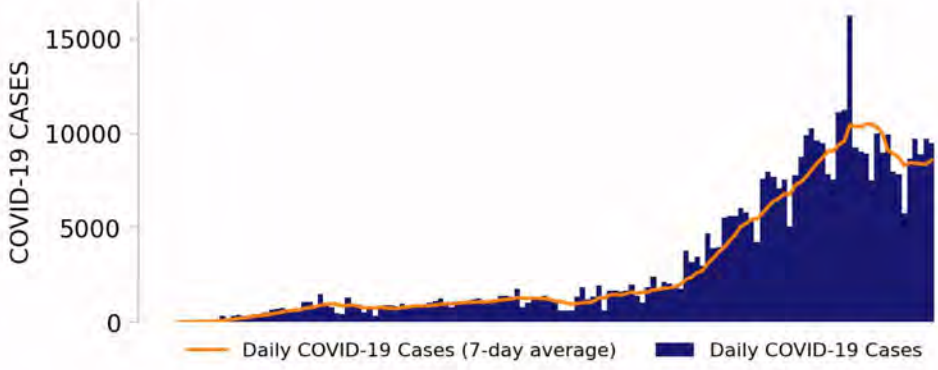
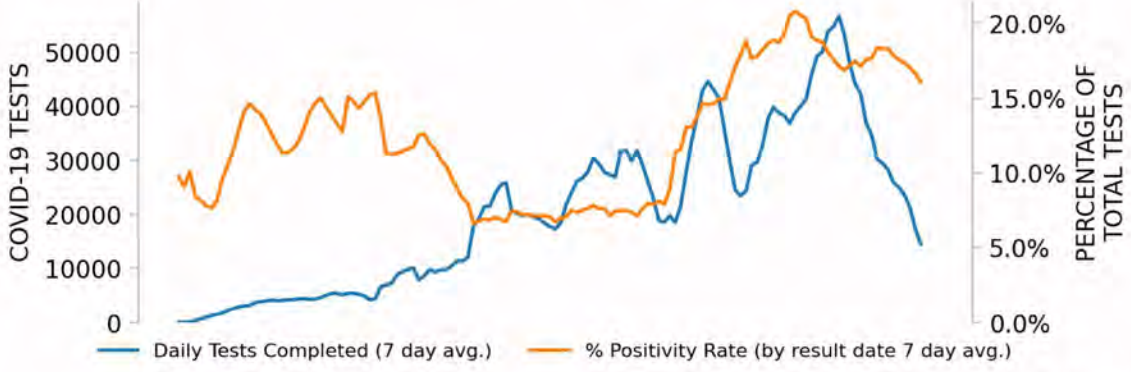
TEXAS

STATE REPORT | 08.02.2020

NEW CASES

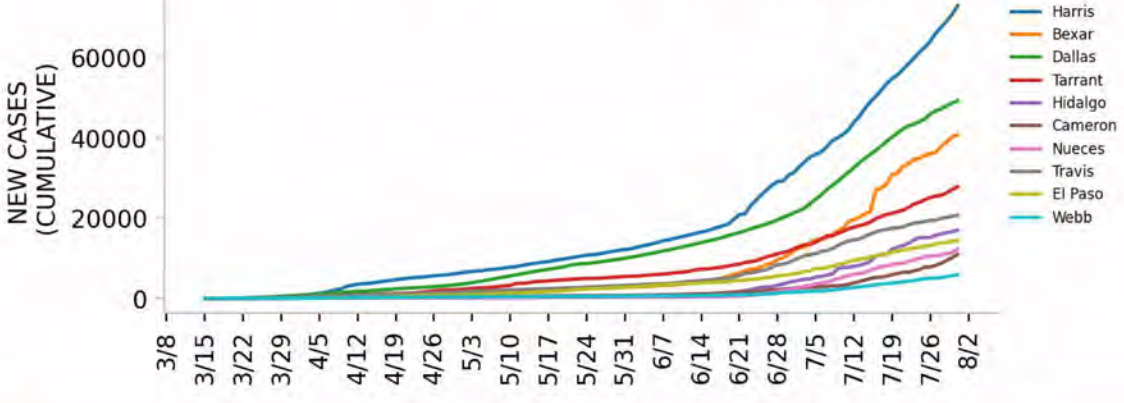


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

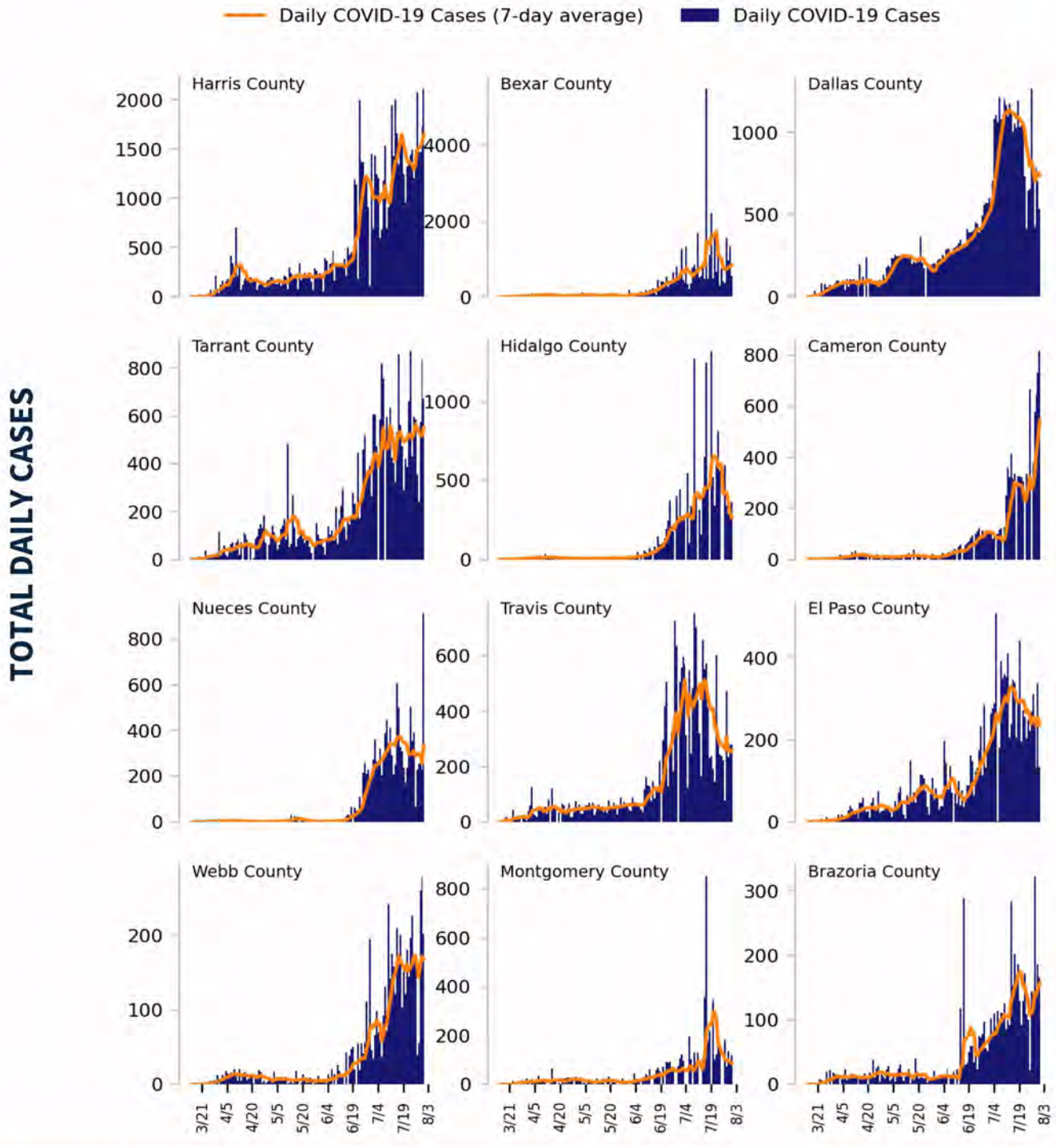


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

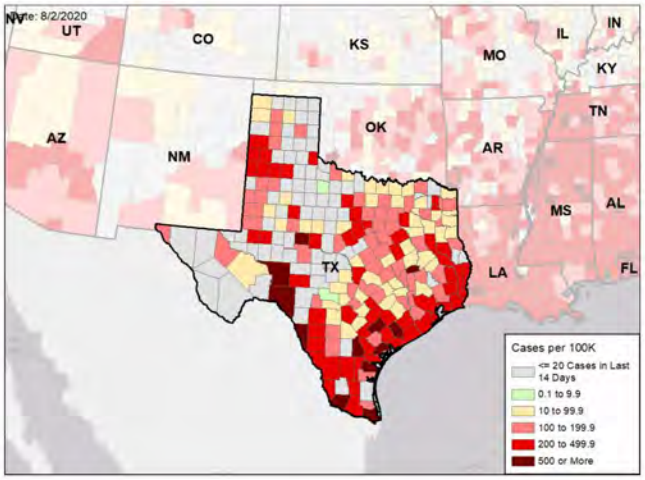
Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

TEXAS

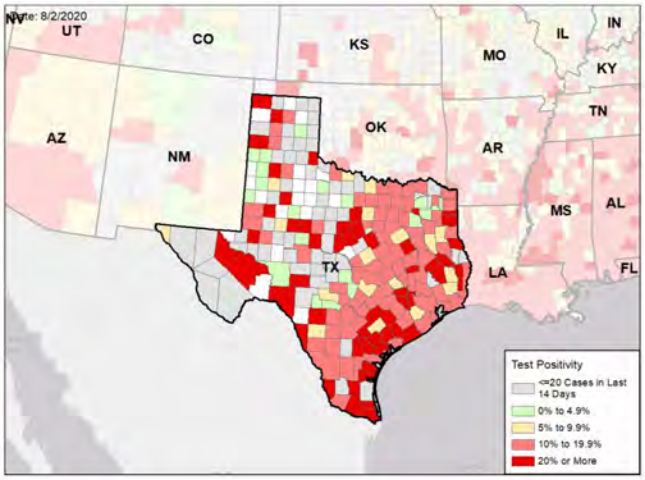
STATE REPORT | 08.02.2020

CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

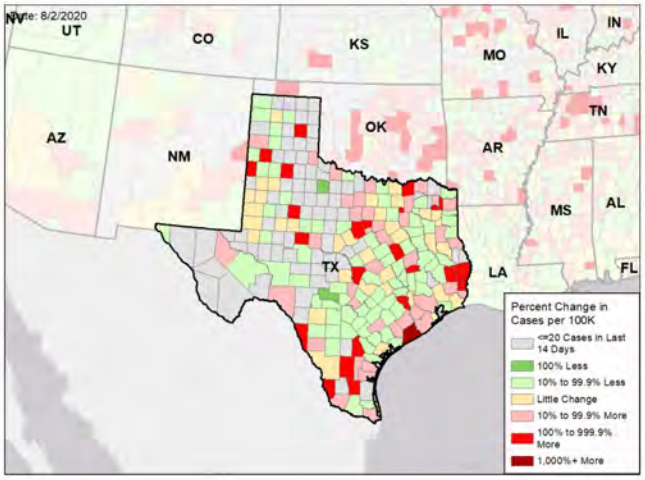
NEW CASES PER 100,000 DURING LAST WEEK



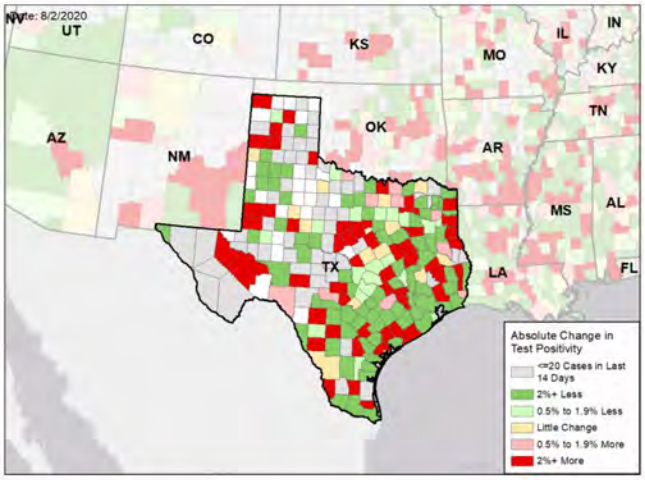
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

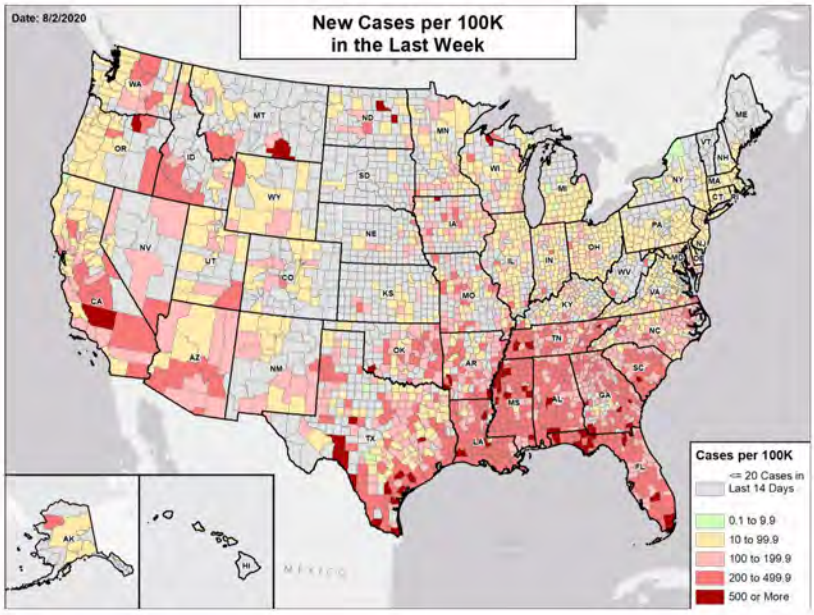


DATA SOURCES

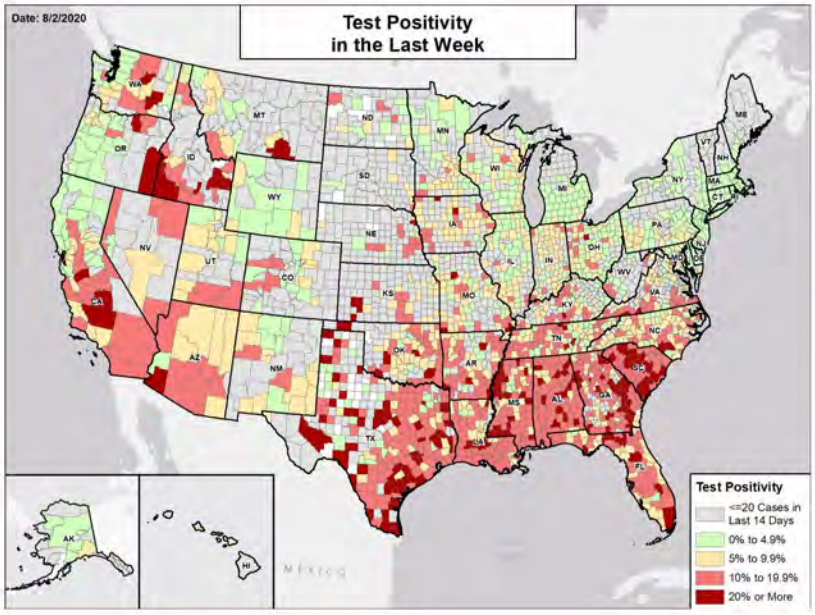
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

STATE REPORT | 08.02.2020

COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

UTAH

STATE REPORT | 08.02.2020

SUMMARY

- Utah is in the red zone for cases, indicating more than 100 new cases per 100,000 population last week, and the yellow zone for test positivity, indicating a rate between 5% to 10%.
- Utah has seen a decrease in new cases and stability in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Salt Lake County, 2. Utah County, and 3. Davis County. These counties represent 73.4 percent of new cases in Utah.
- Utah had 101 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 2 to support operations activities from FEMA.
- Between Jul 25 - Jul 31, on average, 17 patients with confirmed COVID-19 and 29 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Utah. An average of 81 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- In red and yellow zones, closing bars and reducing indoor dining at restaurants is critical to disrupt transmission.
- Keep mask requirement in place statewide. Work with local communities to ensure high usage rates. Identify mechanisms to assess compliance with local regulations.
- Message to residents that if they vacation in an area with high COVID prevalence and return to an area with low COVID prevalence, they should: remain socially distanced, stay masked in all public spaces, and avoid all indoor gatherings where social distancing and masks cannot be maintained.
- Providing timely test results to individuals so they can isolate and stop the spread is critical. Implement the following to increase testing capacity and decrease turnaround times:
    - (1) For family and cohabitating households, screen entire households in a single test by pooling a sample of each member's specimen. For households that test positive, isolate and conduct follow-up individual tests.
    - (2) Expand testing capacity in public health labs by adding shifts, including weekend shifts, to reduce turnaround times.
    - (3) Require all universities with RNA detection platforms to use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Conduct on-site inspections in nursing homes with two or more confirmed or suspected positives to ensure COVID-19 safety guidance and considerations are being implemented. Preventing further spread in these areas is critical to protect the vulnerable nursing home population. Protect vulnerable populations in assisted living and long-term care facilities through weekly testing of all workers and requiring masks. In facilities with workers who tested positive, ensure all residents have been promptly tested and appropriate cohorting measures are in place.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

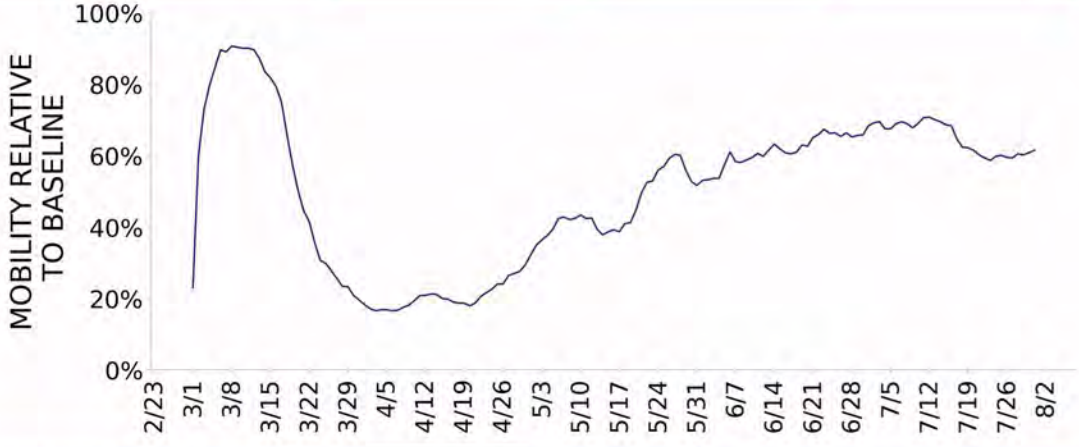
COVID-19

UTAH

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	3,250 (101)	-26.1%	9,748 (80)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	8.4%	-0.2%*	5.7%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	54,393** (1,697)	-15.5%**	205,390** (1,675)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	30 (1)	-23.1%	102 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	8.1%	+2.5%*	4.7%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

UTAH

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	7	Salt Lake City Provo-Orem Ogden-Clearfield St. George Heber Logan Cedar City
COUNTY LAST WEEK	2	San Juan Juab	11	Salt Lake Utah Davis Weber Washington Cache Tooele Iron Summit Duchesne Millard

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

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POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
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Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
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- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
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POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
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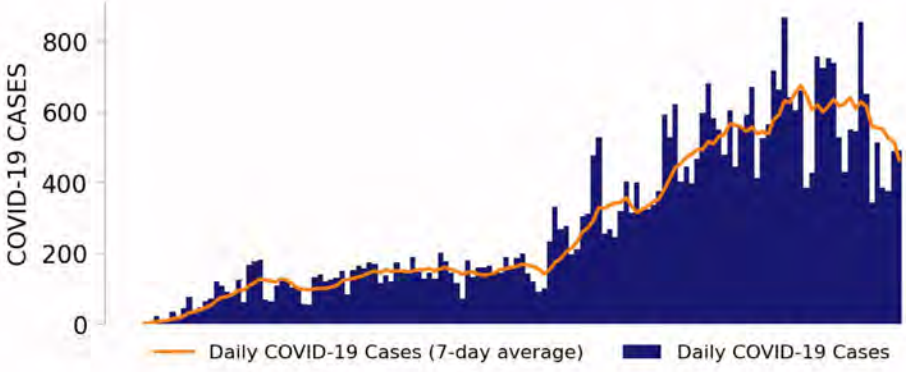
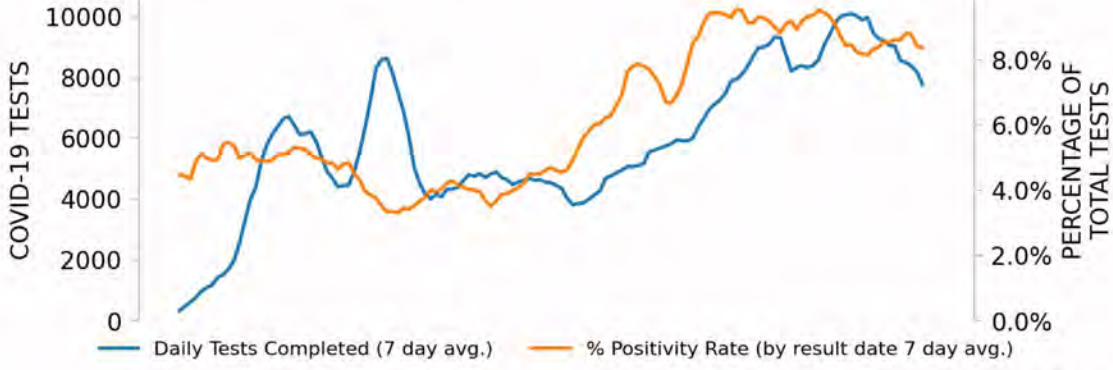
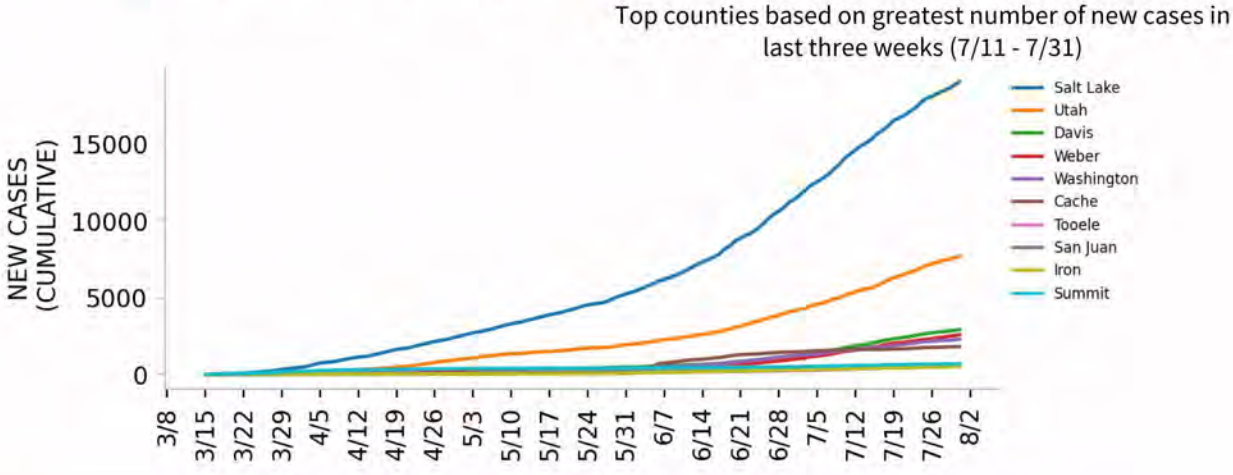
NEW CASES



TESTING



TOP COUNTIES



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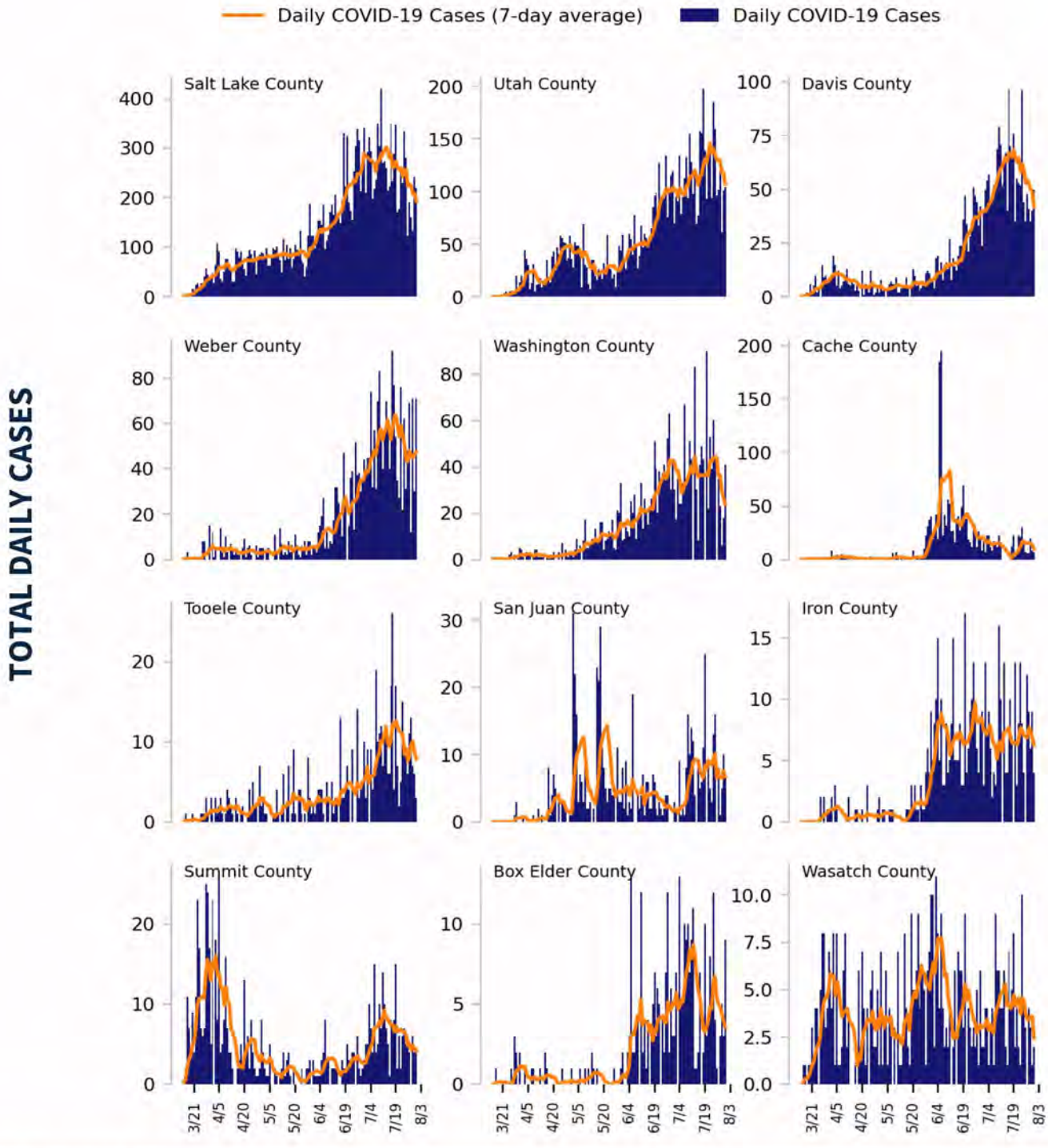
Top 12 counties based on number of new cases in the last 3 weeks



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UTAH

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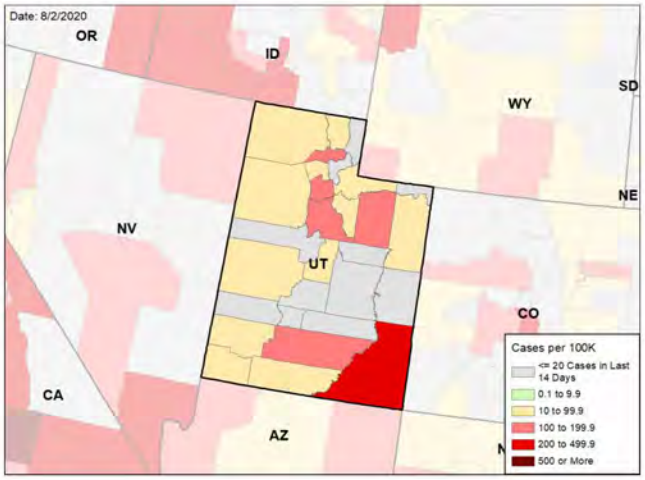
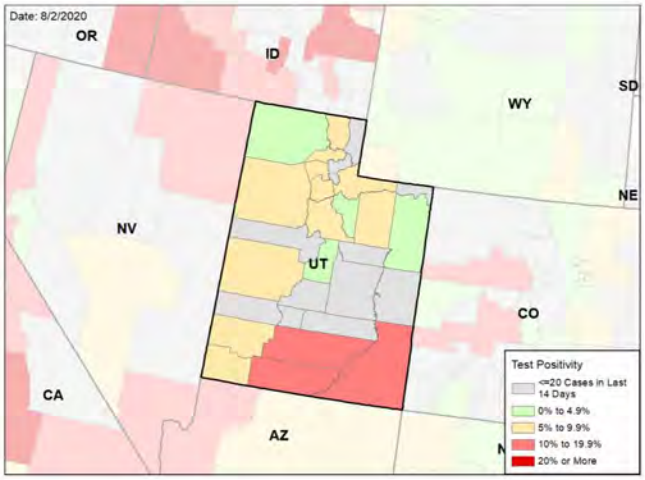
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

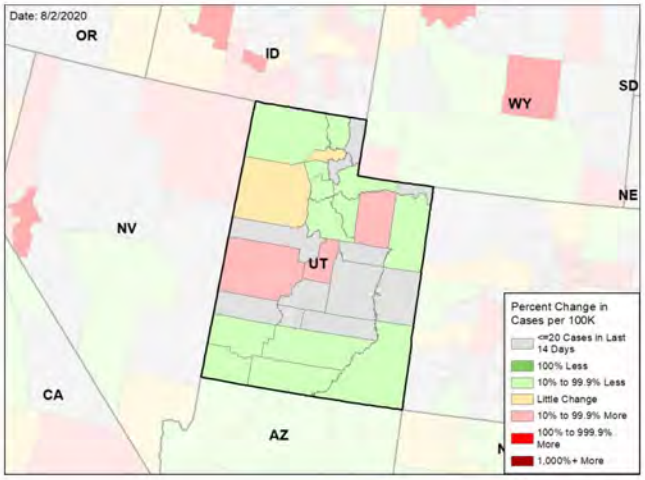
NEW CASES PER 100,000 DURING LAST WEEK



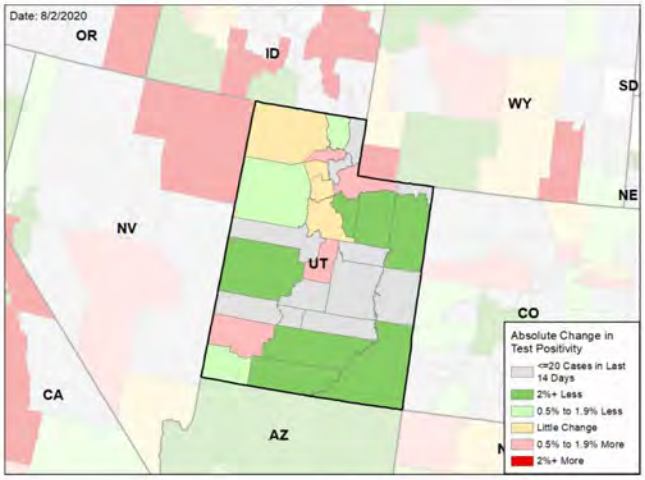
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

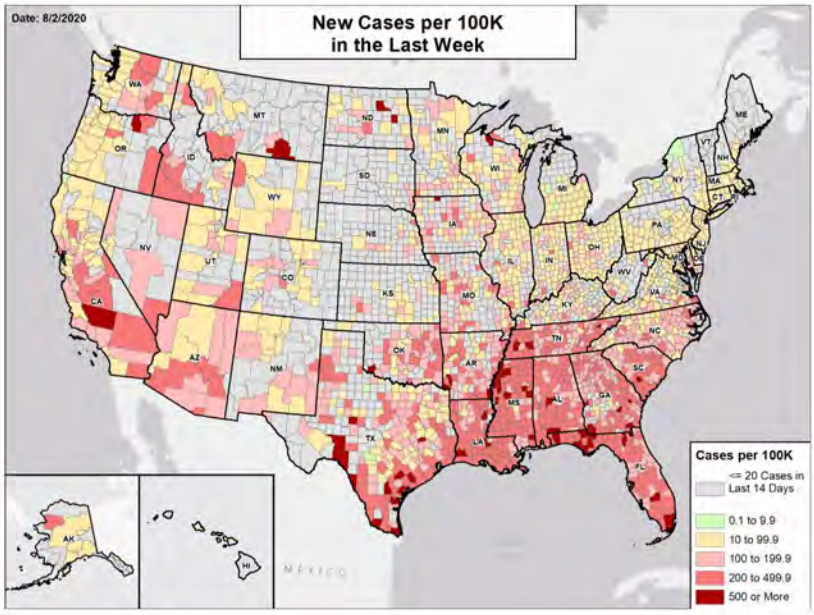


DATA SOURCES

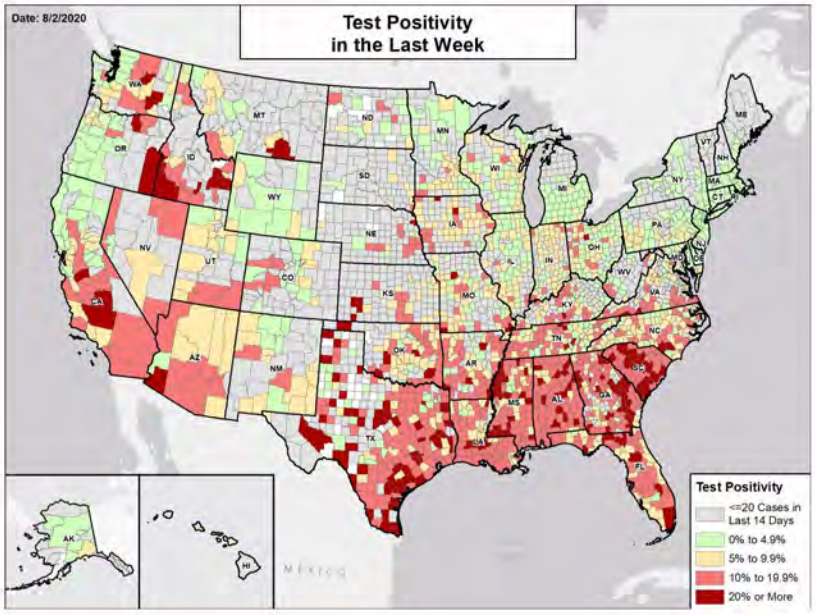
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

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COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

VERMONT

STATE REPORT | 08.02.2020

SUMMARY

- Vermont is in the green zone for cases, indicating below 10 cases per 100,000 population last week, and the green zone for test positivity, indicating a rate below 5%.
- Vermont has seen a decrease in new cases and stability in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Chittenden County, 2. Rutland County, and 3. Bennington County. These counties represent 67.4 percent of new cases in Vermont.
- Vermont had 5 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 1 to support operations activities from FEMA and 1 to support operations activities from USCG.
- Between Jul 25 - Jul 31, on average, 0 patients with confirmed COVID-19 and 11 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Vermont. An average of 74 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Continue public awareness efforts on the public health and economic benefits of the new state masking mandate. The mask wearing promotion poster is commended.
- Recommend analysis of statistics from the testing programs for workers and residents of group living facilities and sharing of lessons learned. Continue comprehensive testing for workers and residents and ensure social distancing and universal facemask use. Require masks and social distancing for all visitors.
- Continue the scale-up of the vigorous testing program, the careful monitoring of changes in cases, testing and hospitalizations, and implementation of contact tracing.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

COVID-19

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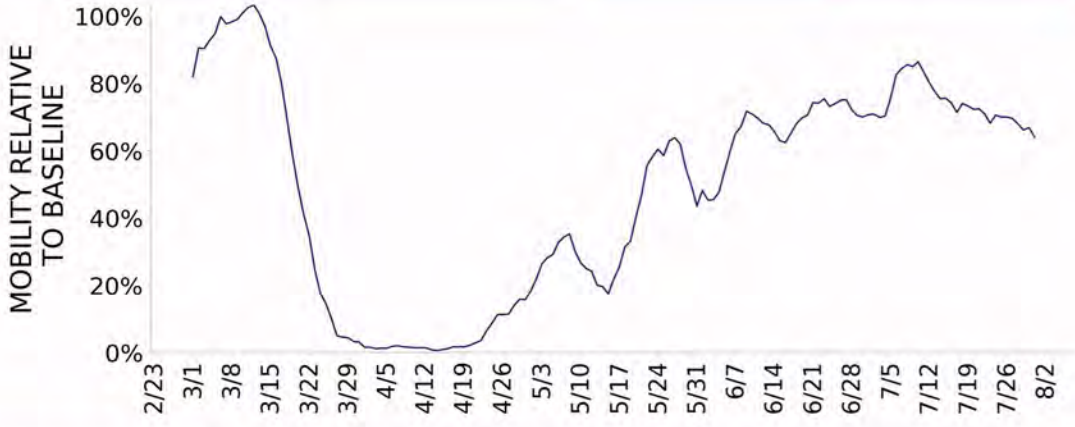
	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	30 (5)	-41.2%	4,853 (33)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	0.7%	+0.0%*	1.9%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	10,222** (1,638)	-21.6%**	229,303** (1,545)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	1 (0)	N/A	144 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	0.0%	+0.0%*	4.3%	12.3%

MOBILITY



* Indicates absolute change in percentage points.
** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

VERMONT

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	0	N/A
COUNTY LAST WEEK	0	N/A	0	N/A

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
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Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

VERMONT

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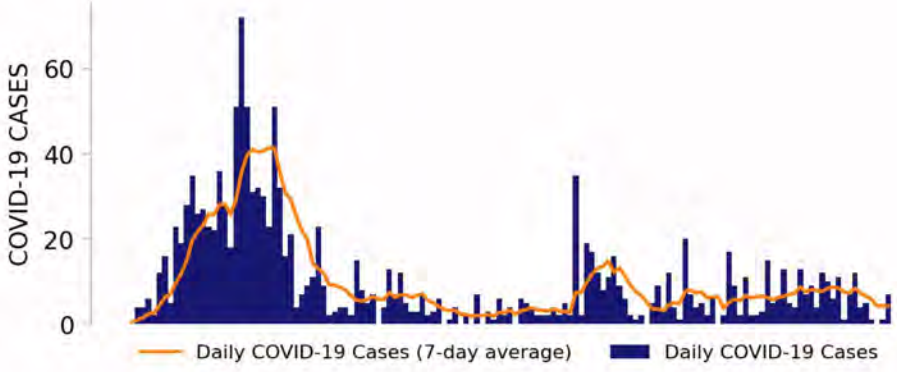
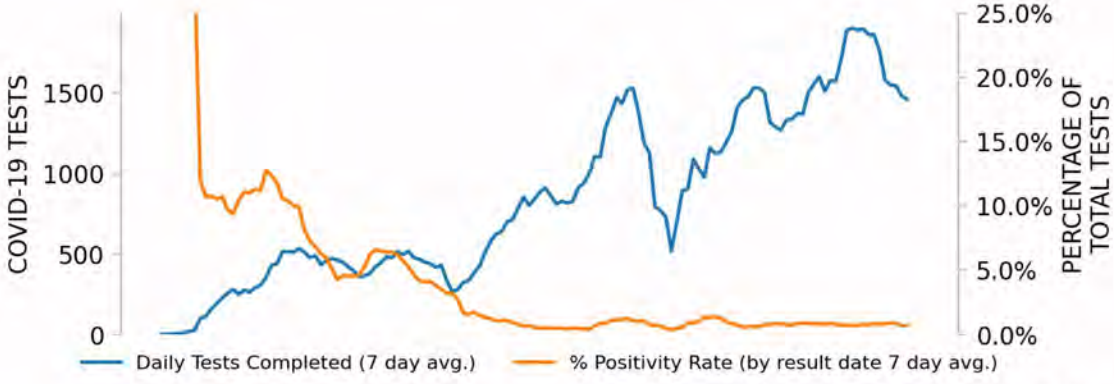
NEW CASES

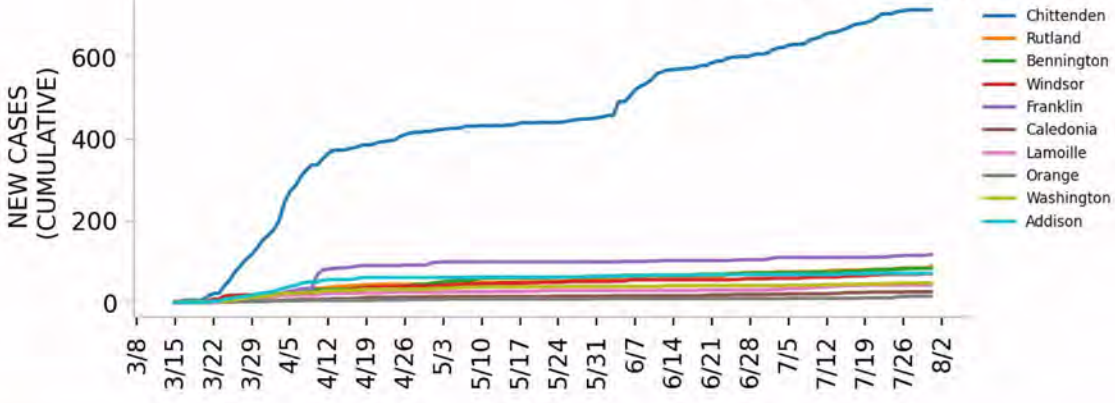


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

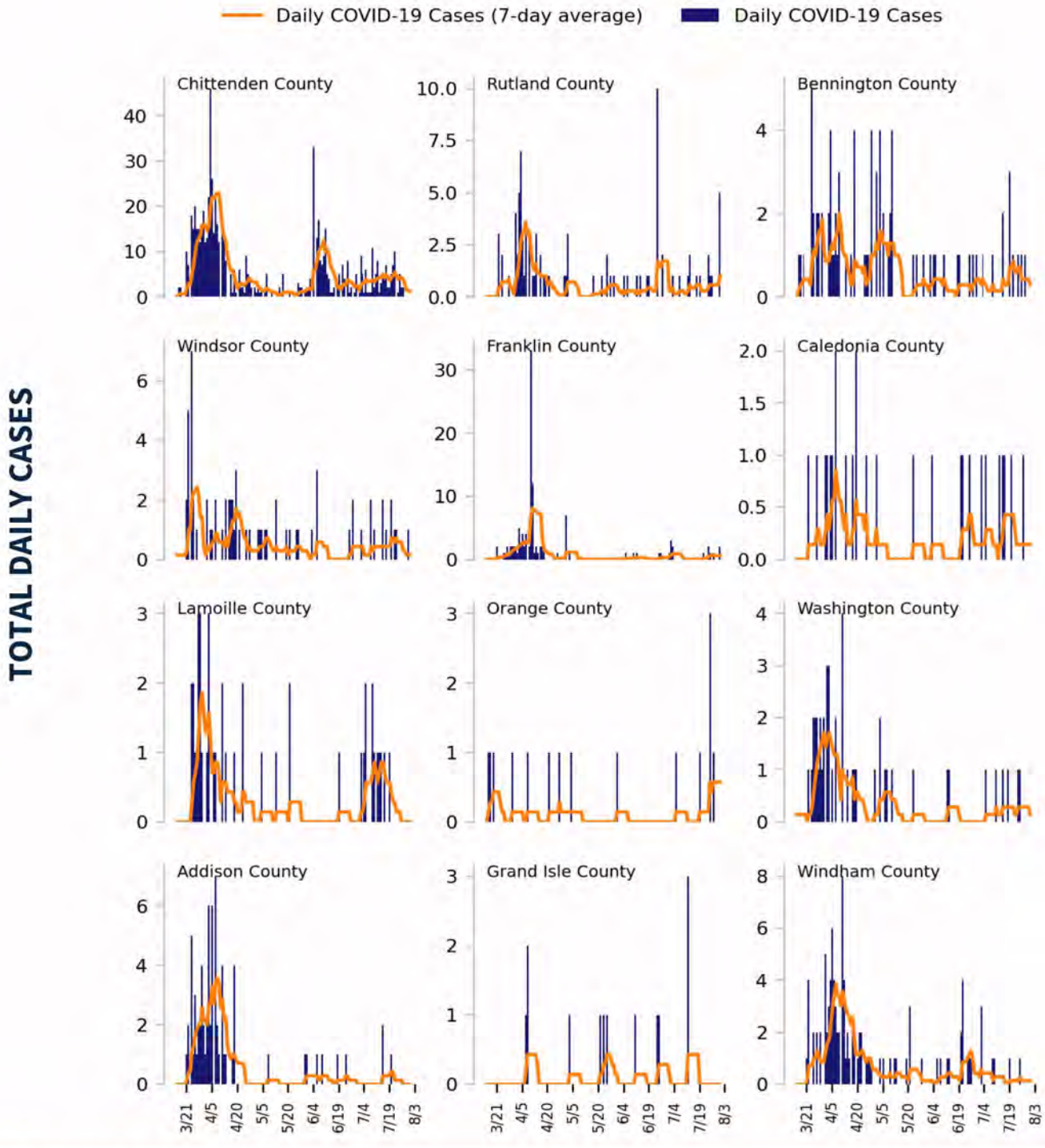


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

VERMONT

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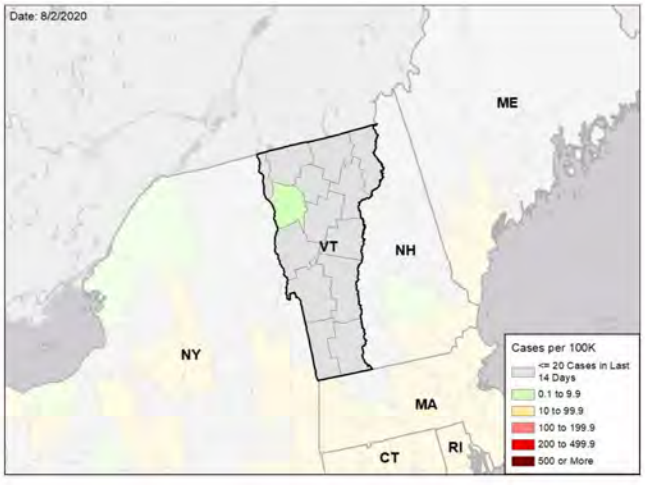
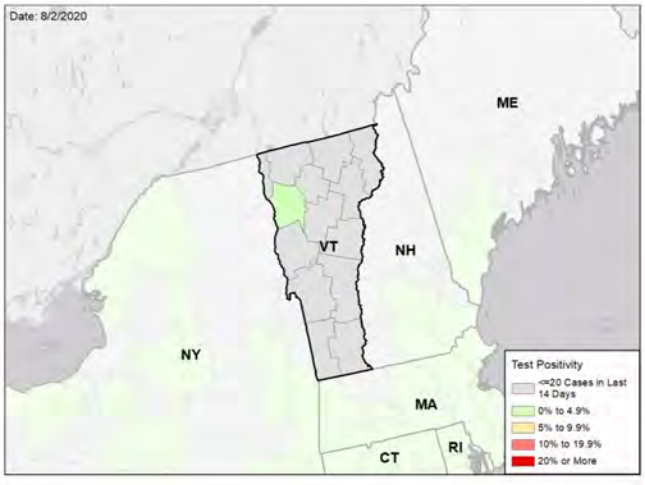
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

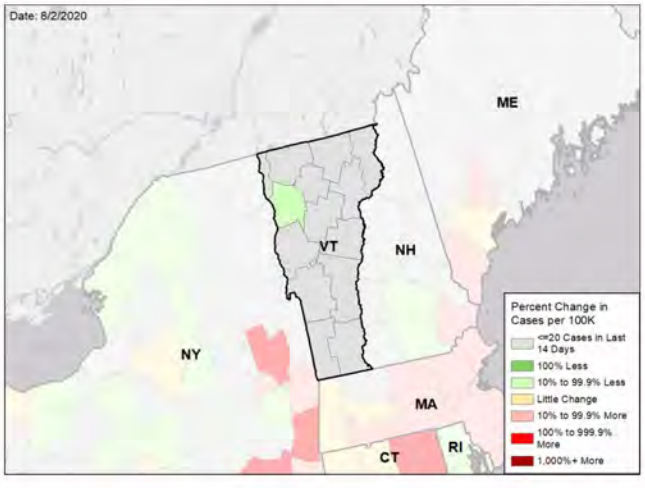
NEW CASES PER 100,000 DURING LAST WEEK



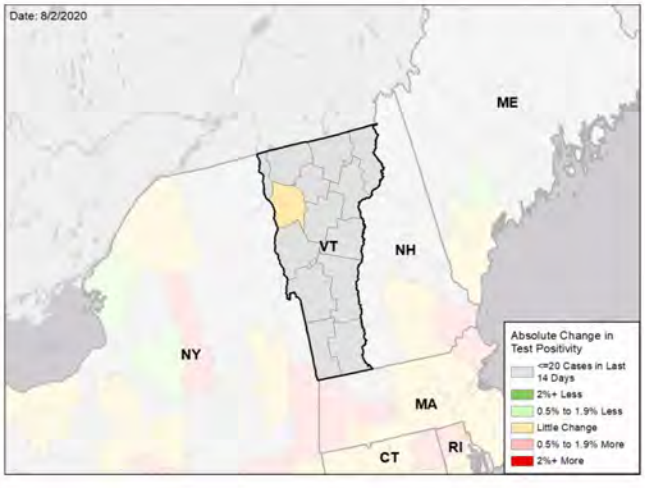
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



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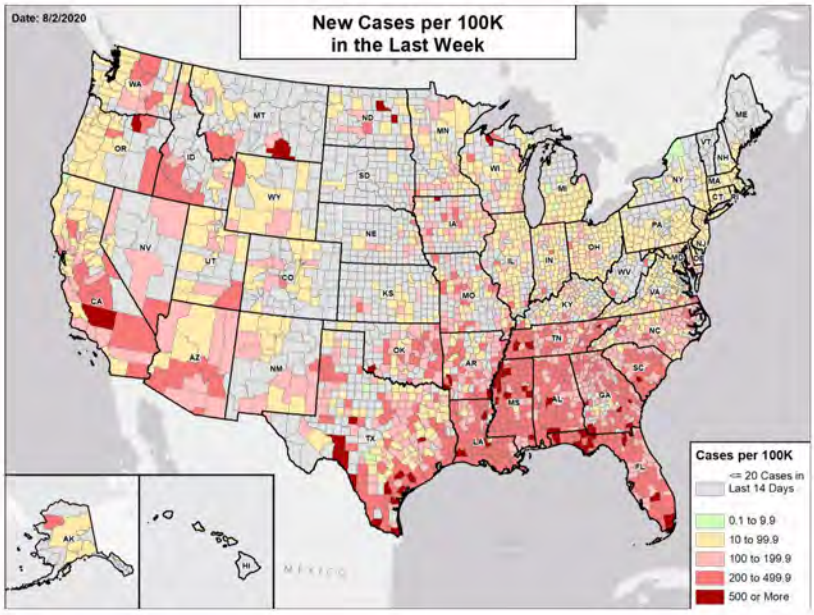
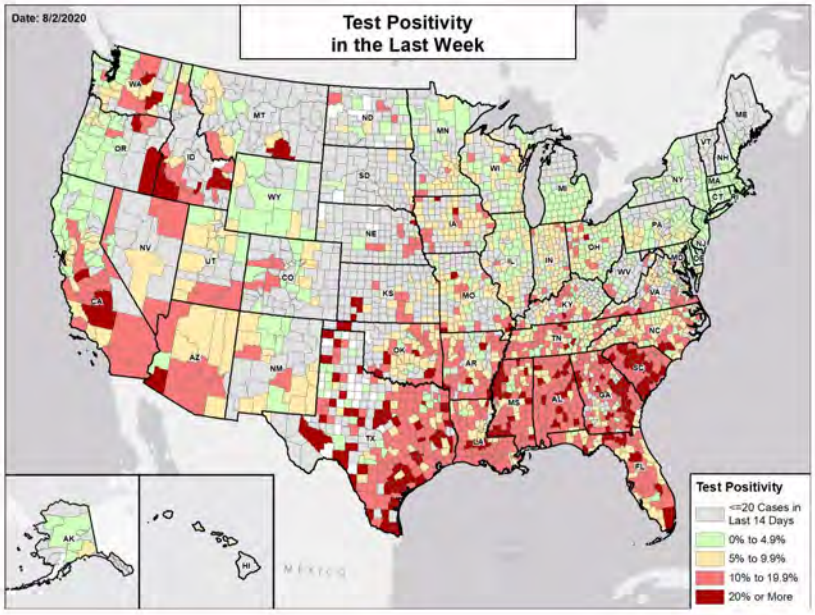
National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

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Methods

STATE REPORT | 08.02.2020

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Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
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- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

VIRGINIA

STATE REPORT | 08.02.2020

SUMMARY

- Virginia is in the yellow zone for COVID-19 cases, indicating between 10 to 100 new cases per 100,000 population last week, and the yellow zone for COVID-19 test positivity, indicating a rate between 5% to 10%.
- Virginia is experiencing rising new cases, but an early decrease in testing positivity over the past week. With continued aggressive mitigation, cases and test positivity should decline.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Virginia Beach City, 2. Norfolk City, and 3. Chesapeake City. These counties represent 26.2 percent of new cases in Virginia.
- The epidemic is widespread and statewide mitigation efforts will be required to stop community spread.
- Virginia had 87 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 50 to support operations activities from FEMA; 1 to support epidemiology activities from CDC; and 86 to support operations activities from USCG.
- Between Jul 25 - Jul 31, on average, 89 patients with confirmed COVID-19 and 214 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Virginia. An average of 86 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Continue to enforce social distancing and use of cloth face masks when outside the home, particularly in indoor settings. Enforcement will be particularly important for the tourist industry and in the many cities where case counts are elevated or climbing. Consider citations and penalties for violations. Require face masks while entering restaurants and ordering.
- In counties and cities with 7-day average test positivity greater than 5%, close bars especially if the liquor restrictions after 10 pm are not successful, restrict gyms to 25% occupancy, and ensure strict social distancing can be maintained in restaurants (emphasize outdoor over indoor dining).
- Develop targeted messaging and outreach to the 20-49 age group, marginalized populations, and out-of-state tourists. Consider public messaging on the interstate messaging systems in tourist areas to enhance awareness and compliance.
- In high transmission counties and cities, implement community-led testing and work with local community groups to increase testing access. Implement pooled testing as described below to further increase access and reduce turnaround times. As feasible, focus testing resources in the most populous or touristed areas with the highest transmission levels.
- Increase testing in beach communities and tourist areas. Enact strict prevention policies when outbreaks or increases in cases are identified, such as closing bars and indoor restaurants, enforced distancing on beaches, and penalties for social gatherings over 10 people.
- Continue the aggressive protection of those in nursing homes and long-term care facilities (LTCFs) by testing all staff each week and requiring staff to wear face masks. Ensure all LTCFs participate in infection prevention and control assessments. Expand testing capabilities at LTCFs.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

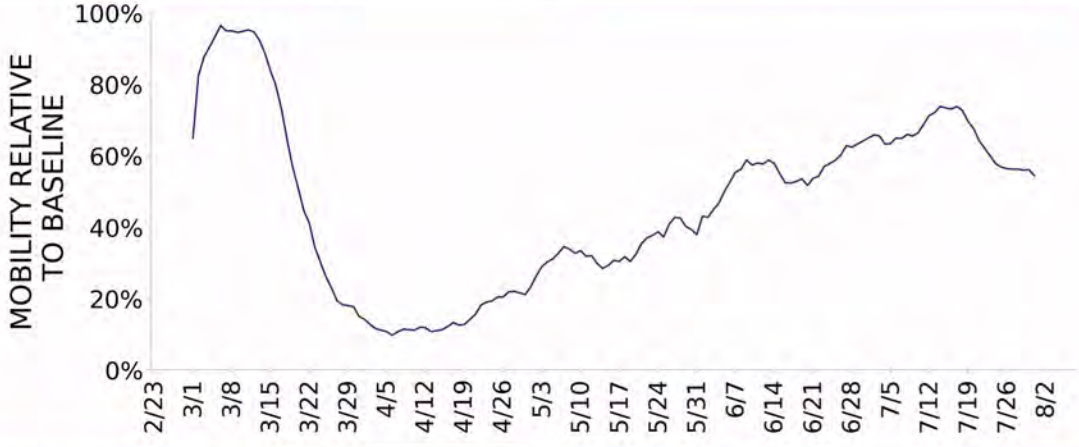
** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

VIRGINIA

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	7,455 (87)	+6.6%	22,651 (73)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	9.7%	-1.3%*	6.0%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	121,230** (1,420)	-0.3%**	545,608** (1,768)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	108 (1)	+145.5%	293 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	8.9%	-3.7%*	9.9%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

VIRGINIA

STATE REPORT | 08.02.2020

COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	4	Virginia Beach-Norfolk-Newport News Lynchburg Danville Kingsport-Bristol	9	Washington-Arlington-Alexandria Richmond Charlottesville Roanoke Martinsville Harrisonburg Blacksburg-Christiansburg Bluefield Big Stone Gap
COUNTY LAST WEEK	24 Top 12 shown (full list below)	Virginia Beach City Norfolk City Chesapeake City Portsmouth City Henrico Hampton City Suffolk City Lynchburg City Danville City Pittsylvania Henry Manassas City	52 Top 12 shown (full list below)	Fairfax Prince William Newport News City Chesterfield Loudoun Richmond City Alexandria City Arlington Roanoke City Spotsylvania Albemarle James City

All Red Counties: Virginia Beach City, Norfolk City, Chesapeake City, Portsmouth City, Henrico, Hampton City, Suffolk City, Lynchburg City, Danville City, Pittsylvania, Henry, Manassas City, Petersburg City, Fredericksburg City, Brunswick, Amherst, Sussex, Patrick, Greene, Franklin City, Galax City, Bristol City, Greensville, Buena Vista City

All Yellow Counties: Fairfax, Prince William, Newport News City, Chesterfield, Loudoun, Richmond City, Alexandria City, Arlington, Roanoke City, Spotsylvania, Albemarle, Charlottesville City, James City, Stafford, York, Bedford, Roanoke, Rockingham, Isle of Wight, Montgomery, Washington, Campbell, Gloucester, Prince George, Lee, Smyth, Southampton, Harrisonburg City, Carroll, Tazewell, Hopewell City, Nottoway, Halifax, Martinsville City, Caroline, Augusta, Franklin, Fluvanna, Salem City, Wythe, Dinwiddie, Wise, Manassas Park City, Russell, Scott, Grayson, Powhatan, Botetourt, Rockbridge, Pulaski, Amelia, Appomattox

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

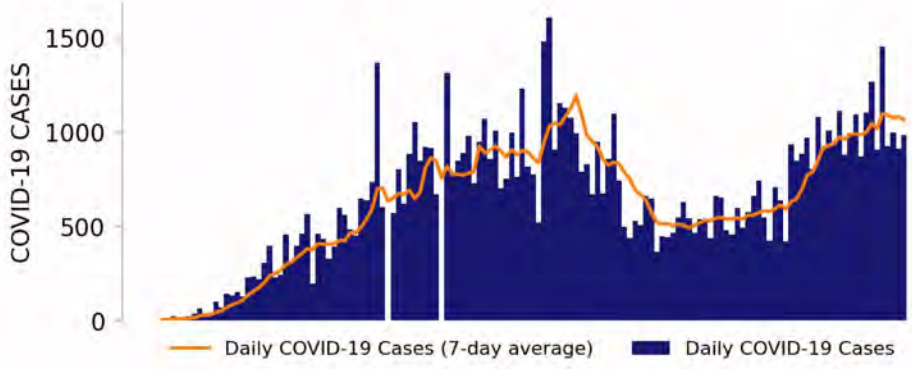
Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

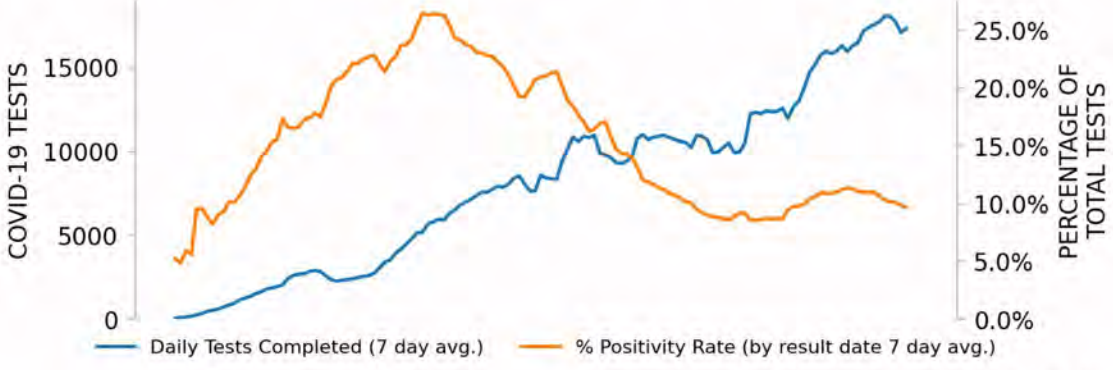
VIRGINIA

STATE REPORT | 08.02.2020

NEW CASES

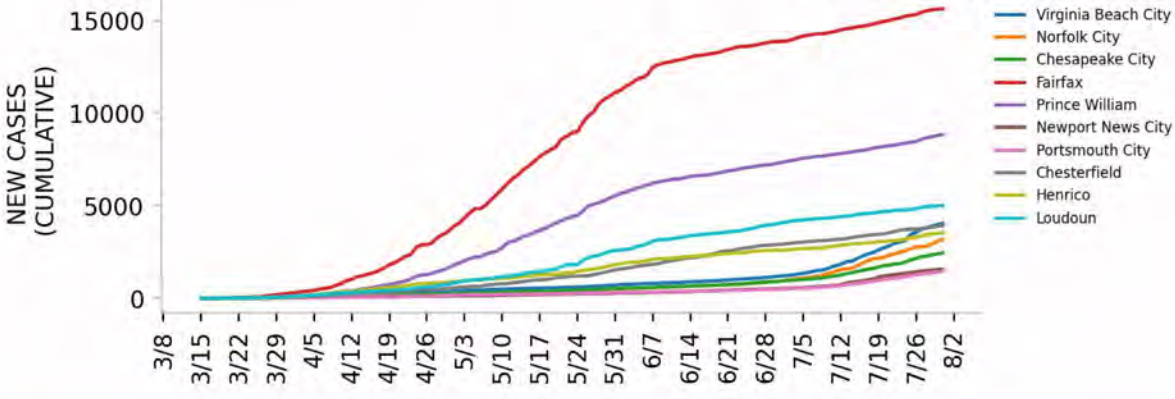


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

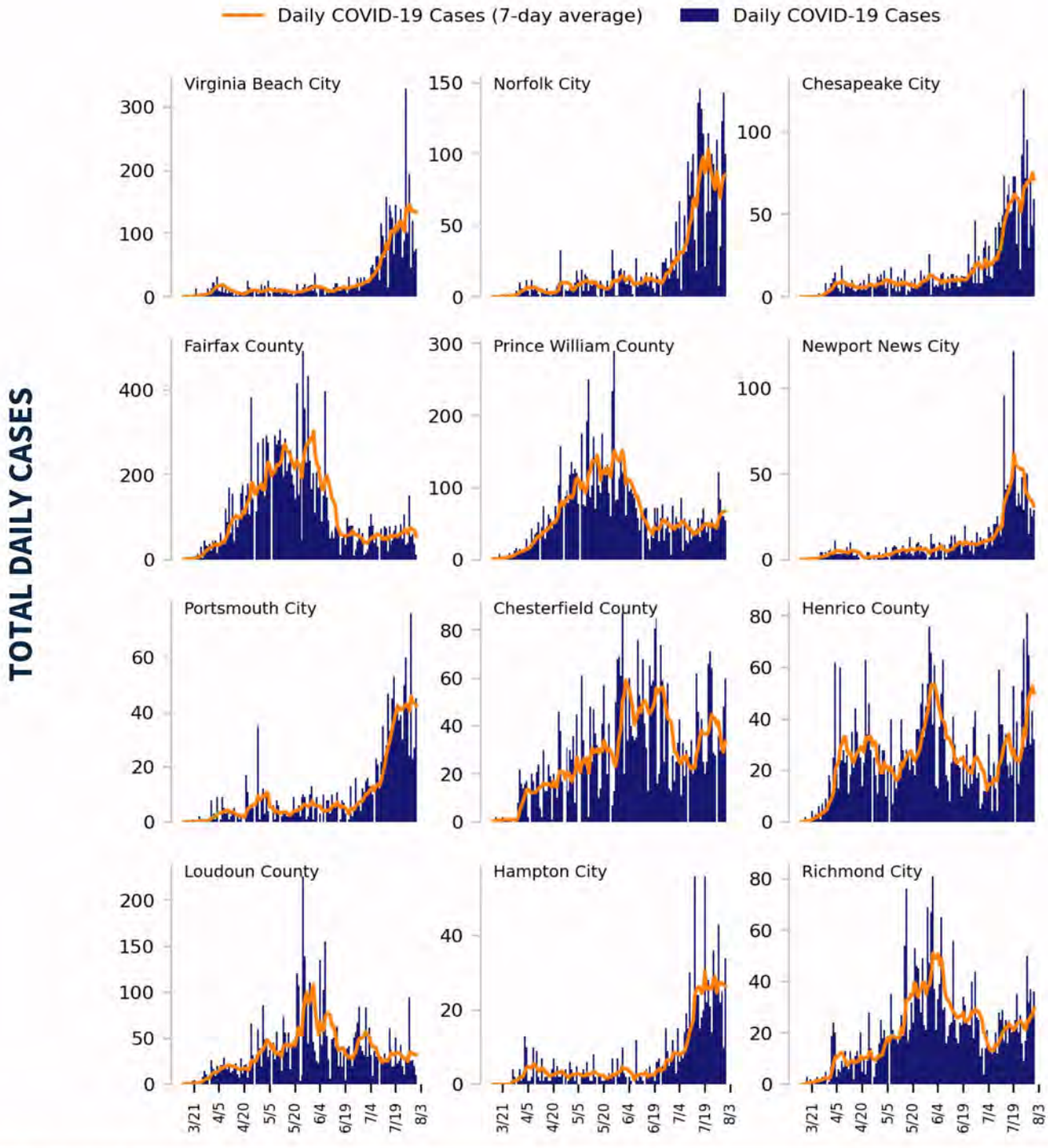


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

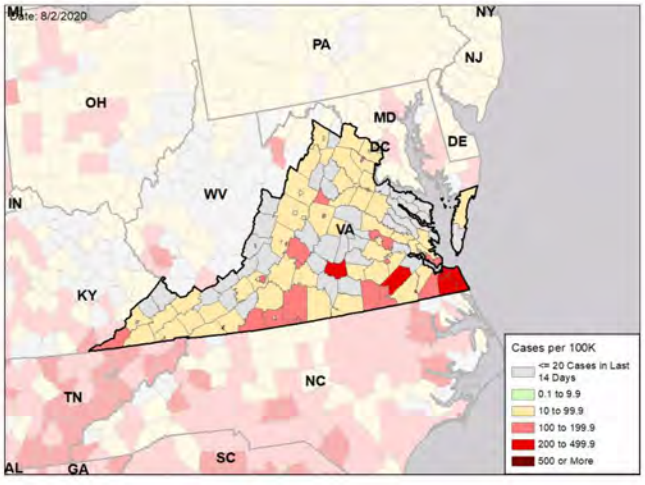
Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

VIRGINIA

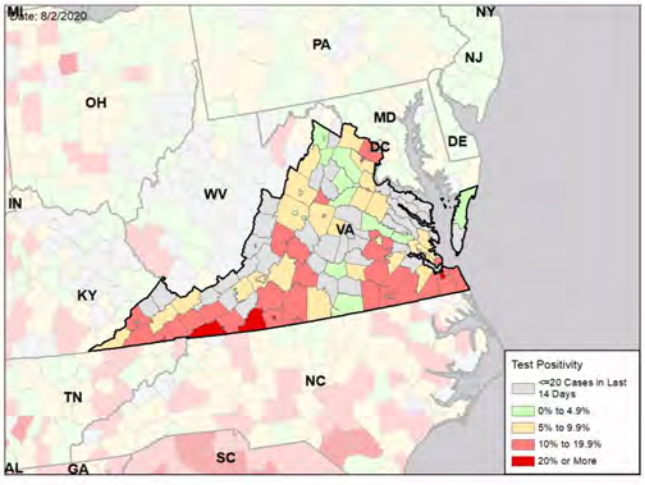
STATE REPORT | 08.02.2020

CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

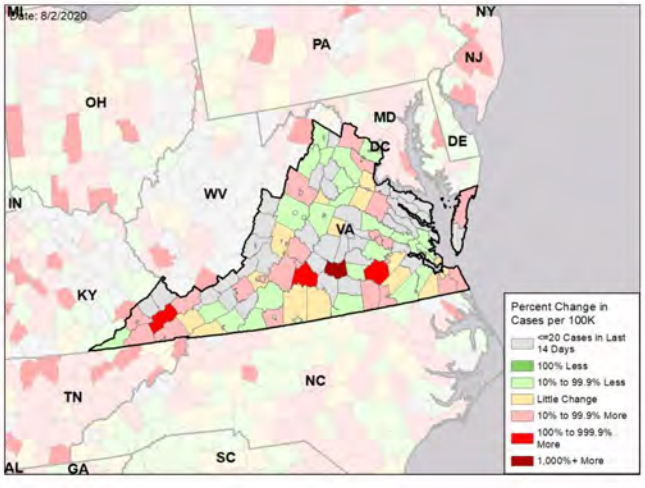
NEW CASES PER 100,000 DURING LAST WEEK



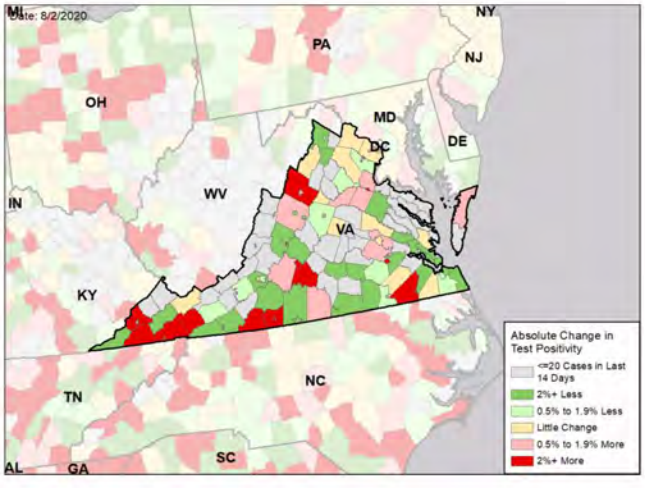
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

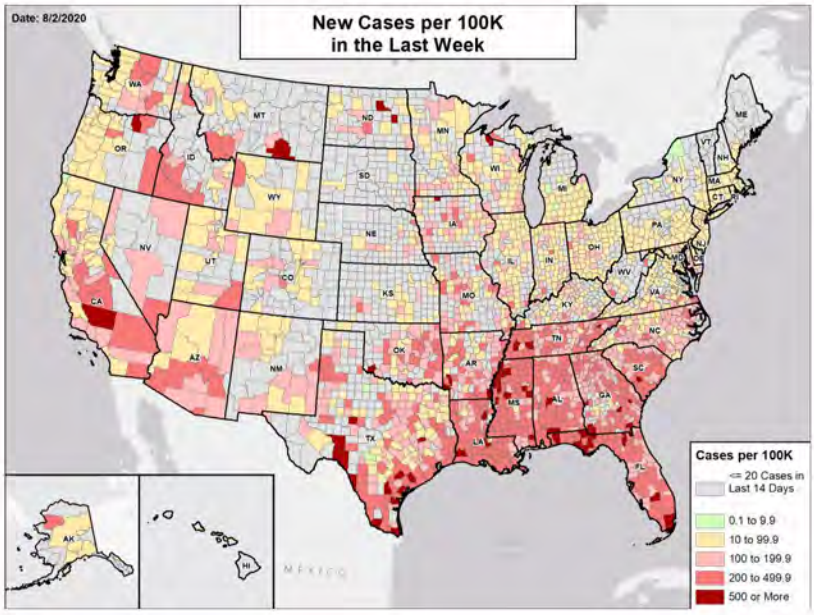


DATA SOURCES

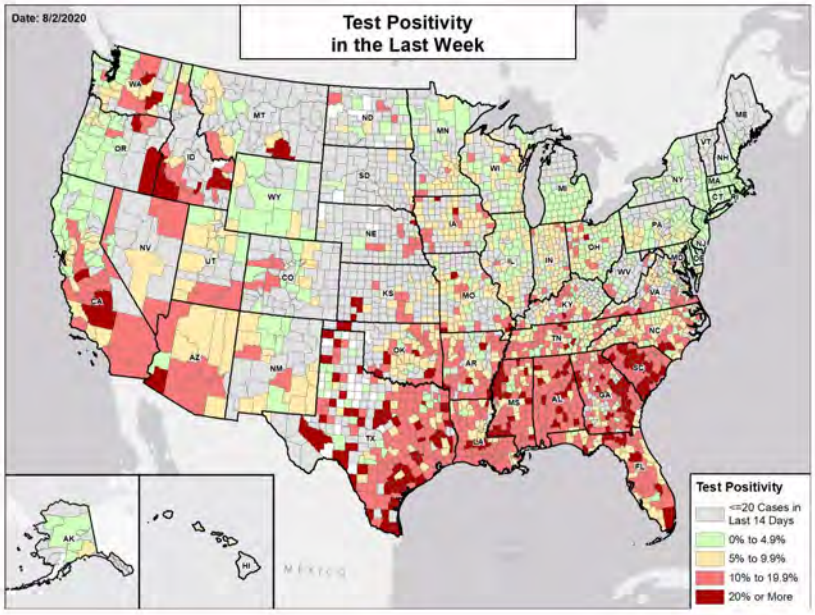
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

STATE REPORT | 08.02.2020

COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

WASHINGTON

STATE REPORT | 08.02.2020

SUMMARY

- Washington is in the yellow zone for cases, indicating between 10 to 100 new cases per 100,000 population last week, and the yellow zone for test positivity, indicating a rate between 5% to 10%.
- Washington has seen a decrease in new cases and a stability in testing positivity over the past week. However, multiple counties in eastern Washington continued to show very high incidence with continued increases and high test positivity rates (including Adams, Douglas, Franklin, Okanogan counties).
- The following three counties had the highest number of new cases over the past 3 weeks: 1. King County, 2. Yakima County, and 3. Pierce County. These counties represent 43.2 percent of new cases in Washington.
- Washington had 65 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 114 to support operations activities from FEMA; 3 to support operations activities from ASPR; 8 to support epidemiology activities from CDC; 20 to support operations activities from USCG; 2 to support medical activities from VA; and 1 to support operations activities from VA.
- Between Jul 25 - Jul 31, on average, 30 patients with confirmed COVID-19 and 84 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Washington. An average of 77 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Continue state masking requirement. Intensify communication to the public about disruption of business and school operations if cases continue to increase. Consider innovative ways to monitor compliance.
- Extension of existing and additional measures to increase social distancing put forward this past week are noted and commended. Further measures to increase social distancing, including restrictions of business occupancy/operations and gathering sizes, are needed in counties with sustained, increasing, and high incidence and test positivity rates.
- Ensure that all business retailers and personal services require masks and can safely social distance as in Proclamation 20 – 25.6.
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all members of positive households are individually tested within 24 hours.
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates and increase community level testing.
- As assays receive FDA Emergency Use Authorizations for pooling, laboratories should use pooling of samples to increase testing access and reduce turnaround times.
- Move to community-led neighborhood testing and work with local community groups to increase access to testing.
- Continue to surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

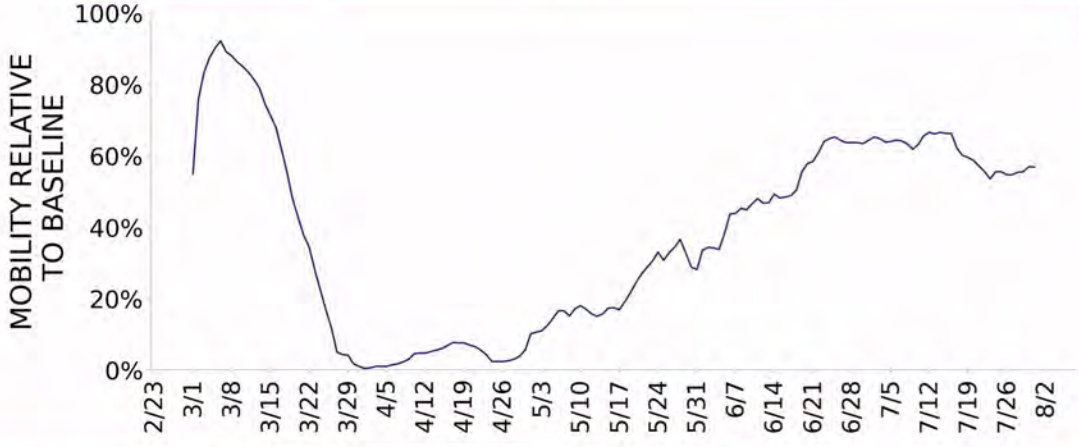
** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

WASHINGTON

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	4,979 (65)	-13.0%	11,560 (81)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	5.8%	+0.1%*	7.0%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	83,691** (1,099)	-9.4%**	194,557** (1,356)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	76 (1)	+46.2%	165 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	8.6%	+3.4%*	7.8%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

WASHINGTON

STATE REPORT | 08.02.2020

COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	4	Kennewick-Richland Yakima Wenatchee Othello	8	Seattle-Tacoma-Bellevue Spokane-Spokane Valley Moses Lake Walla Walla Longview Ellensburg Shelton Centralia
COUNTY LAST WEEK	7	Yakima Benton Franklin Okanogan Chelan Douglas Adams	9	Pierce Spokane Grant Clark Walla Walla Cowlitz Kittitas Mason Lewis

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
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- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
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WASHINGTON

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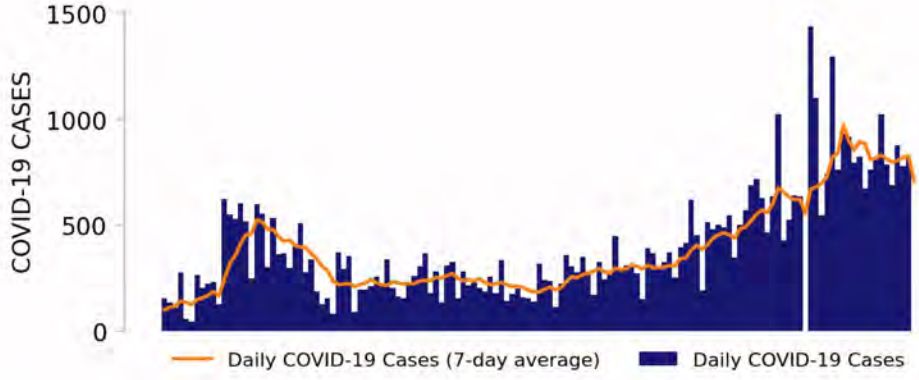
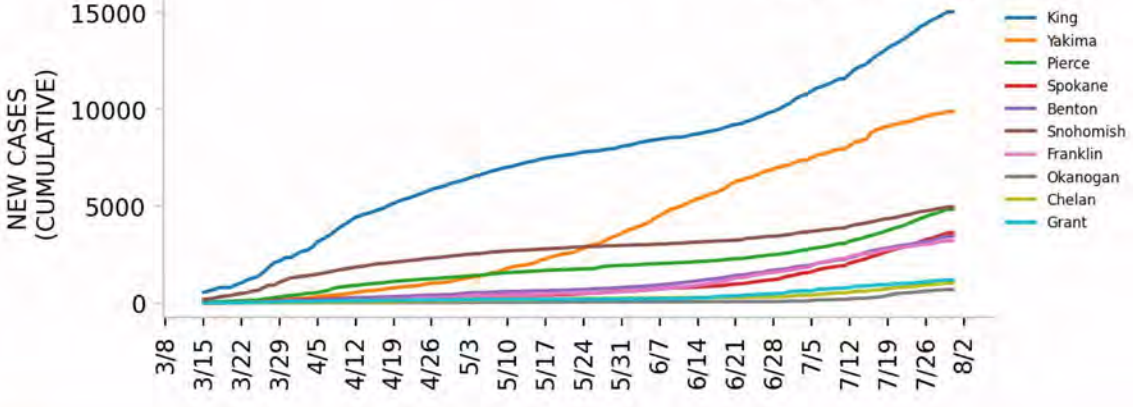
NEW CASES



TESTING

TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)



DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

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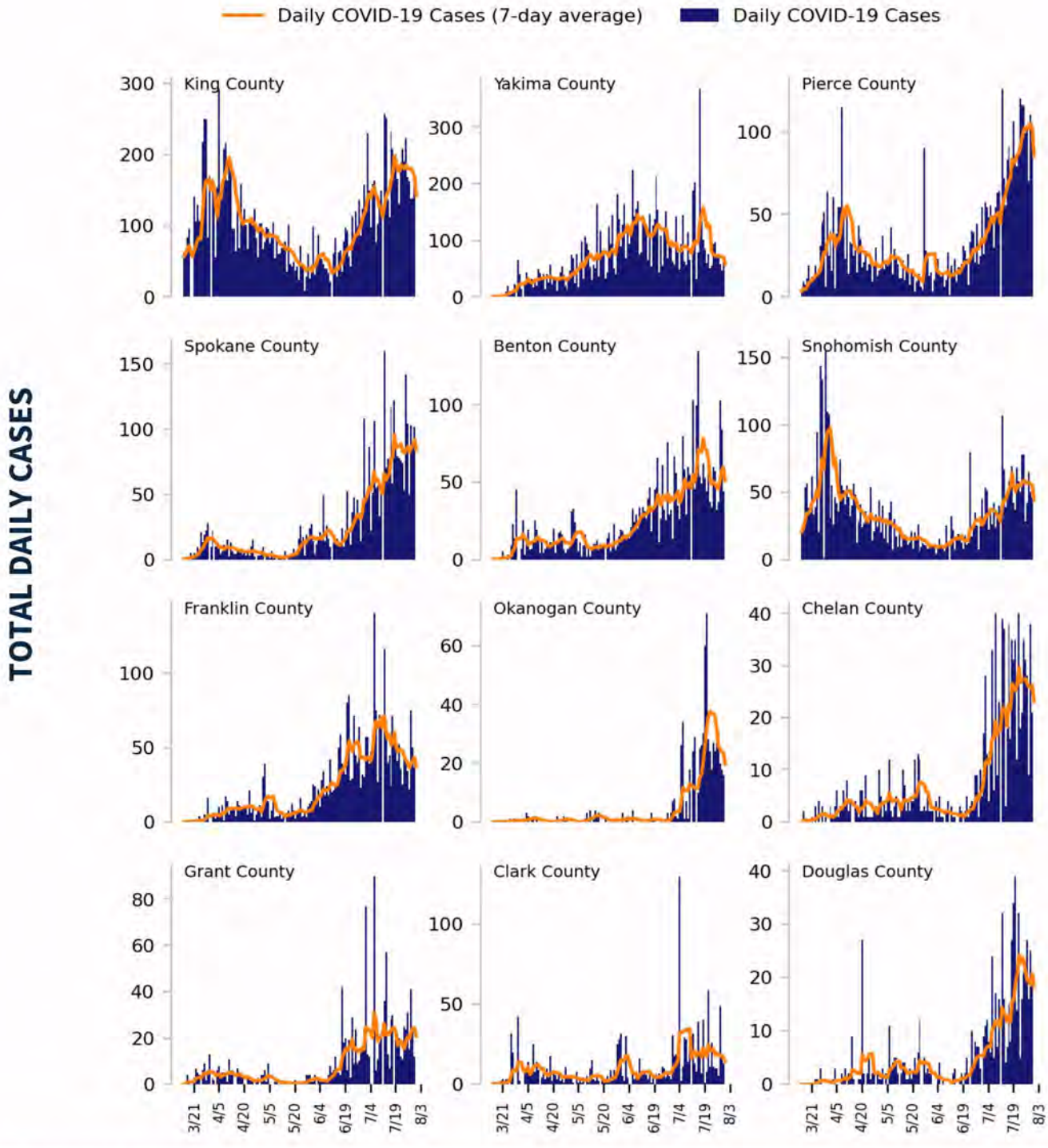
Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

WASHINGTON

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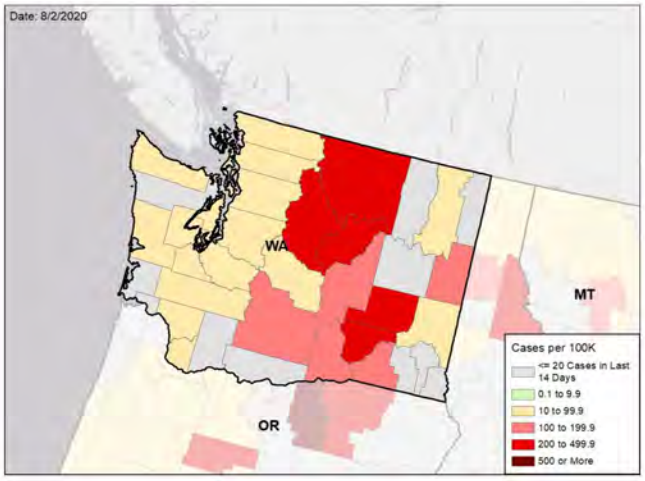
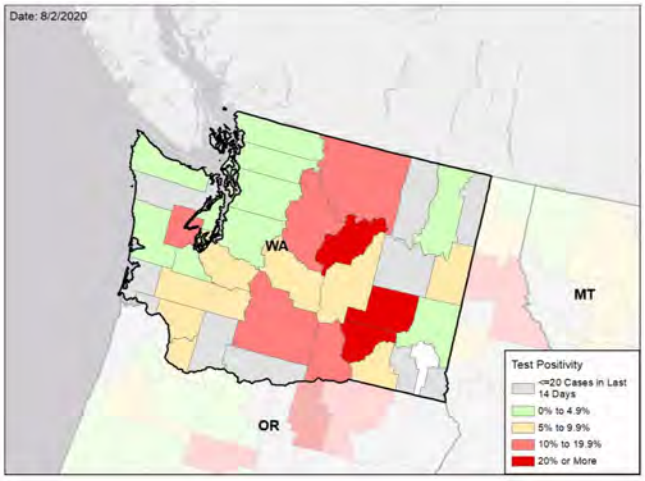
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

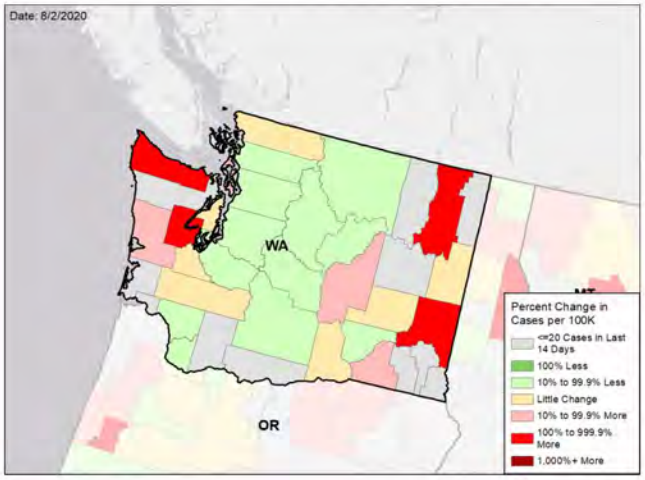
NEW CASES PER 100,000 DURING LAST WEEK



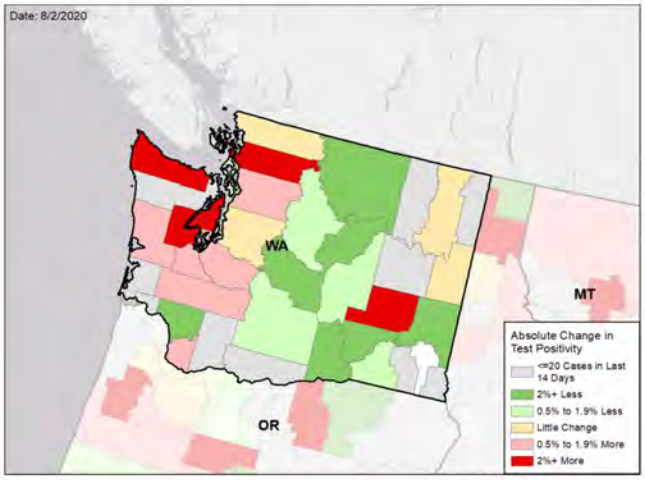
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
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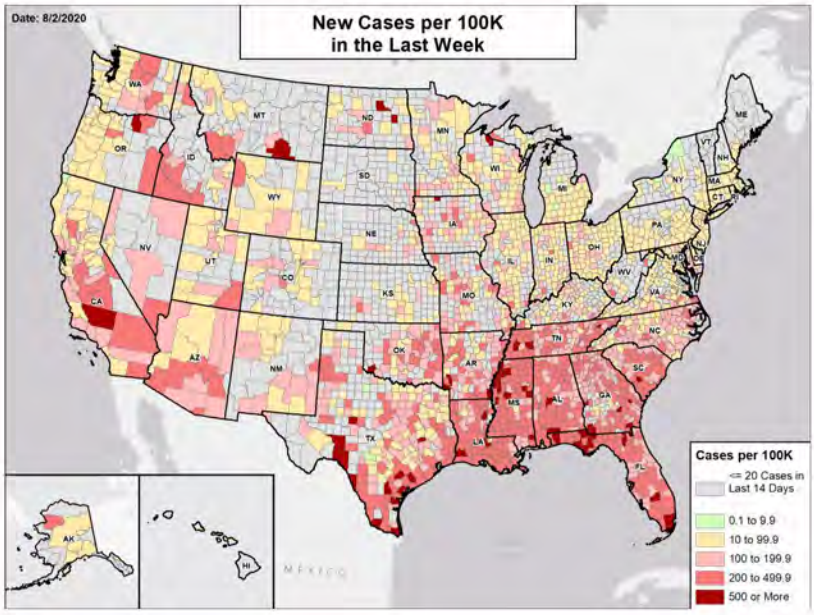
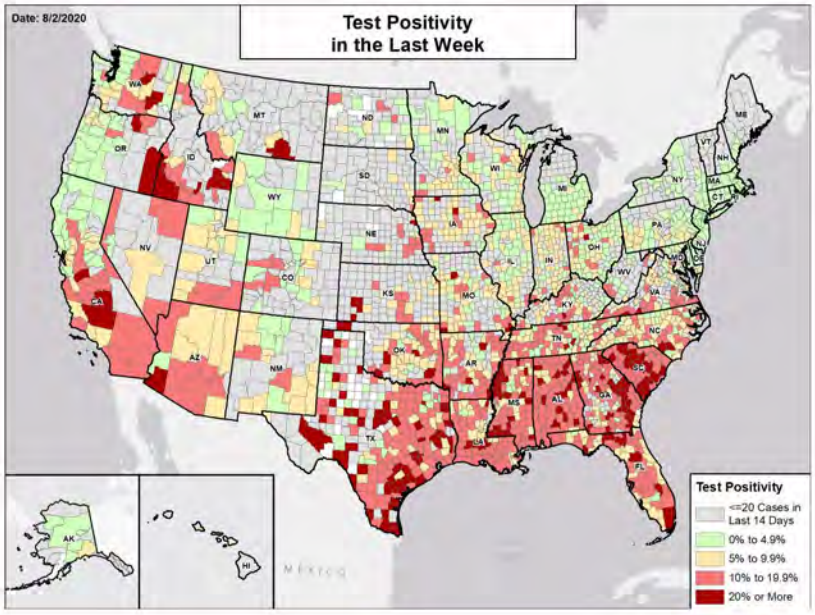
National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

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COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

WEST VIRGINIA

STATE REPORT | 08.02.2020

SUMMARY

- West Virginia is in the yellow zone for cases, indicating between 10 to 100 new cases per 100,000 population last week, and the green zone for test positivity, indicating a rate below 5%.
- West Virginia has seen an increase in new cases and stability in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Monongalia County, 2. Kanawha County, and 3. Berkeley County. These counties represent 35.9 percent of new cases in West Virginia.
- West Virginia had 53 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 9 to support operations activities from FEMA; 8 to support epidemiology activities from CDC; and 23 to support operations activities from USCG.
- Between Jul 25 - Jul 31, on average, 18 patients with confirmed COVID-19 and 43 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in West Virginia. An average of 74 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Keep mask requirement in place statewide. Work with local communities to ensure high usage rates. Identify mechanisms to assess compliance with local regulations.
- Message to residents that if they have vacationed in, or had visitors from, areas with high COVID-19 prevalence, they should: avoid vulnerable individuals; remain socially distanced and masked when around others for a minimum of 14 days; avoid indoor gatherings where social distancing and masks cannot be maintained; and get tested if anyone in their family develops symptoms. Also, message that they can transmit the virus even when asymptomatic.
- Providing timely test results to individuals so they can isolate and stop the spread is critical. Implement the following to increase testing capacity and decrease turnaround times:
    - (1) For family and cohabitating households, screen entire households in a single test by pooling a sample of each member's specimen. For households that test positive, isolate and conduct follow-up individual tests.
    - (2) Expand testing capacity in public health labs by adding shifts, including weekend shifts, to reduce turnaround times.
    - (3) Require all universities with RNA detection platforms to use this equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- In localities in red zones, closing bars and restricting indoor dining at restaurants is critical to disrupt transmission.
- Conduct on-site inspections in nursing homes with two or more confirmed or suspected positives to ensure COVID-19 safety guidance and considerations are being implemented. Preventing further spread in these areas is critical to protect the vulnerable nursing home population. Protect vulnerable populations in assisted living and long-term care facilities through weekly testing of all workers and requiring masks. In facilities with workers who tested positive, ensure all residents have been promptly tested and appropriate cohorting measures are in place.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

WEST VIRGINIA

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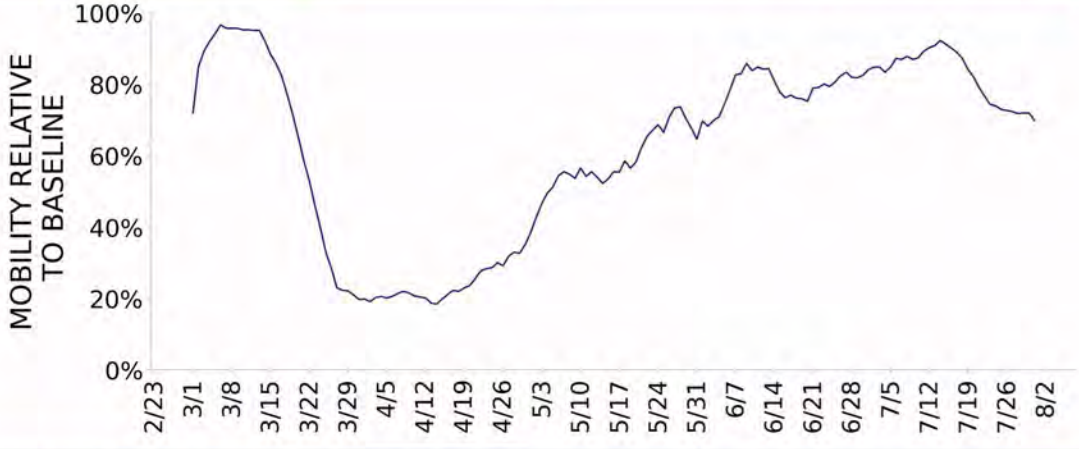
	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	950 (53)	+15.0%	22,651 (73)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	4.2%	-0.2%*	6.0%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	35,207** (1,965)	-12.6%**	545,608** (1,768)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	13 (1)	+333.3%	293 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	5.0%	+0.9%*	9.9%	12.3%

MOBILITY



* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

WEST VIRGINIA

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	1	Mount Gay-Shamrock	5	Clarksburg Weirton-Steubenville Bluefield Washington-Arlington-Alexandria Point Pleasant
COUNTY LAST WEEK	4	Logan Mingo Lincoln Grant	8	Berkeley Mercer Harrison Marshall Hancock Mineral Brooke Hampshire

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

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POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
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POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

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WEST VIRGINIA

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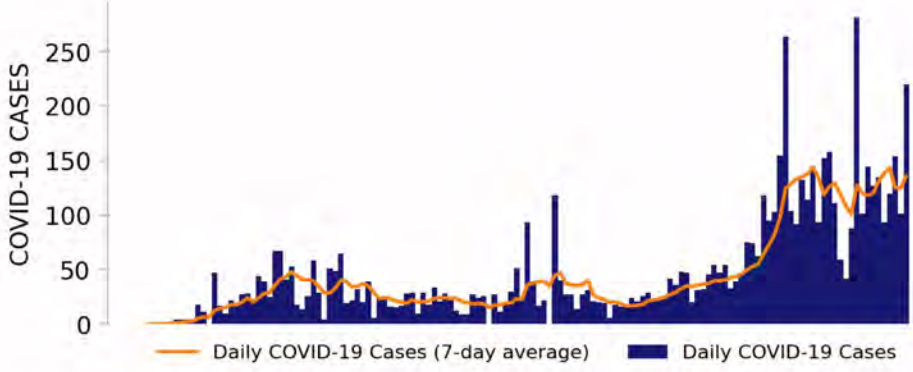
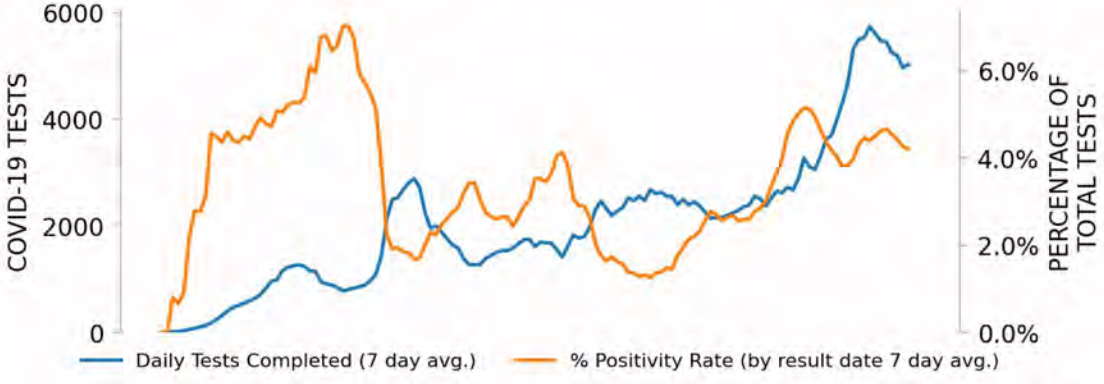
NEW CASES



TESTING



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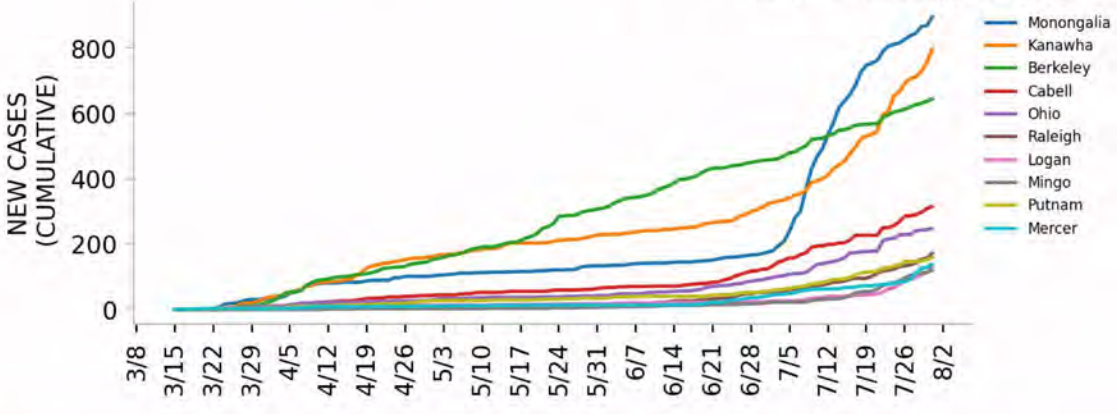

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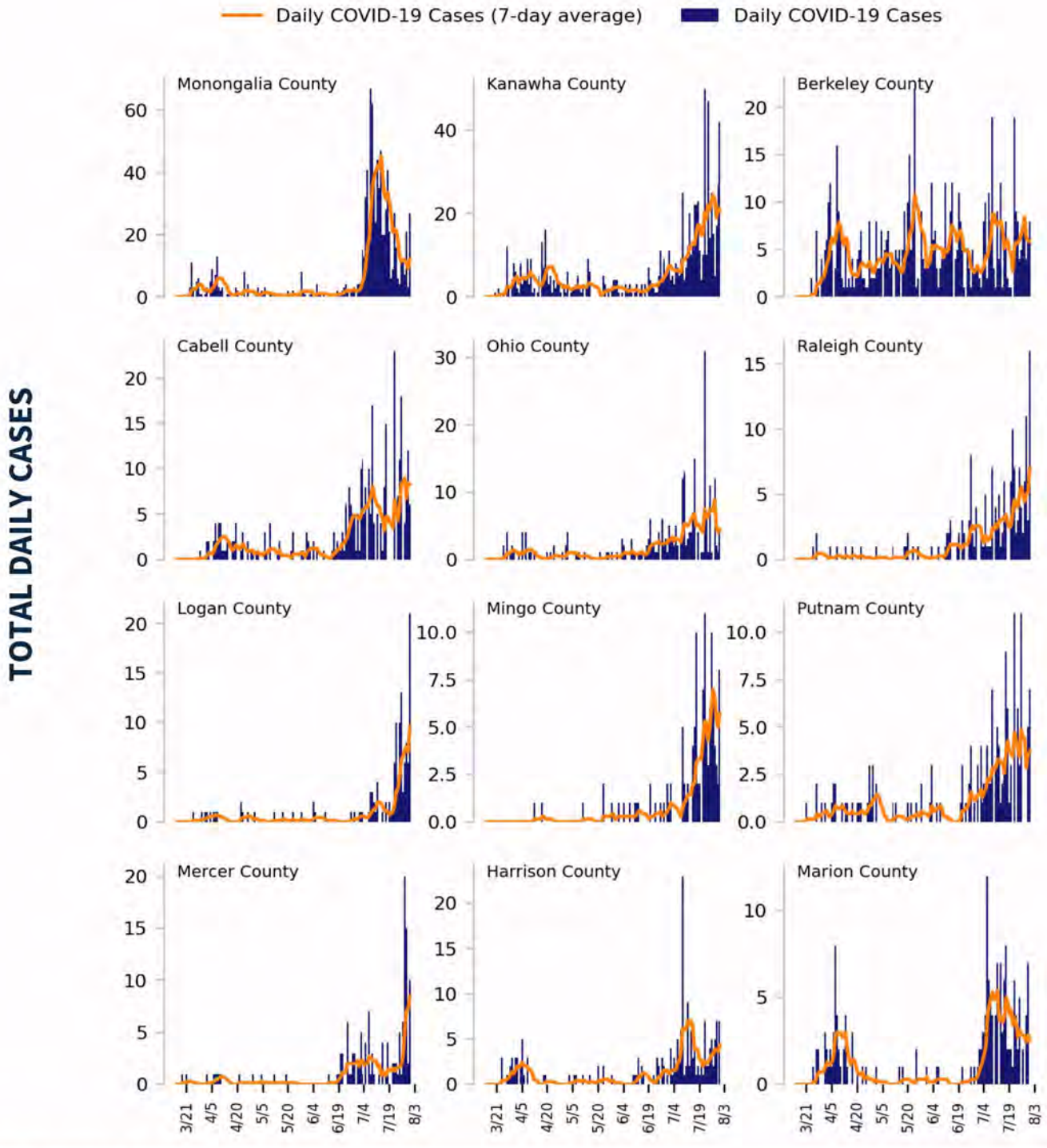

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WEST VIRGINIA

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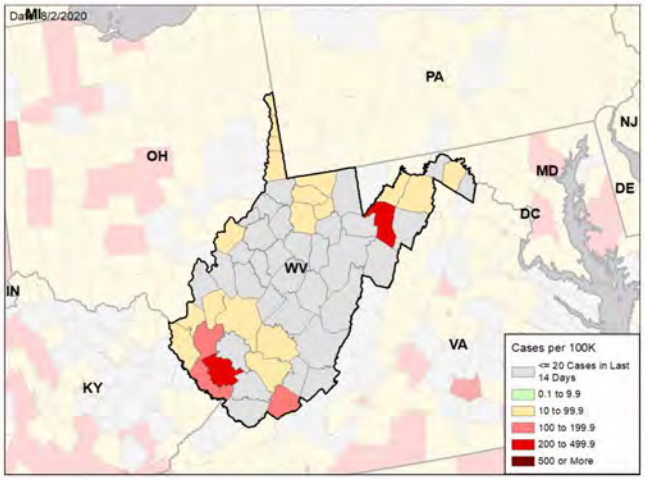
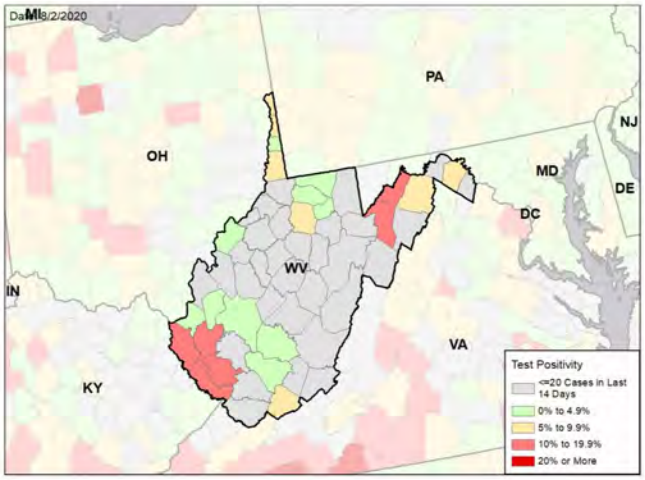
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

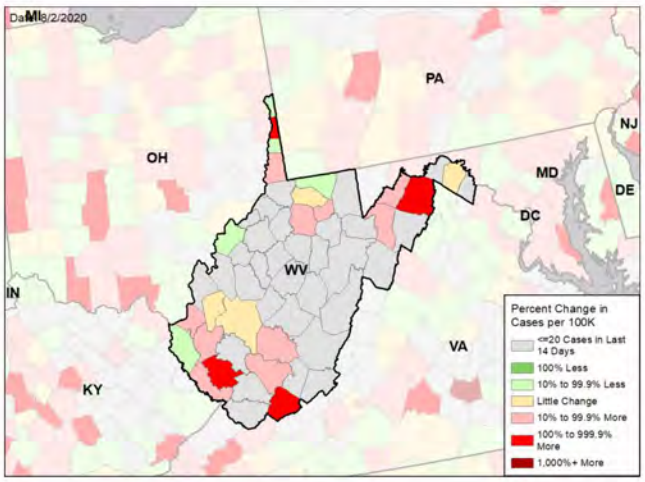
NEW CASES PER 100,000 DURING LAST WEEK



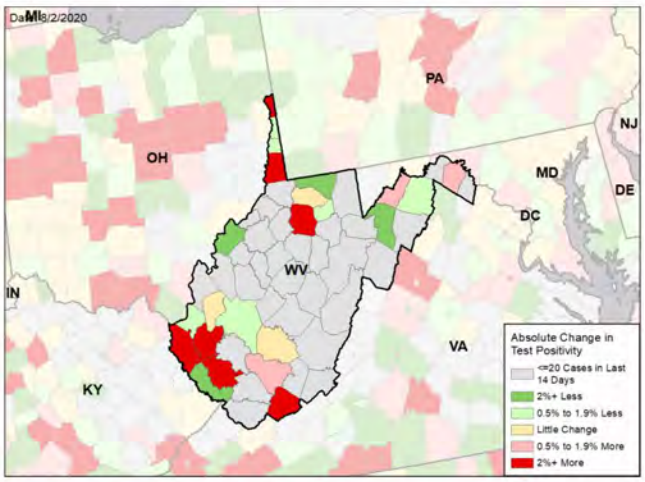
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



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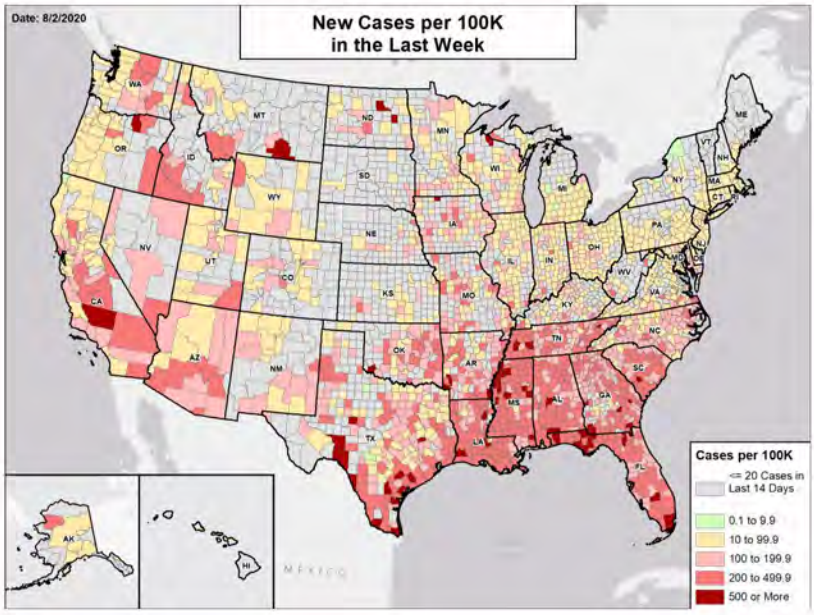
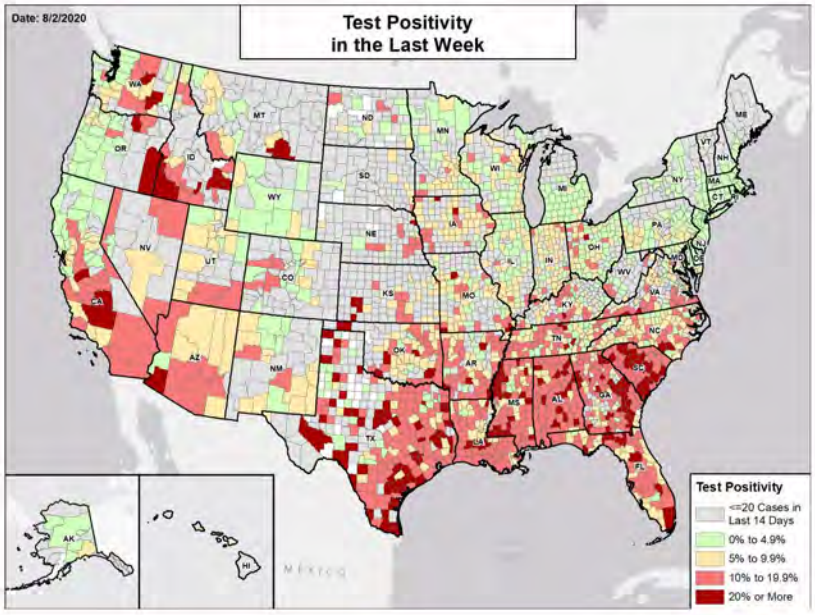
National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

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COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.

WISCONSIN

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SUMMARY

- Wisconsin remains in the red zone for cases, indicating more than 100 new cases per 100,000 population last week, and the yellow zone for test positivity, indicating a rate between 5% to 10%.
- Wisconsin has seen stability in new cases and stability in testing positivity over the past week.
- Virus transmission is seen in all areas of the state. The following three counties had the highest number of new cases over the past 3 weeks: 1. Milwaukee County, 2. Waukesha County, and 3. Dane County. These counties represent 50.4 percent of new cases in Wisconsin.
- However, cases in Dane County have been declining for several weeks and in Milwaukee County declined last week. Increasing cases and high positivity rates are seen in multiple counties across the state.
- Wisconsin had 103 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 12 to support operations activities from FEMA and 1 to support operations activities from USCG.
- Between Jul 25 - Jul 31, on average, 41 patients with confirmed COVID-19 and 84 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Wisconsin. An average of 59 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Promote the new state masking requirement with continued strong public messaging of its importance in avoiding disruptions to business and school operations.
- Continue to communicate to the public about the risks of disruption to business activity, travel, and school operations if cases continue to rise.
- Support limiting of indoor seating at bars/restaurants by local public health authorities in highly affected counties. Consider further modulation of business occupancy/operating restrictions if cases continue to increase in other areas. Consider development and dissemination of report on Dane County's experience with business modifications and mask requirement in turning around the epidemic situation.
- Continue the implementation of the state testing plan with low threshold testing and routine testing of workers in LTCFs. Continue the support of local health departments to further scale-up community-led neighborhood testing in collaboration with local community groups.
- Surge testing and contact tracing resources to counties, neighborhoods and zip codes with highest case rates.
- Identify universities with RNA detection platforms; consider efforts to use this equipment to expand surveillance testing for university students and schools (K-12, community colleges).
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

** Psychological, rehabilitation, and religious non-medical hospitals were excluded from analyses. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. This value may differ from those in state databases because of differences in hospital lists and reporting processes between federal and state systems. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Continued feedback on improving these data is welcome.*

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	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	6,025 (103)	-6.0%	41,885 (80)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	5.5%	-0.1%*	5.4%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	153,855** (2,642)	-6.8%**	945,428** (1,799)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	55 (1)	+22.2%	548 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	5.2%	+1.9%*	6.5%	12.3%

MOBILITY

* Indicates absolute change in percentage points.
** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	13 Top 12 shown (full list below)	Milwaukee-Waukesha Green Bay Racine Chicago-Naperville-Elgin Appleton Whitewater Wausau-Weston Sheboygan Minneapolis-St. Paul-Bloomington Marinette Manitowoc Platteville
COUNTY LAST WEEK	2	Barron Langlade	26 Top 12 shown (full list below)	Milwaukee Waukesha Racine Brown Kenosha Outagamie Walworth Washington Sheboygan Marathon Marinette Waupaca

All Yellow CBSAs: Milwaukee-Waukesha, Green Bay, Racine, Chicago-Naperville-Elgin, Appleton, Whitewater, Wausau-Weston, Sheboygan, Minneapolis-St. Paul-Bloomington, Marinette, Manitowoc, Platteville, Wisconsin Rapids-Marshfield

All Yellow Counties: Milwaukee, Waukesha, Racine, Brown, Kenosha, Outagamie, Walworth, Washington, Sheboygan, Marathon, Marinette, Waupaca, St. Croix, Manitowoc, Grant, Trempealeau, Wood, Oconto, Pierce, Juneau, Douglas, Iron, Waushara, Oneida, Kewaunee, Adams

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

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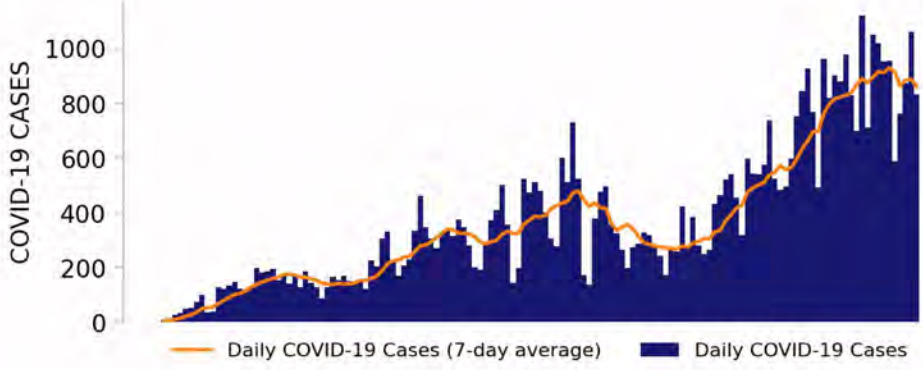
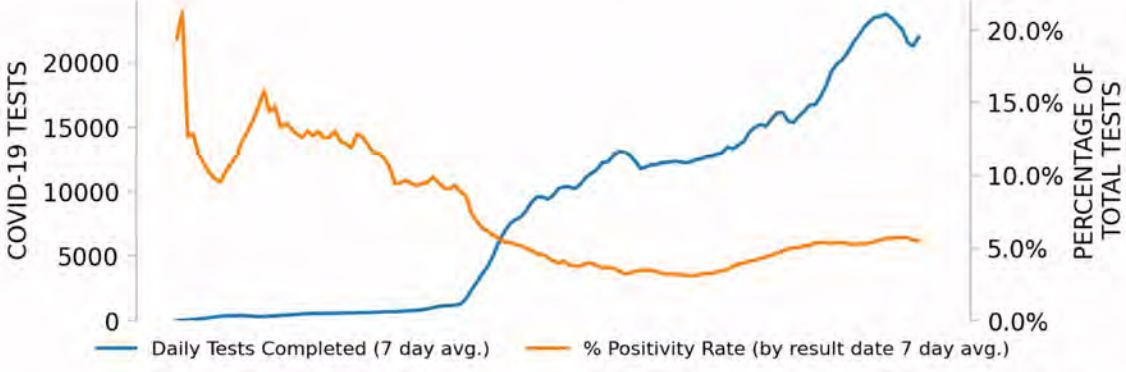
NEW CASES

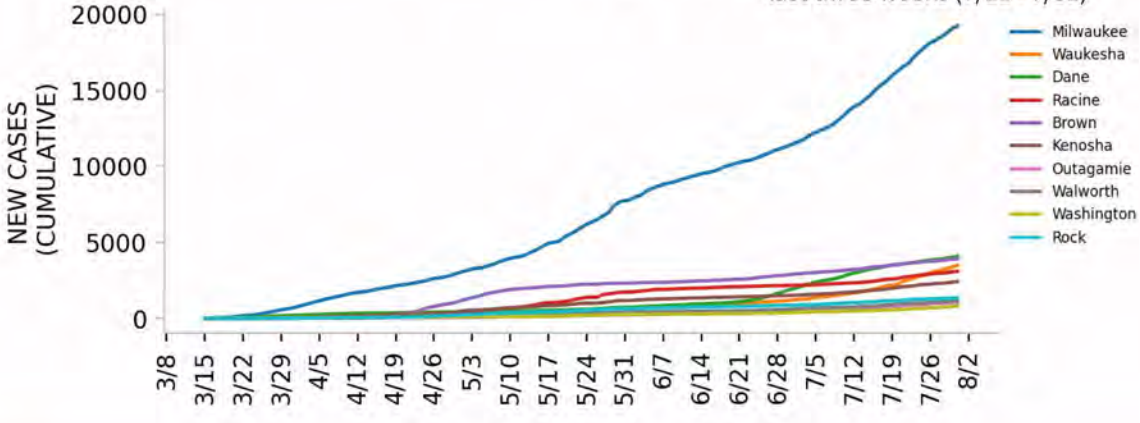


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

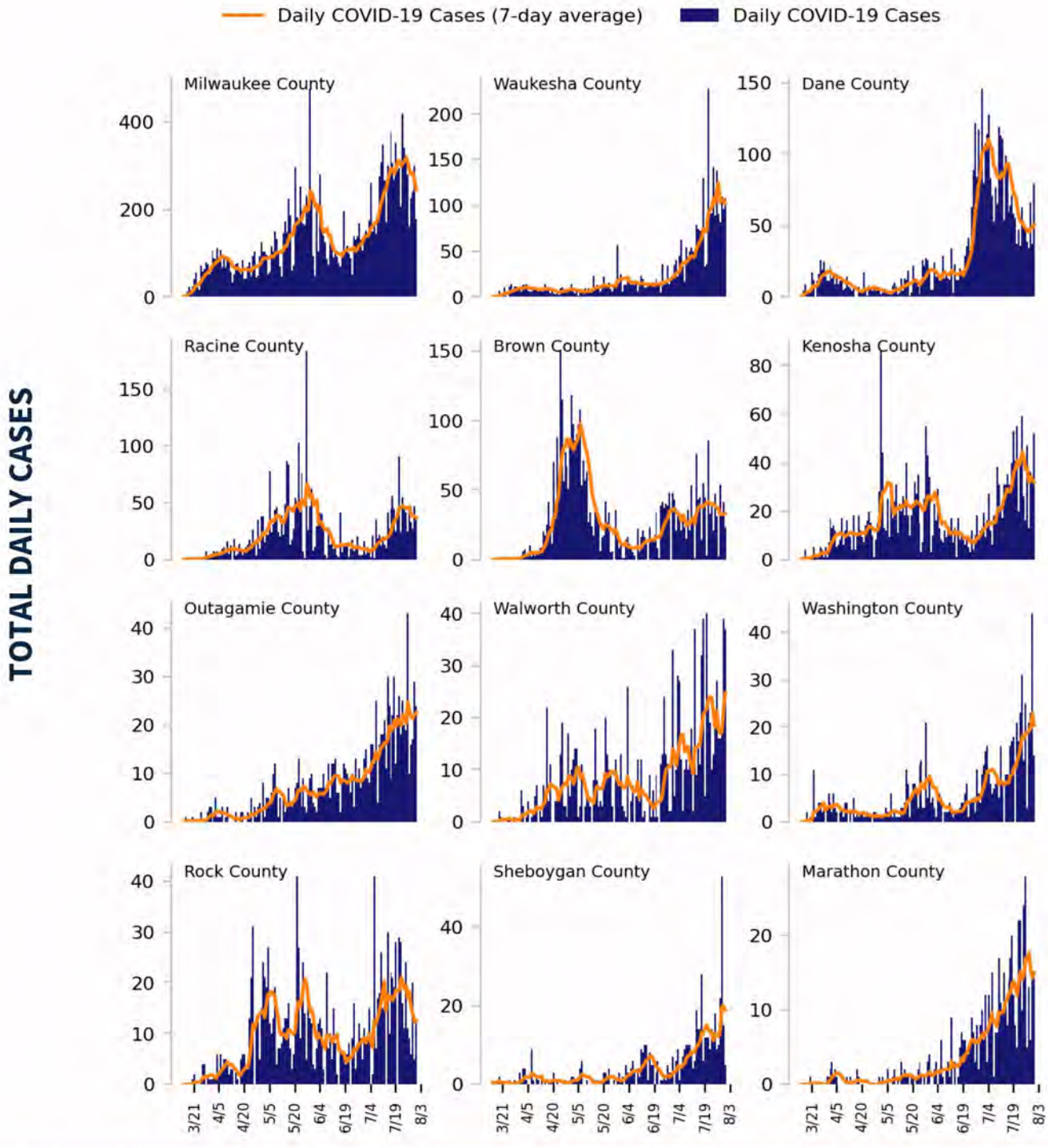


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

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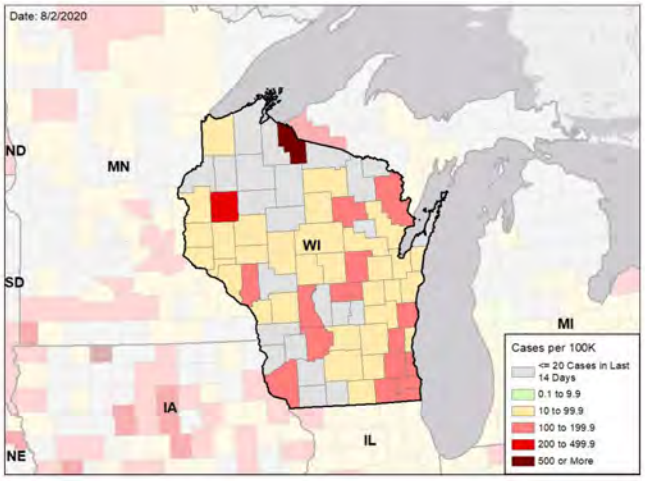
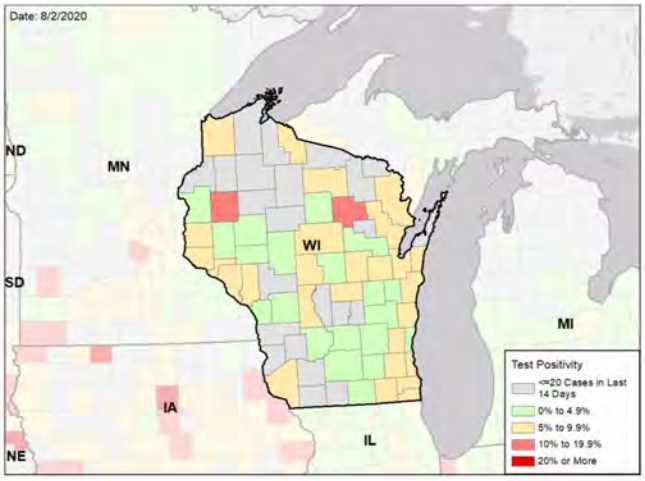
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

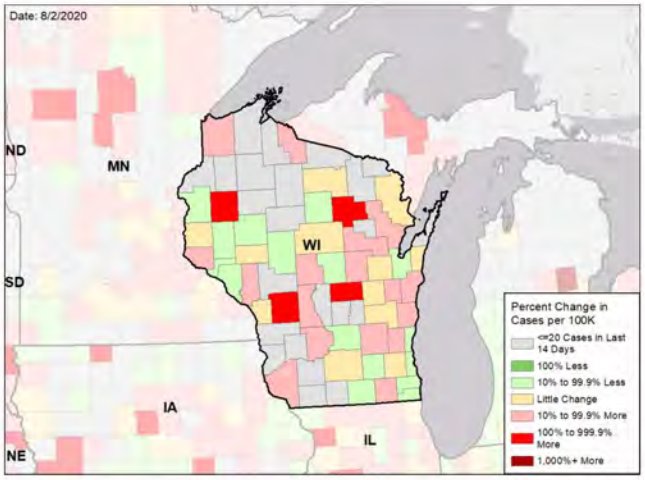
NEW CASES PER 100,000 DURING LAST WEEK



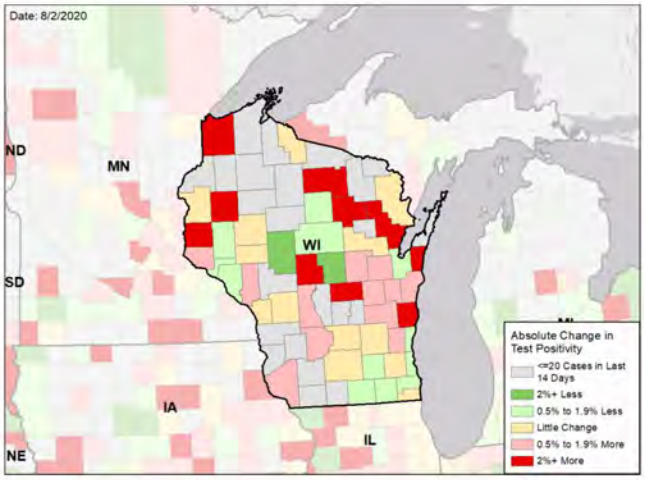
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY



DATA SOURCES

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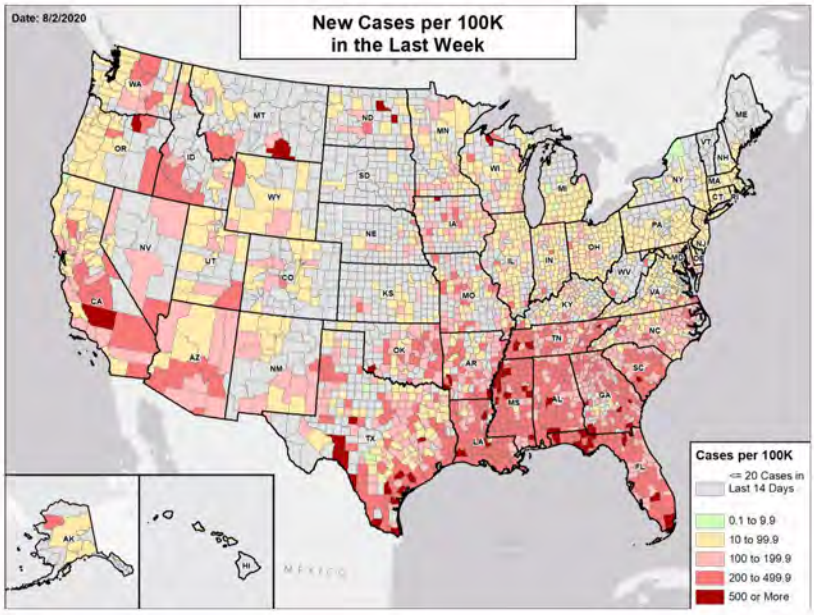
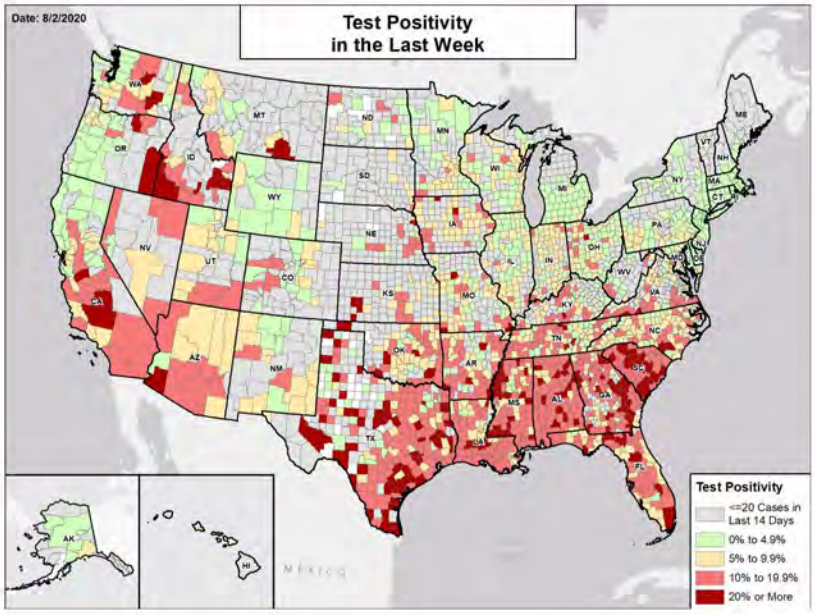
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



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Methods

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Metric	Green	Yellow	Red
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Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

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WYOMING

STATE REPORT | 08.02.2020

SUMMARY

- Wyoming is in the yellow zone for cases, indicating between 10 to 100 new cases per 100,000 population last week, and the green zone for test positivity, indicating a rate below 5%.
- Wyoming has seen stability in new cases and an increase in testing positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Teton County, 2. Laramie County, and 3. Sweetwater County. These counties represent 47.6 percent of new cases in Wyoming.
- Wyoming had 55 new cases per 100,000 population in the past week, compared to a national average of 137 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 5 to support operations activities from FEMA and 1 to support medical activities from VA.
- Between Jul 25 - Jul 31, on average, 10 patients with confirmed COVID-19 and 9 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Wyoming. An average of 81 percent of hospitals reported each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Promote social distancing and the use of cloth face masks in indoor settings outside of homes, especially in yellow- and red-zone metro areas and counties.
- Require face masks for all crowded indoor workplace settings, such as meat-packing plants.
- Continue aggressive case investigation and innovative contact tracing (use of app), with early isolation of known or suspected cases and quarantine of all contacts. Maintain a particular focus in cities or counties with elevated or increasing transmission, such as Jackson and Evanston and in Teton, Laramie, Fremont, Sublette, Uinta, Lincoln, and Carbon counties.
- In areas with insufficient testing and long turnaround times, increase testing capacity by implementing pooled testing as described below, ensuring all public health labs are staffed and running 24/7, and requiring all universities with suitable platforms to use their equipment to expand surveillance testing for schools (K-12, community colleges) and university students.
- Tribal Nations: Continue to promote social distancing and mask recommendations. Develop specific culturally relevant education and public health messaging. Pooled testing should be instituted for multi-generational households. Spaces to provide quarantine of contacts and isolation of cases should be provided as needed.
- Continue to protect those in nursing homes and long-term care facilities with effective surveillance, requiring face masks for all staff, and implementing prompt screening of all residents and staff and isolation and quarantine measures when any new case is identified in the facility.
- Increase messaging on the risk of serious disease for older individuals and for individuals in all age groups with preexisting risk factors, such as obesity, hypertension, and diabetes mellitus.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

The purpose of this report is to develop a shared understanding of the current status of the pandemic at the national, regional, state and local levels. We recognize that data at the state level may differ from that available at the federal level. Our objective is to use consistent data sources and methods that allow for comparisons to be made across localities. We appreciate your continued support in identifying data discrepancies and improving data completeness and sharing across systems. We look forward to your feedback.

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WYOMING

STATE REPORT | 08.02.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	321 (55)	-4.5%	9,748 (80)	450,372 (137)
DIAGNOSTIC TEST POSITIVITY RATE	4.4%	+1.1%*	5.7%	8.2%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	7,252** (1,253)	-8.6%**	205,390** (1,675)	5,235,721** (1,595)
COVID DEATHS (RATE PER 100,000)	0 (0)	-100.0%	102 (1)	8,399 (3)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	0.0%	+0.0%*	4.7%	12.3%

MOBILITY

* Indicates absolute change in percentage points.

** Due to delayed reporting, this figure may underestimate total diagnostic tests and week-on-week changes in diagnostic tests.

DATA SOURCES

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, previous week is 7/18 - 7/24.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 7/31/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/20-7/26, previous week is 7/13-7/19.

WYOMING

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COVID-19 COUNTY AND METRO ALERTS*

	LOCALITIES IN RED ZONE		LOCALITIES IN YELLOW ZONE	
METRO AREA (CBSA) LAST WEEK	0	N/A	1	Evanston
COUNTY LAST WEEK	0	N/A	2	Teton Uinta

*** Localities with fewer than 10 cases last week have been excluded from these alerts.**

Red Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases above 100 per 100,000 population, and a diagnostic test positivity result above 10%.

Yellow Zone: Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases between 10-100 per 100,000 population, and a diagnostic test positivity result between 5-10%, or one of those two conditions and one condition qualifying as being in the "Red Zone."

Note: Top 12 locations are selected based on the highest number of new cases in the last three weeks.

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020; last week is 7/25 - 7/31, three weeks is 7/11 - 7/31.

Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 10 people or fewer
- Do not go to bars, nightclubs, or gyms
- Use take out or eat outdoors socially distanced
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene, including handwashing and cleaning surfaces
- Reduce your public interactions and activities to 25% of your normal activity

Public Officials

- Close bars and gyms, and create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 10 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 2-3 individuals in high incidence settings and 5:1 pools in setting where test positivity is under 10%
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

POLICY RECOMMENDATIONS FOR COUNTIES IN THE YELLOW ZONE IN ORDER TO PREEMPT EXPONENTIAL COMMUNITY SPREAD

Public Messaging

- Wear a mask at all times outside the home and maintain physical distance
- Limit social gatherings to 25 people or fewer
- Do not go to bars or nightclubs
- Use take out, outdoor dining or indoor dining when strict social distancing can be maintained
- Protect anyone with serious medical conditions at home by social distancing at home and using high levels of personal hygiene
- Reduce your public interactions and activities to 50% of your normal activity

Public Officials

- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully

Testing

- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device

WYOMING

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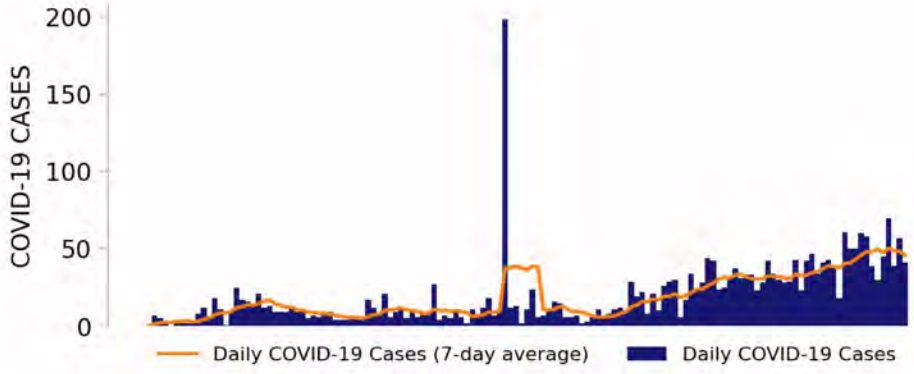
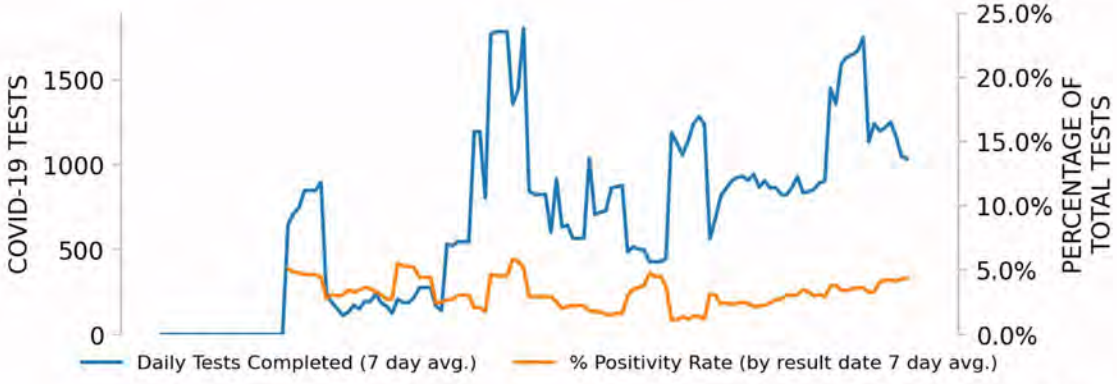
NEW CASES

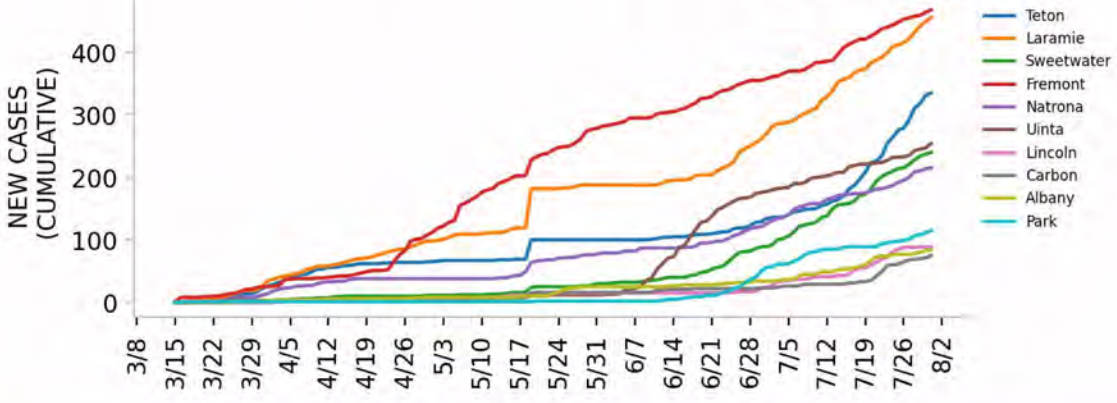


TESTING



TOP COUNTIES

Top counties based on greatest number of new cases in last three weeks (7/11 - 7/31)

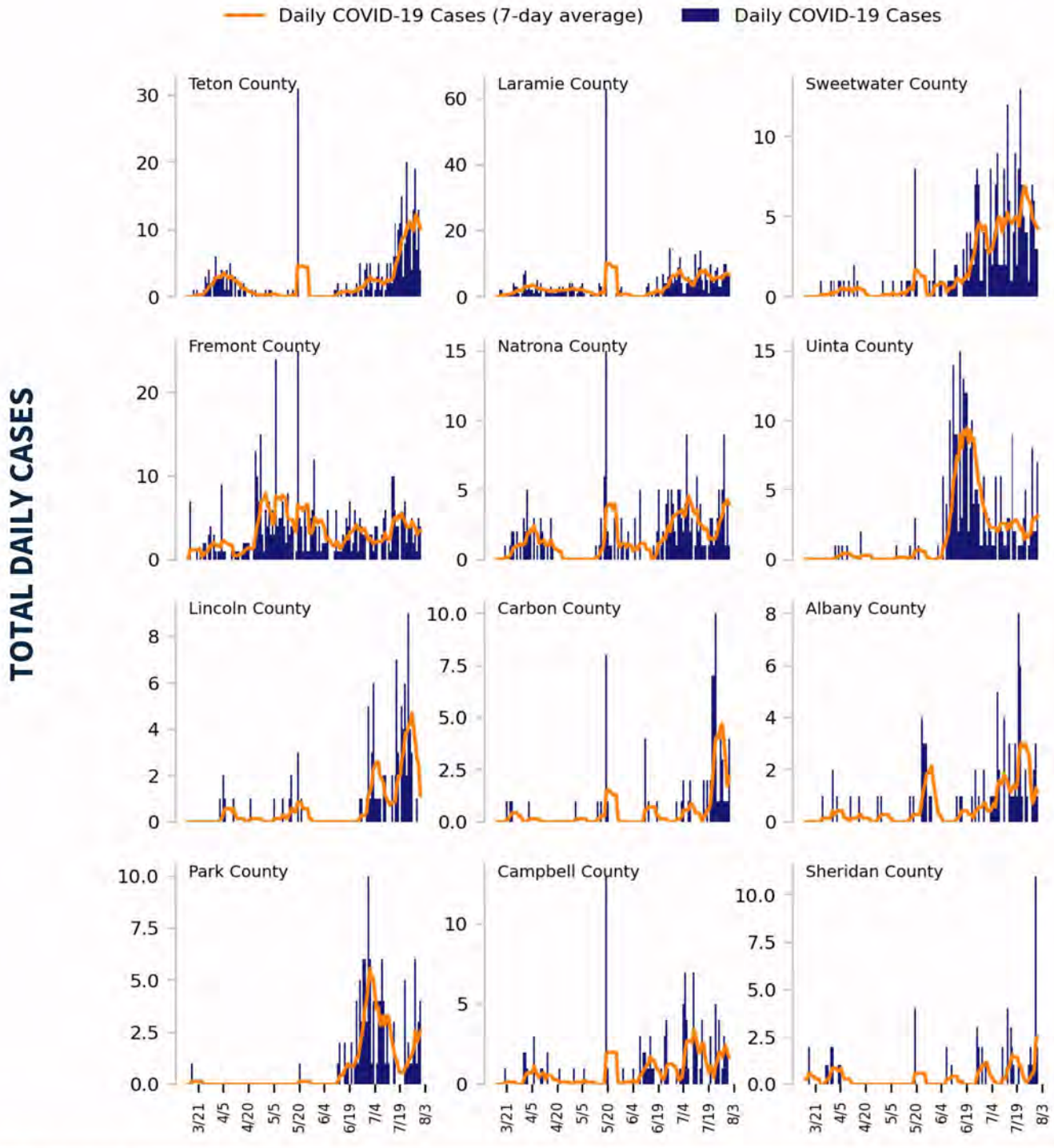


DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 7/31/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 7/29/2020.

Top 12 counties based on number of new cases in the last 3 weeks



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last 3 weeks is 7/11 - 7/31.

WYOMING

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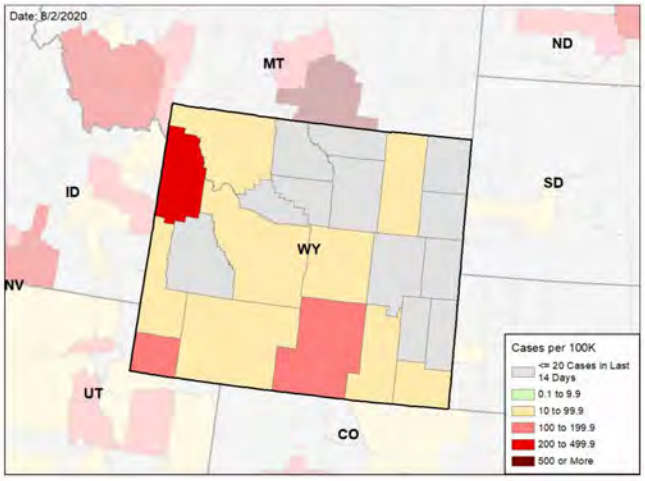
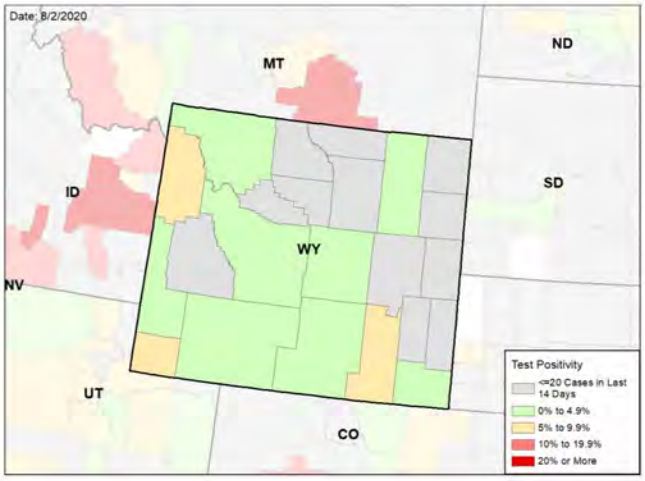
CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK

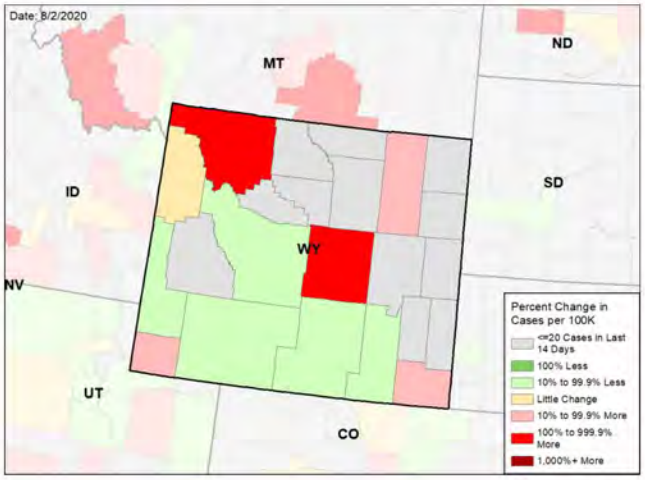
NEW CASES PER 100,000 DURING LAST WEEK



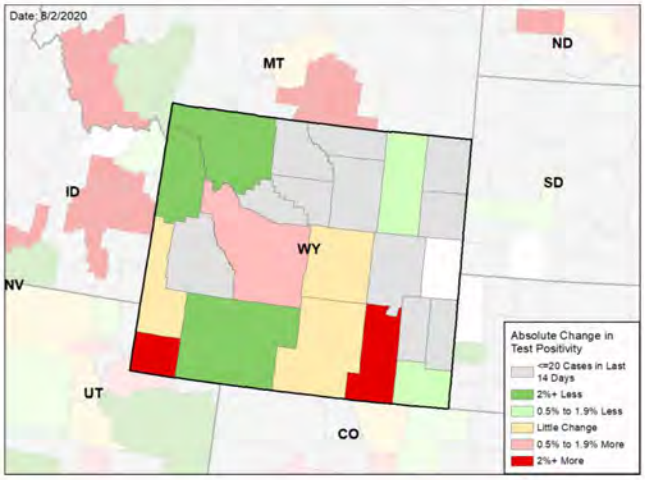
TEST POSITIVITY DURING LAST WEEK



WEEKLY % CHANGE IN NEW CASES PER 100K



WEEKLY CHANGE IN TEST POSITIVITY

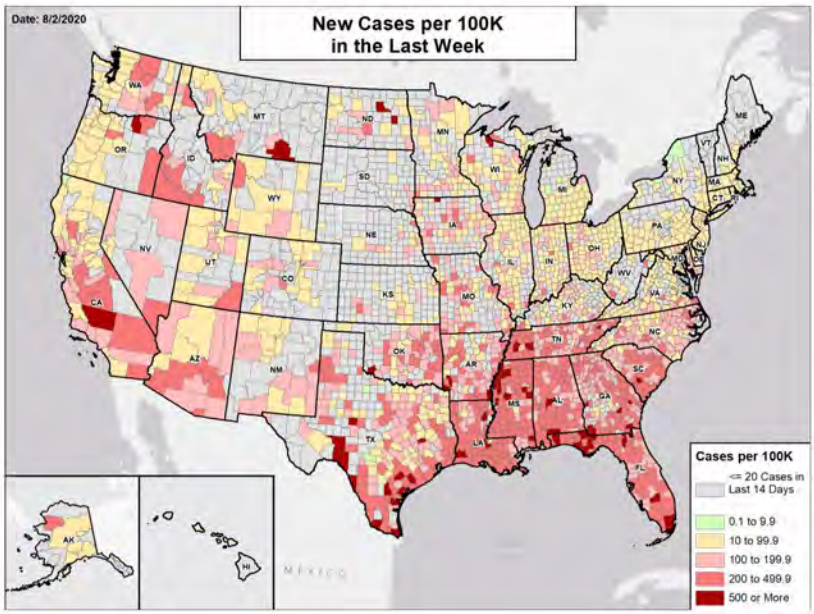


DATA SOURCES

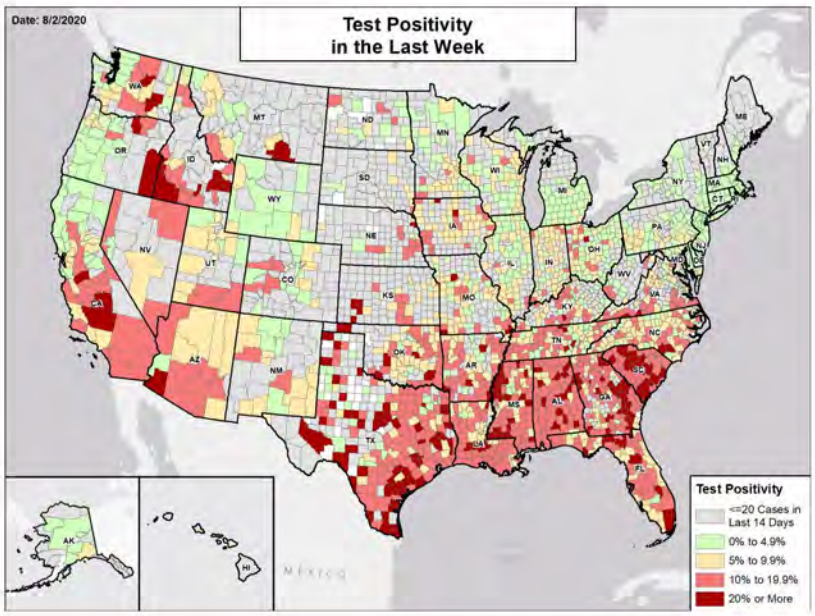
Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31, previous week is 7/18 - 7/24.
Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29, previous week is 7/16 - 7/22. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

National Picture

NEW CASES PER 100,000 LAST WEEK



TEST POSITIVITY LAST WEEK



DATA SOURCES

Cases: County-level data from USAFacts through 7/31/2020. Last week is 7/25 - 7/31.
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 7/29/2020. Last week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

Methods

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COLOR THRESHOLDS: Results for each indicator should be taken in context of the findings for related indicators (e.g., changes in case incidence and testing volume)

Metric	Green	Yellow	Red
New cases per 100,000 population per week	<10	10-100	>100
Percent change in new cases per 100,000 population	<-10%	-10% - 10%	>10%
Diagnostic test result positivity rate	<5%	5%-10%	>10%
Change in test positivity	<-0.5%	-0.5%-0.5%	>0.5%
Total diagnostic tests resulted per 100,000 population per week	>1000	500-1000	<500
Percent change in tests per 100,000 population	>10%	-10% - 10%	<-10%
COVID-19 deaths per 100,000 population per week	<0.5	0.5-2	>2
Percent change in deaths per 100,000 population	<-10%	-10% - 10%	>10%
Skilled Nursing Facilities with at least one resident COVID-19 case	0%	0.1%-5%	>5%
Change in SNFs with at least one resident COVID-19 case	<-0.5%	-0.5%-0.5%	>0.5%

DATA NOTES

- Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes. It is critical that states provide as up-to-date data as possible.
- **Cases and deaths:** County-level data from USAFacts as of 13:30 EDT on 08/02/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 7/25 to 7/31; previous week data are from 7/18 to 7/24.
- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/23 to 7/29; previous week data are from 7/16 to 7/22. HHS Protect data is recent as of 13:00 EDT on 08/02/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/01/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/01/2020 and through 7/31/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 19:20 EDT on 08/02/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.