SUMMARY

- Idaho is in the red zone for cases, indicating 101 or more new cases per 100,000 population, with the 18th highest rate in the country. Idaho is in the red zone for test positivity, indicating a rate at or above 10.1%, with the 7th highest rate in the country.
- Idaho has seen a decrease in new cases and a decrease in test positivity. Although overall test positivity declined across the state, it increased in 21 counties, most notably in Owyhee, Minidoka, Bear Lake, Idaho, Benewah, and Jefferson counties.
- The following three counties had the highest number of new cases over the last 3 weeks: 1. Ada County, 2. Kootenai County, and 3. Canyon County. These counties represent 59.2% of new cases in Idaho.
- 82% of all counties in Idaho have moderate or high levels of community transmission (yellow, orange, or red zones), with 66% having high levels of community transmission (red zone).
- During the week of Dec 14 - Dec 20, 21% of nursing homes had at least one new resident COVID-19 case, 48% had at least one new staff COVID-19 case, and 10% had at least one new resident COVID-19 death. New cases were noted in staff and residents in dozens of facilities, with wider outbreaks in at least 5 facilities; Life Care Centers appear to have particularly extensive and persistent outbreaks, although the comparatively high rate may be related to testing volume.
- COVID-specific and total ICU admissions have increased across the state.
- Idaho had 399 new cases per 100,000 population, compared to a national average of 391 per 100,000.
- Current staff deployed from the federal government as assets to support the state response are: 9 to support operations activities from FEMA; 2 to support epidemiology activities from CDC; and 1 to support operations activities from CDC.
- The federal government has supported surge testing in Idaho Falls, ID.
- Between Dec 19 - Dec 25, on average, 42 patients with confirmed COVID-19 and 4 patients with suspected COVID-19 were reported as newly discharged each day to hospitals in Idaho. This is a decrease of 30% in total new COVID-19 hospital admissions.

RECOMMENDATIONS

Treatment Alerts:
- Patients prior to hospitalization: Preliminary data suggest that early diagnosis and immediate treatment with monoclonal antibodies (mAb) may substantially lower the risk of hospitalization and death. Monoclonal antibody infusion must be immediately made available to those at risk for severe disease; outpatient infusion capacity should be developed in all communities.
- Patients who require hospitalization: Remdesivir is best early in admission and the benefit is most evident in those who require supplemental oxygen (but not delivered through high-flow device or mechanical ventilation). Anticoagulation and immune suppressive treatments (like steroids) should be given in accordance with protocols in hospitalized patients.

Testing Alerts:
- If you are under 40, you need to assume you became infected if you gathered beyond your immediate household. Most likely, you will not have symptoms; however, you are dangerous to others and you must isolate away from anyone at increased risk for severe disease and get tested.
- If you are over 65 or with significant medical conditions and you gathered outside of your immediate household, you are at significant risk for serious COVID infection; if you develop any symptoms, you must get tested immediately as the majority of therapeutics work best early in infection.

Pandemic Alerts:
- Data are currently unstable, outside of daily hospital admissions, due to inconsistent reporting and incomplete data over the holidays; there will be a reporting "surge" in cases and deaths as reporting catches up.
- While case rate and test positivity are no longer increasing, most states are at a high plateau for cases and test positivity, and the risk for reigniting local epidemics remains high.
- Throughout most of the Upper Midwest, Northern Plains, and Rocky Mountain states, we continue to see improvement, although virus levels are still high and any post-holiday surge will be evident. The East and West Coasts, Sunbelt, Tennessee, and West Virginia were in full winter surge, so it will be difficult to see the surge on top of the current, continued deterioration.
- All public health officials must make it clear that if you are over 65 or with significant health conditions, you should not enter any indoor public spaces where anyone is unmasked due to the immediate risk to your health; you should have groceries and medications delivered.
- No unmasked public gatherings are safe and no indoor private gatherings are safe without all members fully masked, unless all members are actively taking the same precautions and regularly test negative.
- Refer to the time-lapse maps in the back of the packet. All states with continued increases (both coasts and the Sunbelt) must continue with strict public mitigation and continued restrictions on retail spaces, while increasing use of safer outdoor spaces.
- Encouraging data suggests that mitigation efforts are working and widespread immunity may be emerging; there are still very high levels of virus circulating, and it is critical that all efforts continue to encourage compliance to community mitigation efforts.
- Maintain aggressive public health messaging campaign throughout this holiday season using all media platforms (conventional, social, SMS); provide an avenue for the public to report non-compliance with local ordinances and develop local protocols for managing.
- Face masks, and the requirements for them, have been shown to reduce transmission; promote use of face masks as a way to reopen local businesses and reenergize the economy.
- Maintain contact tracing capacity by automating the process as much as possible, including contact elicitation, education and counseling, and logging of isolation/quarantine.
- Ensure all universities returning after winter break move to mandatory weekly testing of all on and off campus students; begin planning now.
- When K-12 schools return, establish public health protocol to conduct active testing in schools for teachers and students in districts with high positivity and cases. In accordance with CDC guidelines, masks should be worn by students and teachers in K-12 schools.
- Pursue use of state contracting process to fill potential gaps in hospitals and 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.
## Idaho State Report | 12.27.2020

<table>
<thead>
<tr>
<th>Metric</th>
<th>State</th>
<th>State, % Change from Previous Week</th>
<th>FEMA/HHS Region</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>New COVID-19 Cases (Rate per 100,000)</strong></td>
<td>7,113 (399)</td>
<td>-16%</td>
<td>29,118 (203)</td>
<td>1,283,432 (391)</td>
</tr>
<tr>
<td><strong>Viral (RT-PCR) Lab Test Positivity Rate</strong></td>
<td>16.3%</td>
<td>-3.2%*</td>
<td>8.5%</td>
<td>11.3%</td>
</tr>
<tr>
<td><strong>Total Viral (RT-PCR) Lab Tests (Tests per 100,000)</strong></td>
<td>39,233** (2,195**)</td>
<td>-16%**</td>
<td>280,150** (1,952**)</td>
<td>10,285,289** (3,133**)</td>
</tr>
<tr>
<td><strong>COVID-19 Deaths (Rate per 100,000)</strong></td>
<td>76 (4.3)</td>
<td>-39%</td>
<td>291 (2.0)</td>
<td>16,577 (5.1)</td>
</tr>
<tr>
<td>SNFs with ≥1 New Resident COVID-19 Case</td>
<td>21%</td>
<td>N/A†</td>
<td>19%</td>
<td>32%</td>
</tr>
<tr>
<td>SNFs with ≥1 New Staff COVID-19 Case</td>
<td>48%</td>
<td>N/A†</td>
<td>39%</td>
<td>51%</td>
</tr>
<tr>
<td>SNFs with ≥1 New Resident COVID-19 Death</td>
<td>10%</td>
<td>N/A†</td>
<td>12%</td>
<td>16%</td>
</tr>
<tr>
<td><strong>Total New COVID-19 Hospital Admissions (Rate per 100 Beds)</strong></td>
<td>321 (10)</td>
<td>-30% (-29%)</td>
<td>2,890 (12)</td>
<td>152,352 (21)</td>
</tr>
<tr>
<td>Number of Hospitals with Supply Shortages (Percent)</td>
<td>2 (5%)</td>
<td>-2% (-50%*)</td>
<td>57 (26%)</td>
<td>1,143 (22%)</td>
</tr>
<tr>
<td>Number of Hospitals with Staff Shortages (Percent)</td>
<td>5 (12%)</td>
<td>+0% (+0%*)</td>
<td>37 (17%)</td>
<td>1,357 (27%)</td>
</tr>
</tbody>
</table>

* 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.
† Skilled nursing facility data entry is experiencing a data submission lag. Therefore, the most current week’s data should not be compared to previous data. 89% of facilities reported during the most current week.

### Data Sources
- Additional data details available under METHODS

### Note
Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes.

### Cases and Deaths
State values are calculated by aggregating county-level data from a CDC managed aggregate county dataset that is compiled from state and local health departments; therefore, the values may not match those reported directly by the state. Data is through 12/25/2020; previous week is 12/12 - 12/18.

### Testing
CELRR (COVID-19 Electronic Lab Reporting) state health department-reported data through 12/23/2020. Previous week is 12/10 - 12/16.

### SNFs
Skilled nursing facilities. National Healthcare Safety Network. Data are reported separately for cases among residents and staff. Data is through 12/20/2020, previous week is 12/7-12/13.

### Admissions
Unified hospitalization dataset in HHS Protect. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. Hospital jurisdictions identified by states/rates as those from which we should not expect reports were excluded from the totals. Totals include confirmed and suspected COVID-19 admissions.

### Shortages
Unified hospital dataset in HHS Protect. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. Includes hospitals reporting a staffing shortage currently or projected within one week. Low supply is defined as a hospital reporting 0 or 1-3 days’ supply, not able to obtain, or not able to maintain a 3-day supply of N95s, face masks, gloves, gowns, or eye protection. Values presented show the latest reports from hospitals in the week ending 12/25/2020.
DATA SOURCES – Additional data details available under METHODS
Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes.
Cases: State values are calculated by aggregating county-level data from a CDC managed aggregate county dataset that is compiled from state and local health departments; therefore, the values may not match those reported directly by the state. Data is through 12/25/2020.
41 hospitals are expected to report in Idaho

DATA SOURCES – Additional data details available under METHODS

Hospitalizations: Unified hospitalization dataset in HHS Protect. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. Hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure.

PPE: Unified hospitalization dataset in HHS Protect. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. Values presented show the latest reports from hospitals in the week ending 12/23/2020.
**IDAHO**

STATE REPORT | 12.27.2020

COVID-19 COUNTY AND METRO ALERTS*

Top 12 shown in table (full lists below)

<table>
<thead>
<tr>
<th>METRO AREA (CBSA)</th>
<th>LOCALITIES IN RED ZONE</th>
<th>LOCALITIES IN ORANGE ZONE</th>
<th>LOCALITIES IN YELLOW ZONE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boise, Coeur d'Alene, Pocatello, Rexburg, Sandpoint, Lewiston, Burley, Mountain Home, Moscow, Ontario, Logan</td>
<td>12 ▼ (-1)</td>
<td>29 ▼ (-1)</td>
<td>2 ▲ (+1)</td>
</tr>
<tr>
<td>Ada, Kootenai, Canyon, Bannock, Madison, Twin Falls, Bonner, Nez Perce, Jefferson, Elmore, Latah, Gem</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Two Black, Gooding, Oneida</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Idaho Falls</td>
<td>1 ▼ (-1)</td>
<td>3 ■ (+0)</td>
<td>4 ■ (+0)</td>
</tr>
<tr>
<td>Hailey, Jackson</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clearwater, Blaine, Teton, Caribou</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Change from previous week’s alerts: ▲ Increase ■ Stable ▼ Decrease

**All Red Counties:** Ada, Kootenai, Canyon, Bannock, Madison, Twin Falls, Bonner, Nez Perce, Jefferson, Elmore, Latah, Gem, Payette, Shoshone, Cassia, Minidoka, Jerome, Idaho, Washington, Franklin, Valley, Owyhee, Boundary, Benewah, Adams, Lewis, Boise, Power, Bear Lake

**Red CBSAs:** Boise CBSA is comprised of Ada County, ID; Boise County, ID; Canyon County, ID; Gem County, ID; and Owyhee County, ID. Coeur d’Alene CBSA is comprised of Kootenai County, ID. Pocatello CBSA is comprised of Bannock County, ID and Power County, ID. Twin Falls CBSA is comprised of Jerome County, ID and Twin Falls County, ID. Rexburg CBSA is comprised of Fremont County, ID and Madison County, ID. Sandpoint CBSA is comprised of Bonner County, ID. Lewiston CBSA is comprised of Nez Perce County, ID and Asotin County, WA. Burley CBSA is comprised of Cassia County, ID and Minidoka County, ID. Mountain Home CBSA is comprised of Elmore County, ID. Moscow CBSA is comprised of Latah County, ID. Ontario CBSA is comprised of Payette County, ID and Malheur County, OR. Logan CBSA is comprised of Franklin County, ID and Cache County, UT.

**Orange CBSAs:** Idaho Falls CBSA is comprised of Bonneville County, ID; Butte County, ID; and Jefferson County, ID.

**Yellow CBSAs:** Hailey CBSA is comprised of Blaine County, ID and Camas County, ID. Jackson CBSA is comprised of Teton County, ID and Teton County, WY.

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

**Note:** Lists of red, orange, and yellow localities are sorted by the number of new cases in the last 3 weeks, from highest to lowest. Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes.

**DATA SOURCES** – Additional data details available under METHODS

**Cases and Deaths:** State values are calculated by aggregating county-level data from a CDC managed aggregate county dataset that is compiled from state and local health departments; therefore, the values may not match those reported directly by the state. Data is through 12/25/2020.

**Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 12/23/2020.
Top 12 counties based on number of new cases in the last 3 weeks

**DATA SOURCES**

Additional data details available under METHODS

**Cases:** State values are calculated by aggregating county-level data from a CDC managed aggregate county dataset that is compiled from state and local health departments; therefore, the values may not match those reported directly by the state. Data is through 12/25/2020. Last 3 weeks is 12/5 - 12/25.
CASE RATES AND VIRAL LAB TEST POSITIVITY

NEW CASES PER 100,000

NEW CASES PER 100,000 ONE MONTH BEFORE

VIRAL (RT-PCR) LABORATORY TEST POSITIVITY

VIRAL (RT-PCR) LABORATORY TEST POSITIVITY ONE MONTH BEFORE

DATA SOURCES - Additional data details available under METHODS

Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes.

Cases: State values are calculated by aggregating county-level data from a CDC managed aggregate county dataset that is compiled from state and local health departments; therefore, the values may not match those reported directly by the state. Data is through 12/25/2020. The week one month before is 11/21 - 11/27.

HOSPITAL ADMISSIONS AND DEATH RATES

TOTAL NEW COVID-19 ADMISSIONS PER 100 INPATIENT BEDS

NEW DEATHS PER 100,000

DATA SOURCES – Additional data details available under METHODS
Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes.
Deaths: State values are calculated by aggregating county-level data from a CDC managed aggregate county dataset that is compiled from state and local health departments; therefore, the values may not match those reported directly by the state. Data is through 12/25/2020. The week one month before is 11/21 - 11/27.
Hospitalizations: Unified hospitalization dataset in HHS Protect. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. Hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. Totals include confirmed and suspected COVID-19 admissions.
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.

Cases: State values are calculated by aggregating county-level data from a CDC managed aggregate county dataset that is compiled from state and local health departments; therefore, the values may not match those reported directly by the state. Data is through 12/25/2020. European community mitigation information sourced from European CDC — Situation Update Worldwide.
National Picture

NEW CASES PER 100,000 IN THE WEEK:

ONE MONTH BEFORE

Date: 12/21/2020
New Cases per 100K
11/21/2020-11/27/2020

TWO MONTHS BEFORE

Date: 12/21/2020
New Cases per 100K
10/24/2020-10/30/2020

THREE MONTHS BEFORE

Date: 12/21/2020
New Cases per 100K
09/26/2020-10/02/2020

FOUR MONTHS BEFORE

Date: 12/21/2020
New Cases per 100K
08/29/2020-09/04/2020

FIVE MONTHS BEFORE

Date: 12/21/2020
New Cases per 100K
08/02/2020-08/08/2020

SIX MONTHS BEFORE

Date: 12/21/2020
New Cases per 100K
07/04/2020-07/10/2020

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.

Cases: State values are calculated by aggregating county-level data from a CDC managed aggregate county dataset that is compiled from state and local health departments; therefore, the values may not match those reported directly by the state. The week one month before is 11/21 - 11/27; the week two months before is 10/24 - 10/30; the week three months before is 9/26 - 10/2; the week four months before is 8/29 - 9/4; the week five months before is 8/1 - 8/7; the week six months before is 7/4 - 7/10.
**National Picture**

**VIRAL (RT-PCR) LAB TEST POSITIVITY**

Date: 12/27/2020

**VIRAL (RT-PCR) LAB TEST POSITIVITY IN THE WEEK:**

**ONE MONTH BEFORE**

**TWO MONTHS BEFORE**

**THREE MONTHS BEFORE**

**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.

**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 12/23/2020. The week one month before is 11/19 - 11/25; the week two months before is 10/22 - 10/28; the week three months before is 9/24 - 9/30.
COVID-19

National Picture

TOTAL NEW COVID-19 ADMISSIONS PER 100 INPATIENT BEDS

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.

Admissions: Unified hospitalization dataset in HHS Protect through 12/25/2020. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. Hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the totals. Totals include confirmed and suspected COVID-19 admissions. The week one month before is 11/21 - 11/27; the week two months before is 10/24 - 10/30; the week three months before is 9/26 - 10/2.
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.

Deaths: State values are calculated by aggregating county-level data from a CDC managed aggregate county dataset that is compiled from state and local health departments; therefore, the values may not match those reported directly by the state. The week one month before is 11/21 - 11/27; the week two months before is 10/24 - 10/30; the week three months before is 9/26 - 10/2.
METHODS

STATE REPORT | 12.27.2020

<table>
<thead>
<tr>
<th>Metric</th>
<th>Dark Green</th>
<th>Light Green</th>
<th>Yellow</th>
<th>Orange</th>
<th>Light Red</th>
<th>Red</th>
<th>Dark Red</th>
<th>Darkest Red</th>
</tr>
</thead>
<tbody>
<tr>
<td>New cases per 100,000 population per week</td>
<td>≤4</td>
<td>5 – 9</td>
<td>10 – 50</td>
<td>51 – 100</td>
<td>101 – 199</td>
<td>200 – 499</td>
<td>500 – 749</td>
<td>≥750</td>
</tr>
<tr>
<td>Percent change in new cases per 100,000 population</td>
<td>≤-26%</td>
<td>-25% – -11%</td>
<td>-10% – 0%</td>
<td>1% – 10%</td>
<td>11% – 99%</td>
<td>100% – 999%</td>
<td>≥1000%</td>
<td></td>
</tr>
<tr>
<td>Diagnostic test result positivity rate</td>
<td>≤2.9%</td>
<td>3.0% – 4.9%</td>
<td>5.0% – 7.9%</td>
<td>8.0% – 10.0%</td>
<td>10.1% – 15.0%</td>
<td>15.1% – 20.0%</td>
<td>20.1% – 25.0%</td>
<td>≥25.1%</td>
</tr>
<tr>
<td>Change in test positivity</td>
<td>≤-2.1%</td>
<td>-2.0% – -0.6%</td>
<td>-0.5% – 0.0%</td>
<td>0.1% – 0.5%</td>
<td>0.6% – 2.0%</td>
<td>≥2.1%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total diagnostic tests resulted per 100,000 population per week</td>
<td>≥5000</td>
<td>3001 – 4999</td>
<td>2000 – 2999</td>
<td>1000 – 1999</td>
<td>500 – 999</td>
<td>≤499</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percent change in tests per 100,000 population</td>
<td>≥26%</td>
<td>11% – 25%</td>
<td>1% – 10%</td>
<td>-10% – 0%</td>
<td>-25% – -11%</td>
<td>≤-26%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>COVID-19 deaths per 100,000 population per week</td>
<td>0.0</td>
<td>0.1 – 1.0</td>
<td>1.1 – 2.0</td>
<td>2.1 – 5.0</td>
<td>5.1 – 10.0</td>
<td>10.1 – 15.0</td>
<td>≥15.1</td>
<td></td>
</tr>
<tr>
<td>Percent change in deaths per 100,000 population</td>
<td>≤-26%</td>
<td>-25% – -11%</td>
<td>-10% – 0%</td>
<td>1% – 10%</td>
<td>11% – 25%</td>
<td>≥26%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Skilled Nursing Facilities with at least one resident COVID-19 case, death</td>
<td>≤0%</td>
<td>1% – 5%</td>
<td>1% – 5%</td>
<td>1% – 5%</td>
<td>1% – 5%</td>
<td>≥6%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Change in SNFs with at least one resident COVID-19 case, death</td>
<td>≤-2%</td>
<td>-1% – 1%</td>
<td>-1% – 1%</td>
<td>-1% – 1%</td>
<td>-1% – 1%</td>
<td>≥2%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total new COVID-19 hospital admissions per 100 beds</td>
<td>≤2</td>
<td>3 – 5</td>
<td>6 – 10</td>
<td>11 – 15</td>
<td>16 – 20</td>
<td>21 – 25</td>
<td>≥26</td>
<td></td>
</tr>
<tr>
<td>Change in total new COVID-19 hospital admissions per 100 beds</td>
<td>≤-26%</td>
<td>-25% – -11%</td>
<td>-10% – 0%</td>
<td>1% – 10%</td>
<td>11% – 25%</td>
<td>≥26%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percent of hospitals with supply/staff shortages</td>
<td>≤0%</td>
<td>1% – 9%</td>
<td>10% – 19%</td>
<td>20% – 24%</td>
<td>25% – 29%</td>
<td>30% – 39%</td>
<td>≥40%</td>
<td></td>
</tr>
<tr>
<td>Change in percent of hospitals with supply/staff shortages</td>
<td>≤-10%</td>
<td>-9% – -5%</td>
<td>-4% – 0%</td>
<td>1% – 4%</td>
<td>5% – 9%</td>
<td>≥10%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Some dates may have incomplete data due to delays and/or differences in state 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. Figures and values may also differ from state reports due to differing methodologies.

- Color threshold values are rounded before color classification.
- **Cases and Deaths:** County-level data from CDC managed aggregate county dataset as of 18:04 EST on 12/27/2020. State values are calculated by aggregating county-level data. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted.
- **Testing:** The data presented represent viral COVID-19 laboratory diagnostic and screening test (reverse transcription polymerase chain reaction, RT-PCR) results—not individual people—and exclude antibody and antigen tests, unless stated otherwise. CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe county-level viral COVID-19 RT-PCR result 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. Because the data are deidentified, total RT-PCR tests are the number of tests performed, not the number of individuals tested. RT-PCR test positivity rate is the number of positive tests divided by the number of tests performed and reported. Last week data are from 12/17 to 12/23; previous week data are from 12/10 to 12/16; the week one month before data are from 11/19 to 11/25. HHS Protect data is recent as of 15:51 EST on 12/27/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EST on 12/26/2020.
- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. 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 15:57 EST on 12/27/2020.
- **Hospital PPE:** 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. Hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. Data is recent as of 12:50 EST on 12/27/2020.
- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident and staff cases independently. 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 analyses. Data presented in this report are more recent than data publicly posted by CMS. Last week is 12/14-12/20, previous week is 12/7-12/13.
- **County and Metro Area Color Categorizations**
  - **Red Zone:** Those core-based statistical areas (CBSAs) and counties that during the last week reported both new cases at or above 101 per 100,000 population, and a lab test positivity result at or above 10.1%.
  - **Orange Zone:** Those CBSAs and counties that during the last week reported both new cases between 51–100 per 100,000 population, and a lab test positivity result between 8.0–10.0%, or one of those two conditions and one condition qualifying as being in the “Red Zone.”
  - **Yellow Zone:** Those CBSAs and counties that during the last week reported both new cases between 25–50 per 100,000 population, and a lab test positivity result between 5.0–7.9%, or one of those two conditions and one condition qualifying as being in the “Orange Zone” or “Red Zone.”
- **Shortages:** Unified hospital dataset in HHS Protect. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. Includes hospitals reporting a staffing shortage currently or projected within one week. Low supply is defined as a hospital reporting 0 or 1-3 days’ supply, not able to obtain, or not able to maintain a 3-day supply of N95s, face masks, gloves, gowns, or eye protection. Data is recent as of 12:50 EST on 12/27/2020.