STATE REPORT
12.06.2020
Issue 25

ILLINOIS

SUMMARY

- Illinois saw a second week of slight improvement, although remained at extremely high levels of disease transmission, hospitalizations, and deaths. Illinois is in the red zone for cases, indicating 101 or more new cases per 100,000 population, with the 19th highest rate in the country. Illinois is in the red zone for test positivity, indicating a rate at or above 10.1%, with the 21st highest rate in the country.
- Illinois has seen stability in new cases and an increase in test positivity. Hospitalizations decreased slightly for a second week but remained near the highest levels of the pandemic and above the spring peak. Illinois reported an average of 135 deaths a day last week, the highest of any state. Congregate group homes and correctional facilities comprise a majority of the reported outbreaks the past month.
- Extremely high viral transmission continues to involve the entire state. The following three counties had the highest number of new cases over the last 3 weeks: 1. Cook County, 2. DuPage County, and 3. Will County. These counties represent 49.7% of new cases in Illinois.
- Illinois moved to intensified Tier 3 mitigation measures on Nov 20. Tier 3 restrictions will remain in place across Illinois until at least mid-December.
- 98% of all counties in Illinois have moderate or high levels of community transmission (yellow, orange, or red zones), with 85% having high levels of community transmission (red zone).
- During the week of Nov 23 - Nov 29, 33% of nursing homes had at least one new resident COVID-19 case, 52% had at least one new staff COVID-19 case, and 16% had at least one new resident COVID-19 death.
- Illinois had 513 new cases per 100,000 population, compared to a national average of 385 per 100,000.
- Current staff deployed from the federal government as assets to support the state response are: 69 to support operations activities from FEMA; 5 to support operations activities from ASPR; 1 to support epidemiology activities from CDC; and 7 to support operations activities from USCG.
- Between Nov 28 - Dec 4, on average, 574 patients with confirmed COVID-19 and 537 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Illinois. This is a minimal change in total COVID-19 hospital admissions.

RECOMMENDATIONS

- We have added a visual of your new hospital admissions for your state over the last 4 months so every state can see in pictures the significant increase in new hospitalizations for COVID-19.
- Also, please review the national maps at the back of your profile, which include pictorial timelines of the United States pandemic.
- This current fall to winter surge continues to spread to every corner of the US, from small towns to large cities, from farms to beach communities. This surge is the most rapid increase in cases; the widest spread of intense transmission, with more than 2,000 counties in COVID red zones; and the longest duration of rapid increase, now entering its 8th week, that we have experienced.
- Despite the severity of this surge and the threat to the hospital systems, many state and local governments are not implementing the same mitigation policies that stemmed the tide of the summer surge; that must happen now.
- We are also seeing clear improvement in many European countries that implemented strong public and private mitigation but preserved schooling; the majority of the United States is not mitigating similarly.
- Mitigation efforts must increase, including the implementation of key state and local policies with an additional focus on uniform behavioral change including masking, physical distancing, hand hygiene, no indoor gatherings outside of immediate households, and aggressive testing to find the asymptomatic individuals responsible for the majority of infectious spread.
- In the past week, significant reductions in testing and increases in percent positivity were observed. Primarily those with symptoms are being diagnosed; aggressive testing to find asymptomatic individuals responsible for the majority of infectious spread must be scaled. Testing data on age and ethnicity should be tracked to allow for more precise planning. The current vaccine implementation will not substantially reduce viral spread, hospitalizations, or fatalities until the 100 million Americans with comorbidities can be fully immunized, which will take until the late spring. Behavioral change and aggressive mitigation policies are the only widespread prevention tools that we have to address this winter surge.
- We share the strong concern of Illinois leaders that the current situation is becoming critical with more favorable outcomes dependent on the collective effort of Illinois's residents. The population and healthcare system must do everything possible to limit further holiday-related disease surges and prevent overrunning hospital capacity and avoidable deaths. Currently, the imminent arrival of vaccines provides hope; however, large-scale benefits of lower deaths and hospitalizations will only come after months of immunization. Difficult but temporary changes in personal behavior are key to limiting disease and death until we bring the pandemic to an end with immunization; this messaging must be delivered frequently and by all effective modalities. The Governor's continued, personal communication on these measures is commended.
- Ensure all clinical facilities, including mid-level and rural facilities, have expansion and contingency plans and up-to-date treatment protocols, including outpatient management; ensure all facilities, public and private, have maximal access to medications, supplies, and staffing and are accurately reporting current status of each resource. Ensure support for a platform for efficient intra- and inter-state patient transfers as needed.
- Continue to prioritize efforts toward marginalized communities that are disproportionately being impacted by COVID-19, including a strategy that prioritizes the allocation of the monoclonal antibody preparations to outpatient centers that serve more marginalized populations with higher levels of COVID-19 risk factors. Work with healthcare institutions to ensure capacity for outpatient infusion is accessible to COVID-19 patients who may benefit from IV therapies that could limit morbidity and hospitalizations.
- Proactive weekly testing of groups representative of the community (teachers, community college students, county workers, staff in crowded or congregate settings, hospital personnel, large private sector employers) will help identify the depth and breadth of community infection. These cases should be triangulated with cases among long-term care facility (LTCF) staff to identify geographic areas with high numbers of asymptomatic and pre-symptomatic cases, which should trigger widespread testing, identification, and isolation of positive cases among community members, stopping ongoing spread. Efforts to identify and reduce asymptomatic transmission should run concurrently with testing of symptomatic persons and contact tracing of cases. Requiring use only in symptomatic individuals is preventing adequate testing and control of the pandemic.
- Proactive testing must be part of the mitigation efforts inclusive of universal masking, physical distancing, hand hygiene, and the active promotion of activities in outdoor settings. Given continuing outbreaks and deaths in nursing homes, ensure increased frequency of LTCF testing and rapid implementation of vaccination into LTCFs as vaccine becomes available.
- Ensure all K-12 schools are following CDC guidelines including masks and utilize Abbott BinaxNOW tests to routinely test all teachers as another indicator of the degree of community spread. Ensure all universities returning to campus after winter break move to mandatory weekly testing of all on and off campus students; begin planning now.
- Continue preparations for the delivery and distribution of vaccines including by identifying the staffing capabilities and needs of local health departments and local jurisdictions and preparing for state-supported augmentation of staff and subject matter expertise to ensure timely and safe operations. Provide clear and concise messaging across the response community on the prioritization of vaccinations.
- 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.

COVID-19

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	STATE	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION	UNITED STATES
NEW COVID-19 CASES (RATE PER 100,000)	65,024 (513)	-8%	292,123 (556)	1,264,488 (385)
VIRAL (RT-PCR) LAB TEST POSITIVITY RATE	13.6%	+1.4%*	14.4%	11.5%
TOTAL VIRAL (RT-PCR) LAB TESTS (TESTS PER 100,000)	412,634** (3,256**)	-31%**	1,948,301** (3,708**)	8,704,925** (2,652**)
COVID-19 DEATHS (RATE PER 100,000)	945 (7.5)	+30%	3,507 (6.7)	13,769 (4.2)
SNFs WITH ≥1 NEW RESIDENT COVID-19 CASE	33%	N/A*†	33%	25%
SNFs WITH ≥1 NEW STAFF COVID-19 CASE	52%	N/A*†	54%	43%
SNFs WITH ≥1 NEW RESIDENT COVID-19 DEATH	16%	N/A*†	16%	11%
TOTAL NEW COVID-19 HOSPITAL ADMISSIONS (RATE PER 100 BEDS)	7,774 (26)	-3% (-3%)	30,833 (26)	148,450 (20)

* 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 lag due to the Thanksgiving holiday and changes to the questionnaire. Therefore, the most current week's data should not be compared to previous data.

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 USAFacts; therefore, the values may not match those reported directly by the state. Data is through 12/4/2020; previous week is 11/21 - 11/27.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 12/2/2020. Previous week is 11/19 - 11/25.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data are reported separately for cases among residents and staff. Data is through 11/29/2020, previous week is 11/16-11/22. Facilities that are undergoing reporting quality review are not included in the table, but may be included in other NHSN analyses.

Admissions: 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 totals. Totals include confirmed and suspected COVID-19 admissions.

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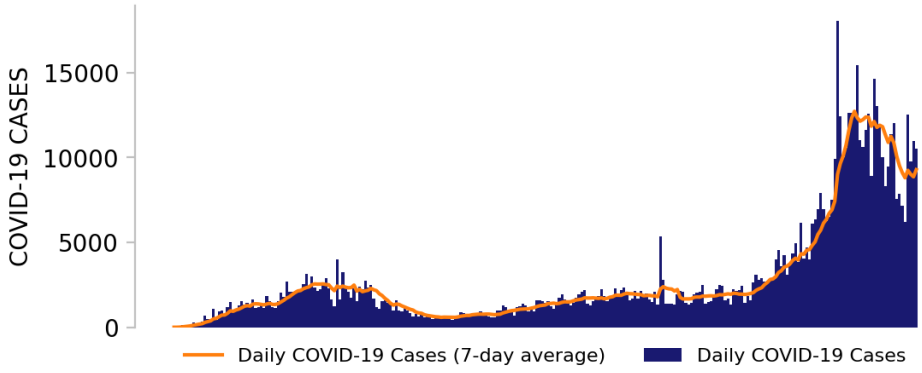
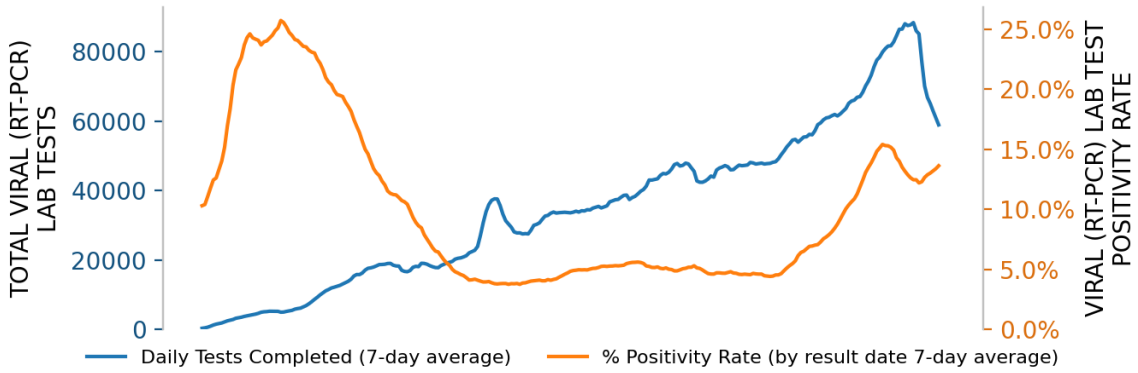
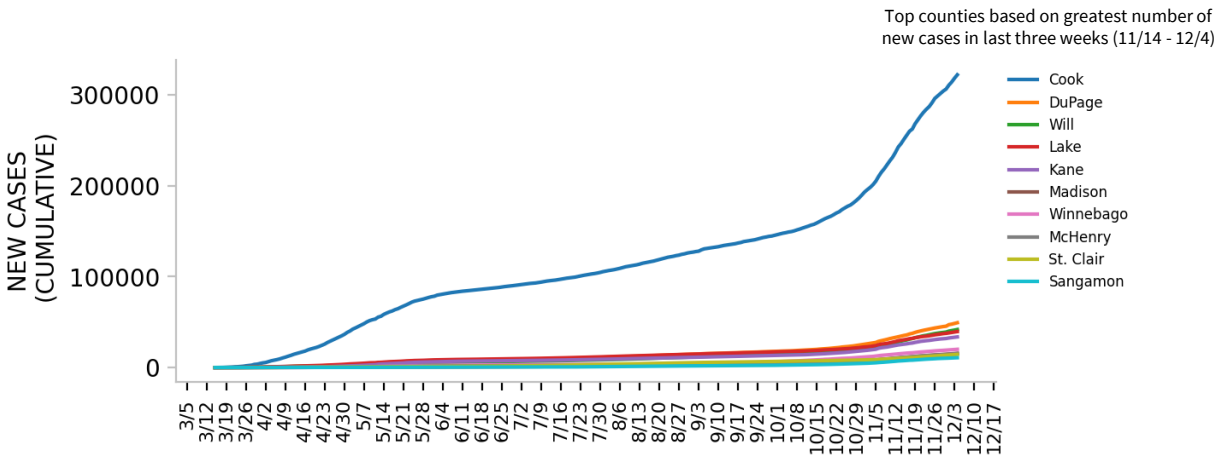
NEW CASES



TESTING



TOP COUNTIES



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 USAFacts; therefore, the values may not match those reported directly by the state. Data is through 12/4/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 12/2/2020.

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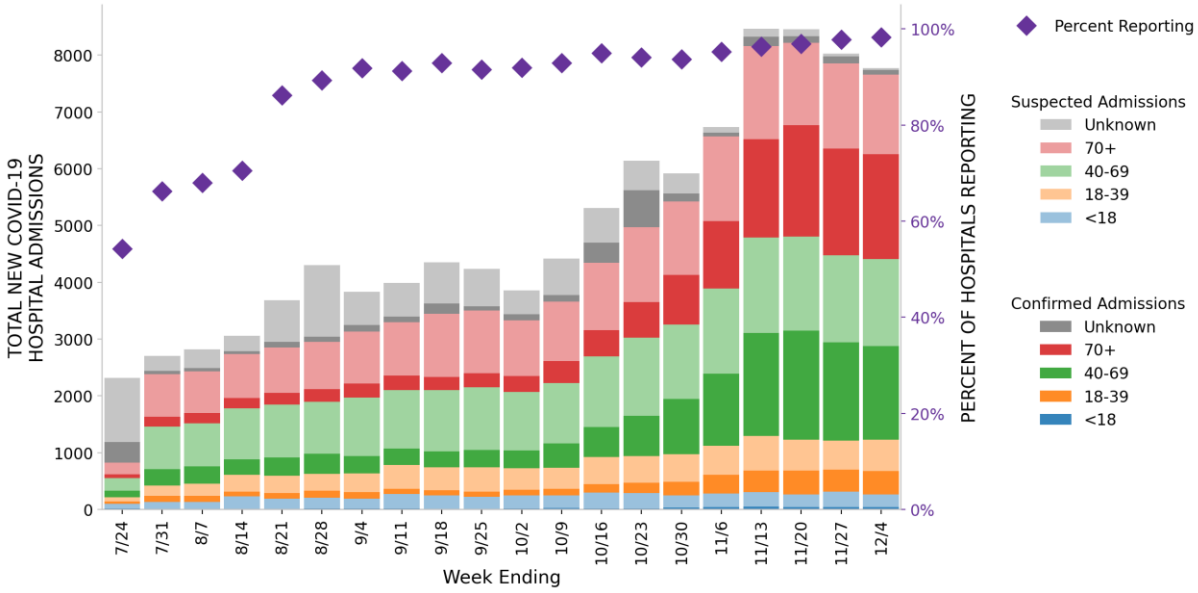
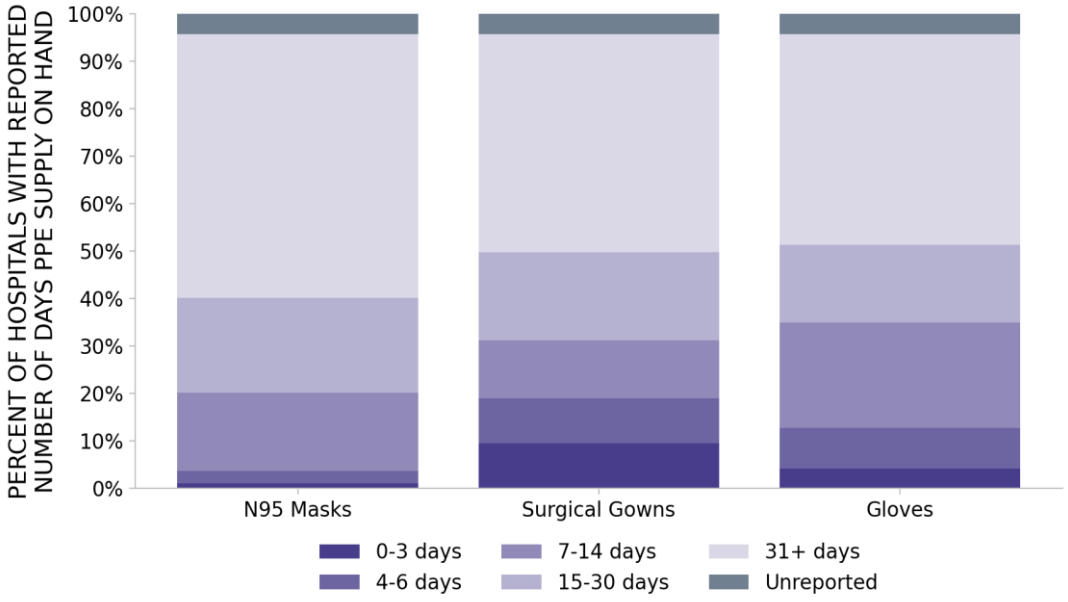
189 hospitals are expected to report in Illinois

HOSPITAL ADMISSIONS



HOSPITAL PPE SUPPLIES



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. Hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. Values presented show the latest reports from hospitals in the week ending 12/2/2020.

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COVID-19 COUNTY AND METRO ALERTS*

Top 12 shown in table (full lists below)

	METRO AREA (CBSA)		COUNTIES	
LOCALITIES IN RED ZONE	30 ▲ (+2)	Chicago-Naperville-Elgin St. Louis Peoria Rockford Davenport-Moline-Rock Island Springfield Kankakee Ottawa Bloomington Carbondale-Marion Decatur Danville	87 ▲ (+8)	Cook DuPage Will Lake Kane Madison Winnebago McHenry St. Clair Sangamon Peoria Kankakee
LOCALITIES IN ORANGE ZONE	0 ▼ (-2)	N/A	5 ▼ (-9)	Cass Montgomery Saline Ford Scott
LOCALITIES IN YELLOW ZONE	0 ▼ (-1)	N/A	8 ▲ (+2)	Crawford Union Greene Wabash White Piatt Schuyler Brown

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

All Red CBSAs: Chicago-Naperville-Elgin, St. Louis, Peoria, Rockford, Davenport-Moline-Rock Island, Springfield, Kankakee, Ottawa, Bloomington, Carbondale-Marion, Decatur, Danville, Sterling, Effingham, Galesburg, Charleston-Mattoon, Rochelle, Centralia, Pontiac, Jacksonville, Lincoln, Dixon, Mount Vernon, Freeport, Taylorville, Macomb, Paducah, Fort Madison-Keokuk, Burlington, Cape Girardeau

All Red Counties: Cook, DuPage, Will, Lake, Kane, Madison, Winnebago, McHenry, St. Clair, Sangamon, Peoria, Kankakee, Tazewell, McLean, Rock Island, LaSalle, Kendall, Macon, Vermilion, DeKalb, Henry, Williamson, Boone, Whiteside, Grundy, Effingham, Clinton, Macoupin, Knox, Ogle, Marion, Livingston, Logan, Fayette, Morgan, Jackson, Monroe, Woodford, Lee, Randolph, Iroquois, Coles, Franklin, Bureau, Jefferson, Stephenson, Fulton, Lawrence, Christian, Jersey, Perry, Shelby, Clay, McDonough, Bond, Richland, Douglas, Warren, Massac, Edgar, Washington, Hancock, Pike, Moultrie, Mason, Jo Daviess, Carroll, Wayne, Clark, Mercer, Johnson, Jasper, Menard, Cumberland, Marshall, De Witt, Hamilton, Stark, Pulaski, Calhoun, Henderson, Edwards, Putnam, Hardin, Alexander, Pope, Gallatin

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

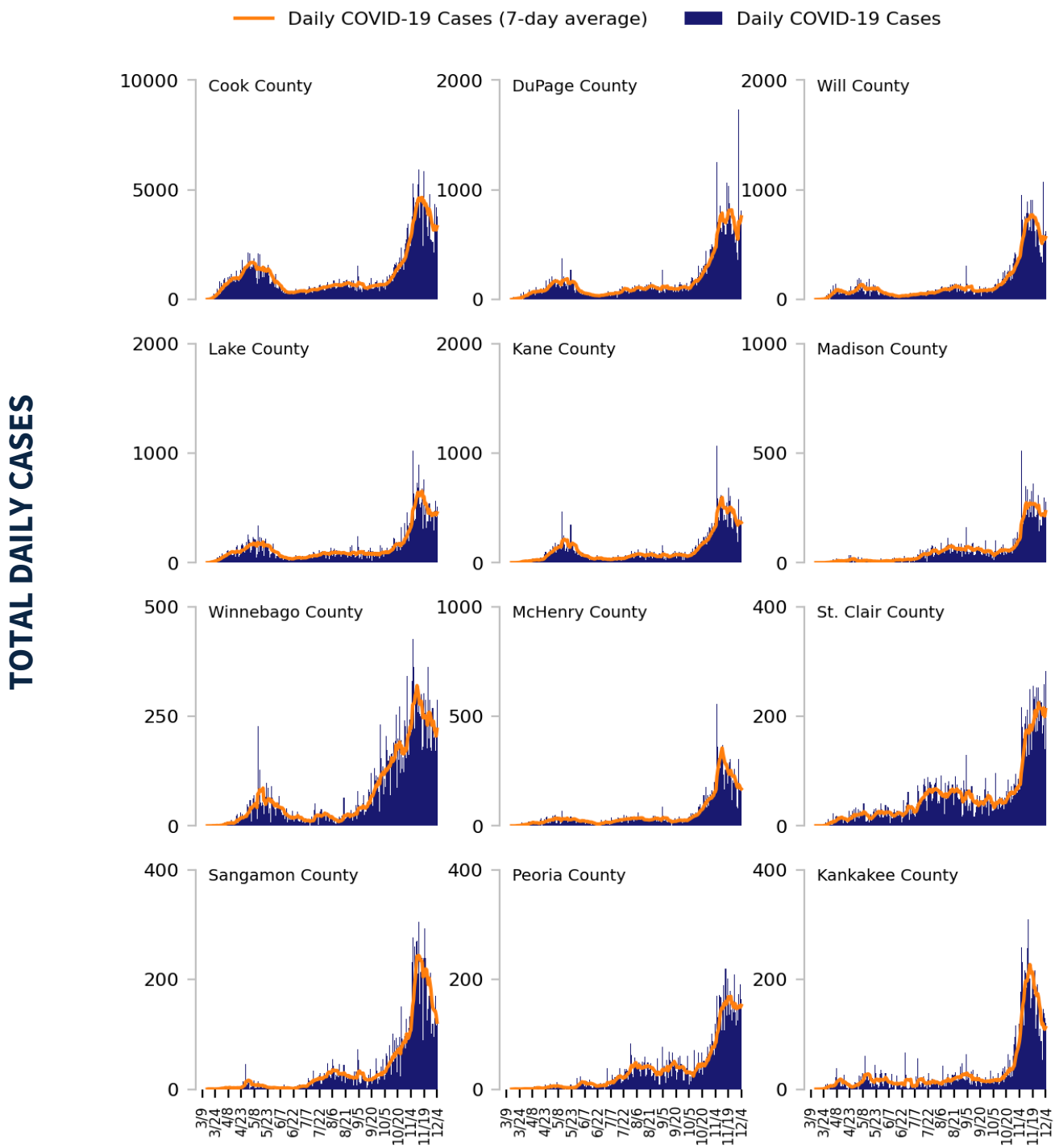
Note: Lists of red, orange, and yellow localities are sorted by the number of new cases in the last 3 weeks, from highest to lowest. Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes.

DATA SOURCES – Additional data details available under METHODS

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 12/4/2020.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 12/2/2020.

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 USAFacts; therefore, the values may not match those reported directly by the state. Data is through 12/4/2020. Last 3 weeks is 11/14 - 12/4.

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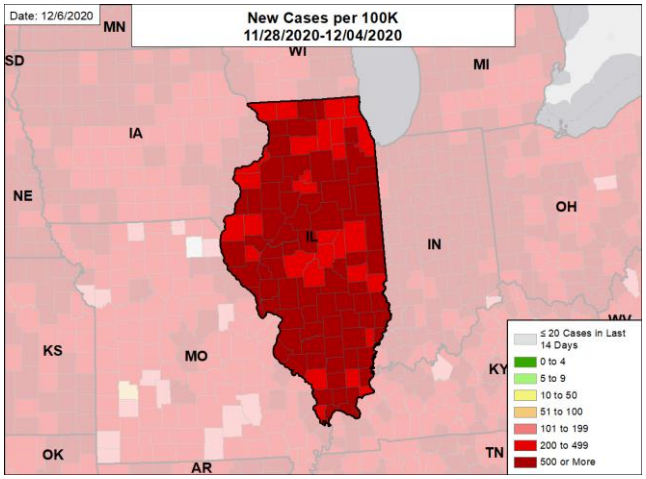
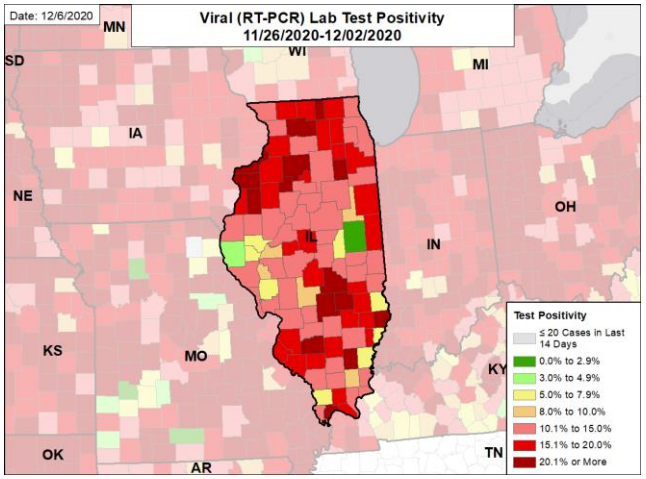
CASE RATES AND VIRAL LAB TEST POSITIVITY

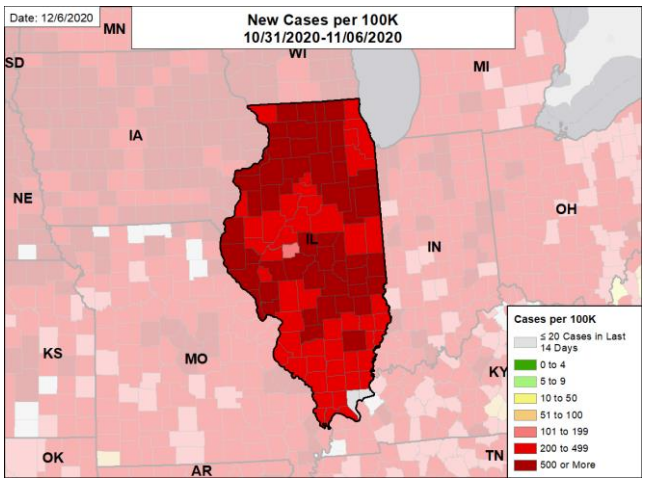
NEW CASES PER 100,000



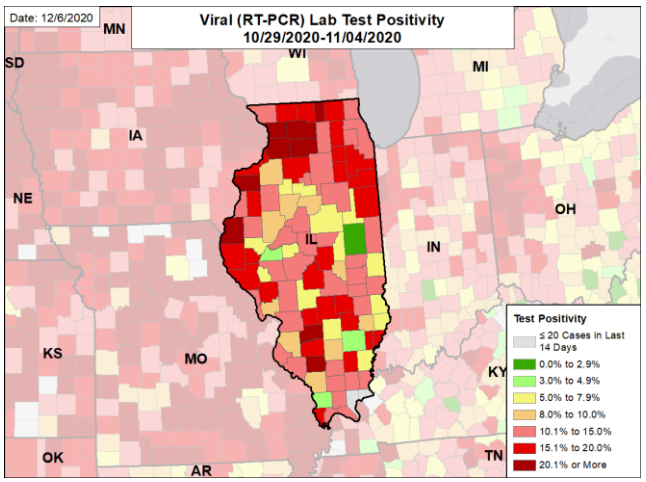
VIRAL (RT-PCR) LABORATORY TEST POSITIVITY



NEW CASES PER 100,000 ONE MONTH BEFORE



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 USAFacts; therefore, the values may not match those reported directly by the state. Data is through 12/4/2020. The week one month before is 10/31 - 11/6.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 12/2/2020. The week one month before is 10/29 - 11/4.

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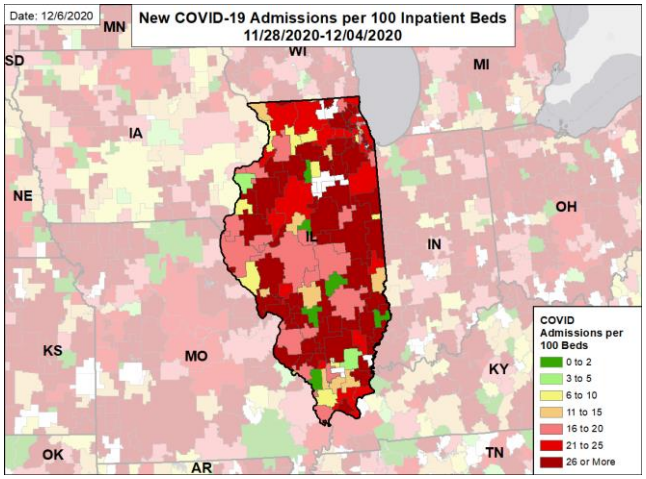
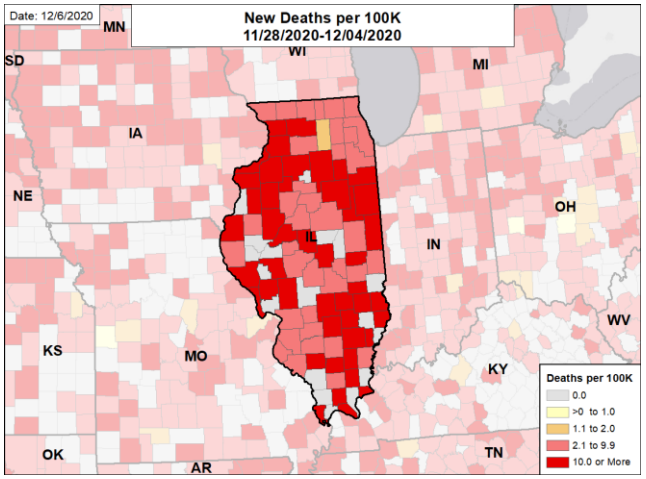
HOSPITAL ADMISSIONS AND DEATH RATES

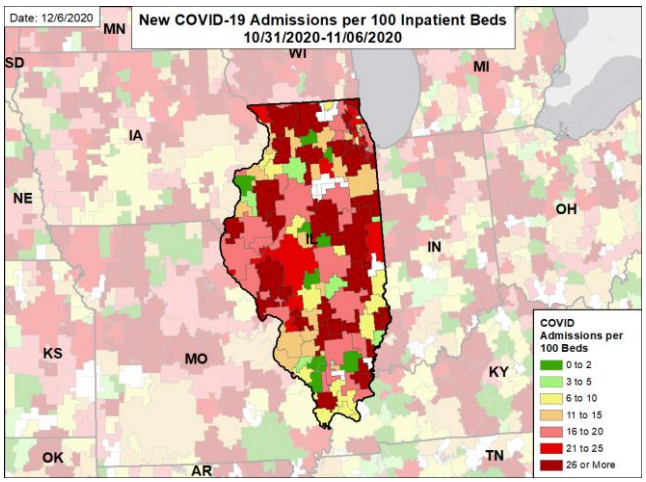
TOTAL NEW COVID-19 ADMISSIONS PER 100 INPATIENT BEDS



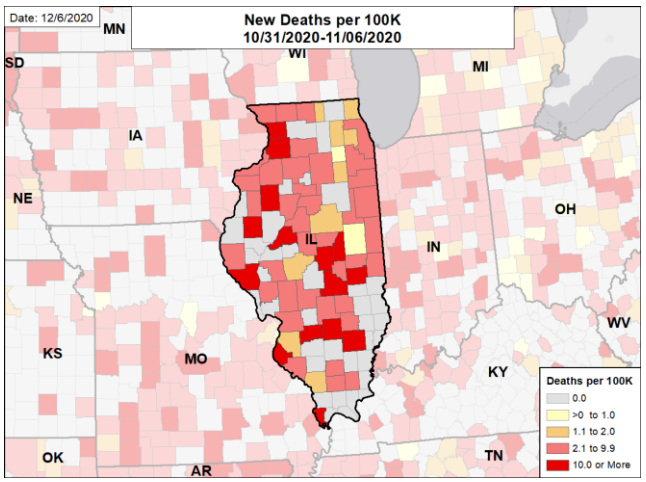
NEW DEATHS PER 100,000



TOTAL NEW COVID-19 ADMISSIONS PER 100 INPATIENT BEDS ONE MONTH BEFORE



NEW DEATHS PER 100,000 ONE MONTH BEFORE



DATA SOURCES – Additional data details available under METHODS

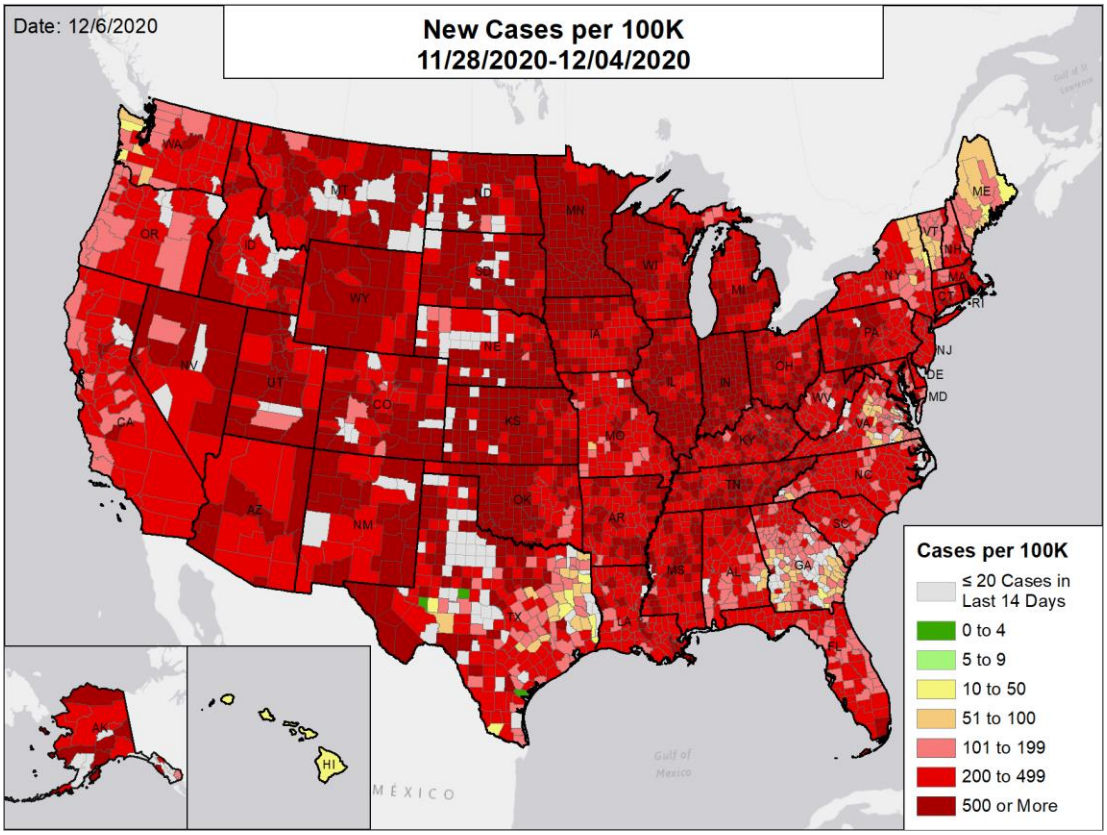
Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes.

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 12/4/2020. The week one month before is 10/31 - 11/6.

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.

National Picture

NEW CASES PER 100,000



NATIONAL RANKING OF NEW CASES PER 100,000

National Rank	State
1	MN
2	RI
3	SD
4	WY
5	IN
6	NE
7	NM
8	MT
9	ND
10	AK
11	UT
12	KS
13	WI
14	ID
15	CO
16	OK
17	NV
18	TN
19	IL
20	IA
21	MI
22	KY
23	OH
24	AZ
25	AR
26	MS
27	DE
28	PA
29	CT
30	MA
31	WV
32	MO
33	LA
34	AL
35	NJ
36	NH
37	TX
38	CA
39	SC
40	NY
41	FL
42	MD
43	NC
44	OR
45	DC
46	WA
47	GA
48	VA
49	VT
50	ME
51	HI

Europe is experiencing a fall surge similar to the USA and is showing early signs of improvement through country-specific mitigation efforts.

- 80% (48/60 countries) require wearing masks in all public settings
  - Most countries have imposed fines for non-compliance
- 93% (56/60) have significant restrictions on gathering size
- 63% (38/60) have some form of nonessential business closures, initially focused on bars and reducing restaurant capacity
- 60% (37/60) have some form of entertainment or public space restriction
- 65% (39/60) have deployed a contact tracing app

DATA SOURCES

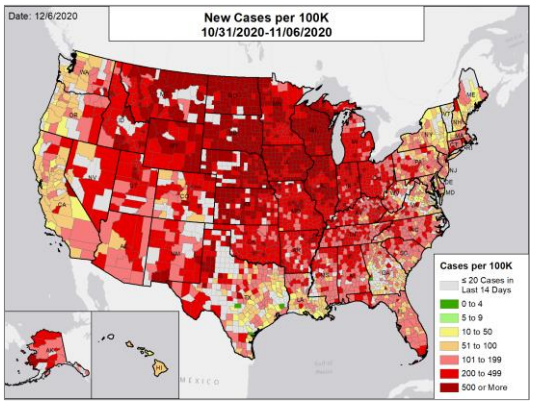
Note: Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes.

Cases: County-level data from USAFacts through 12/4/2020.
European community mitigation information sourced from European CDC — Situation Update Worldwide.

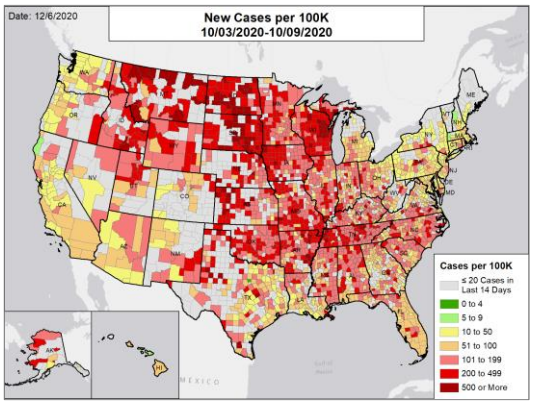
National Picture

NEW CASES PER 100,000 IN THE WEEK:

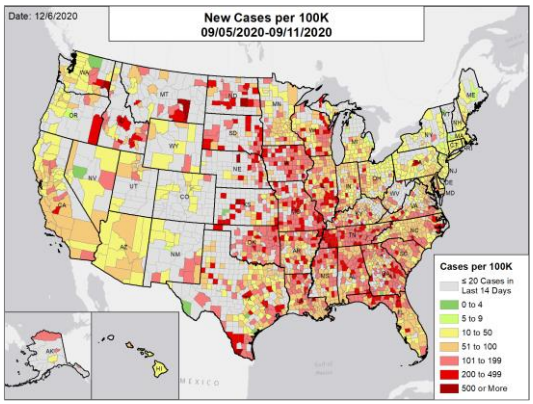
ONE MONTH BEFORE



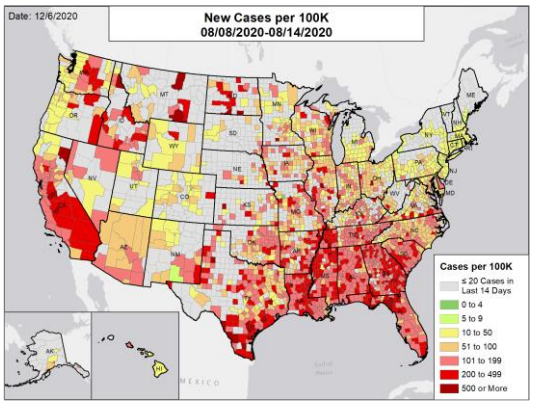
TWO MONTHS BEFORE



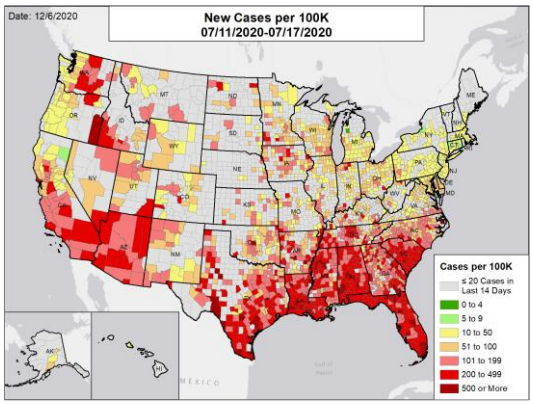
THREE MONTHS BEFORE



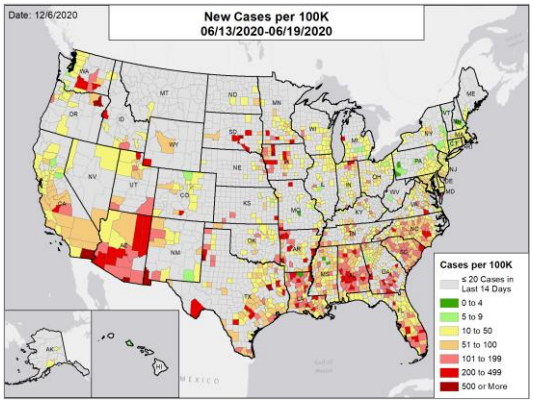
FOUR MONTHS BEFORE



FIVE MONTHS BEFORE



SIX MONTHS BEFORE



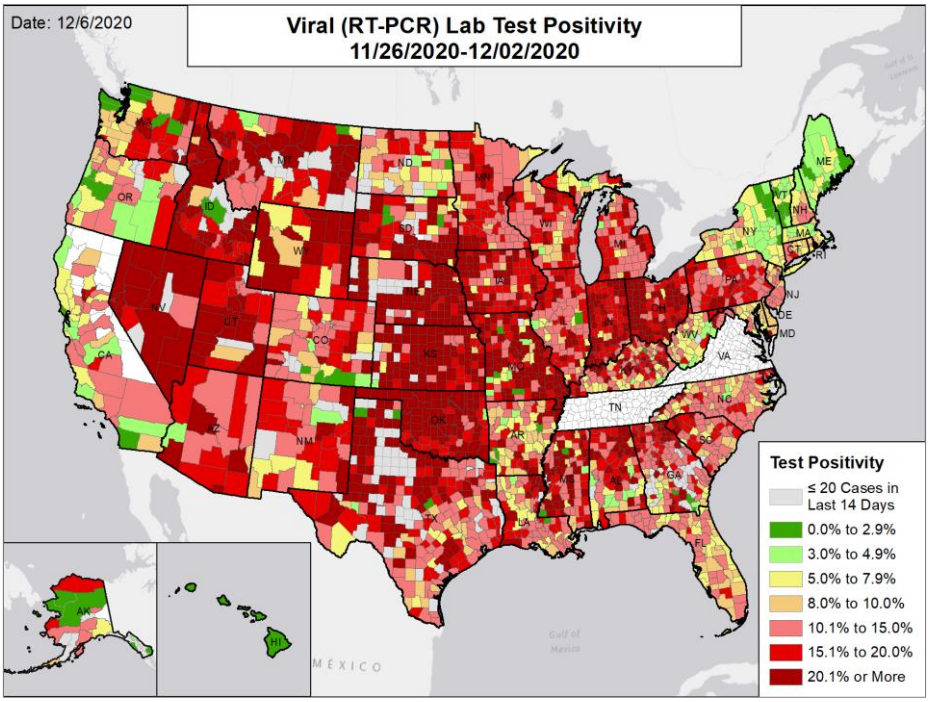
DATA SOURCES

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

Cases: County-level data from USAFacts through 12/4/2020. The week one month before is 10/31 - 11/6; the week two months before is 10/3 - 10/9; the week three months before is 9/5 - 9/11; the week four months before is 8/8 - 8/14; the week five months before is 7/11 - 7/17; the week six months before is 6/13 - 6/19.

National Picture

VIRAL (RT-PCR) LAB TEST POSITIVITY



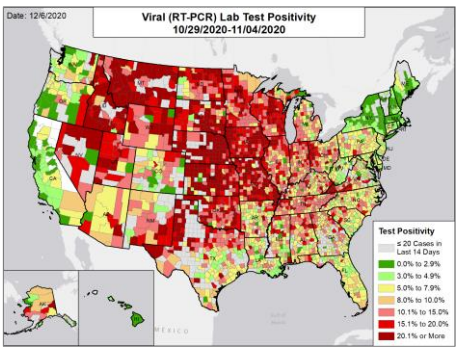
NATIONAL RANKING OF TEST POSITIVITY

National Rank	State
1	ID
2	NV
3	OK
4	NE
5	KS
6	SD
7	MT
8	UT
9	MO
10	IN
11	IA
12	AL
13	MS
14	AZ
15	OH
16	NM
17	KY
18	MI
19	PA
20	WY
21	IL
22	TX
23	MN
24	SC
25	GA
26	WI

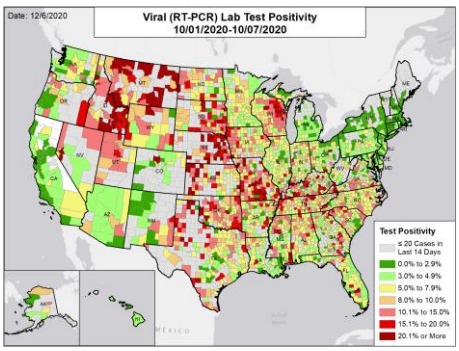
National Rank	State
27	CO
28	NH
29	CT
30	NJ
31	LA
32	AR
33	FL
34	NC
35	OR
36	WA
37	MD
38	ND
39	WV
40	RI
41	AK
42	DE
43	CA
44	NY
45	MA
46	ME
47	DC
48	VT
49	HI
--	TN
--	VA

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

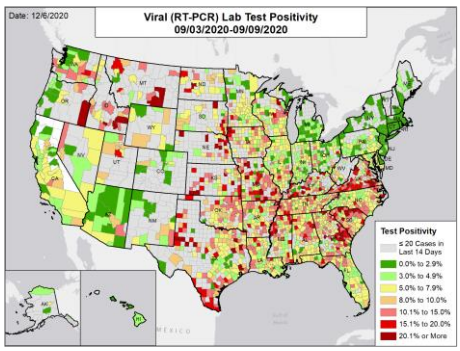
ONE MONTH BEFORE



TWO MONTHS BEFORE



THREE MONTHS BEFORE



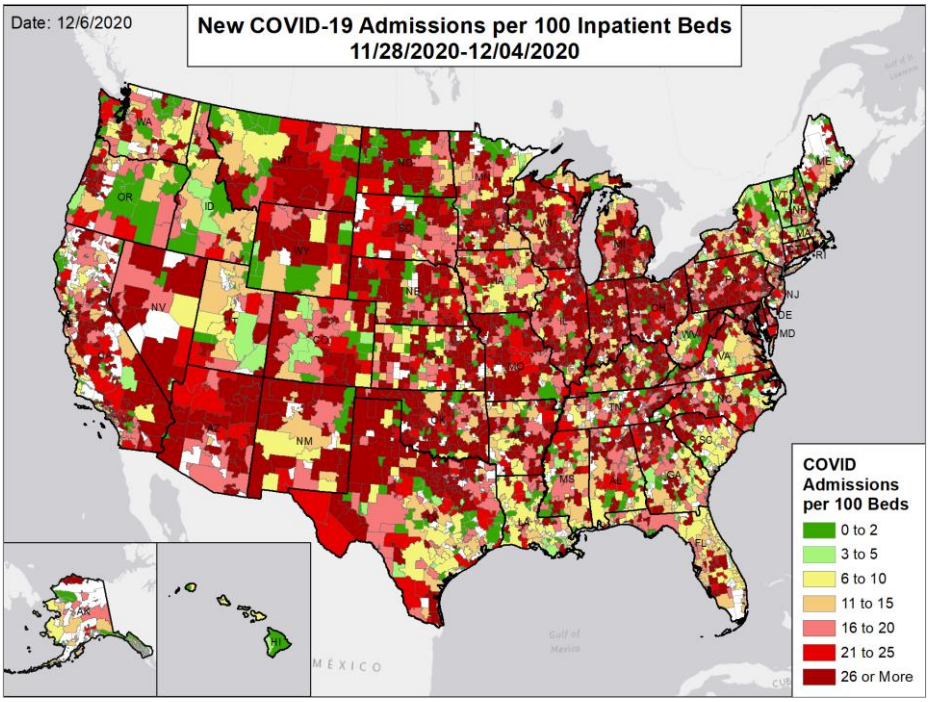
DATA SOURCES

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 12/2/2020. Tthe week one month before is 10/29 - 11/4; the week two months before is 10/1 - 10/7; the week three months before is 9/3 - 9/9.

National Picture

TOTAL NEW COVID-19 ADMISSIONS PER 100 INPATIENT BEDS

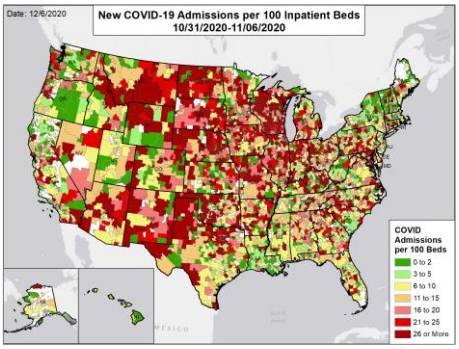


NATIONAL RANKING OF ADMISSIONS PER 100 BEDS

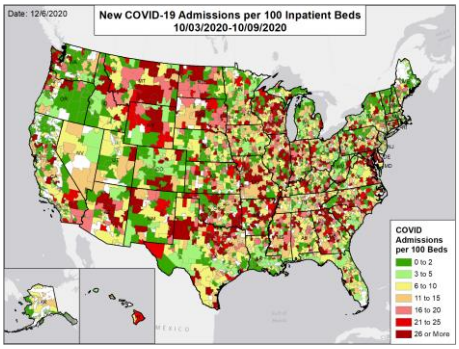
National Rank	State	National Rank	State
1	MD	27	CA
2	AR	28	CT
3	OK	29	TX
4	KY	30	AL
5	WI	31	OR
6	PA	32	TN
7	OH	33	NC
8	NV	34	VA
9	DC	35	WV
10	NM	36	ID
11	IL	37	SC
12	CO	38	MS
13	IN	39	IA
14	MO	40	FL
15	AZ	41	NY
16	WY	42	NH
17	MI	43	RI
18	GA	44	MA
19	KS	45	UT
20	NJ	46	ME
21	DE	47	AK
22	MN	48	WA
23	MT	49	LA
24	ND	50	VT
25	NE	51	HI
26	SD		

TOTAL NEW COVID-19 ADMISSIONS PER 100 INPATIENT BEDS IN THE WEEK:

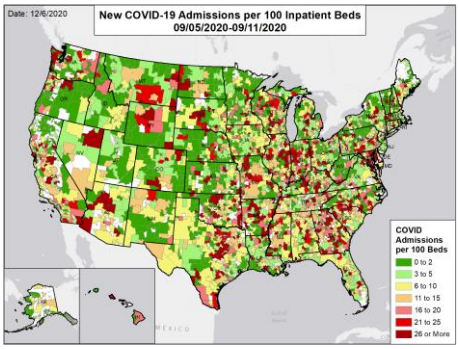
ONE MONTH BEFORE



TWO MONTHS BEFORE



THREE MONTHS BEFORE



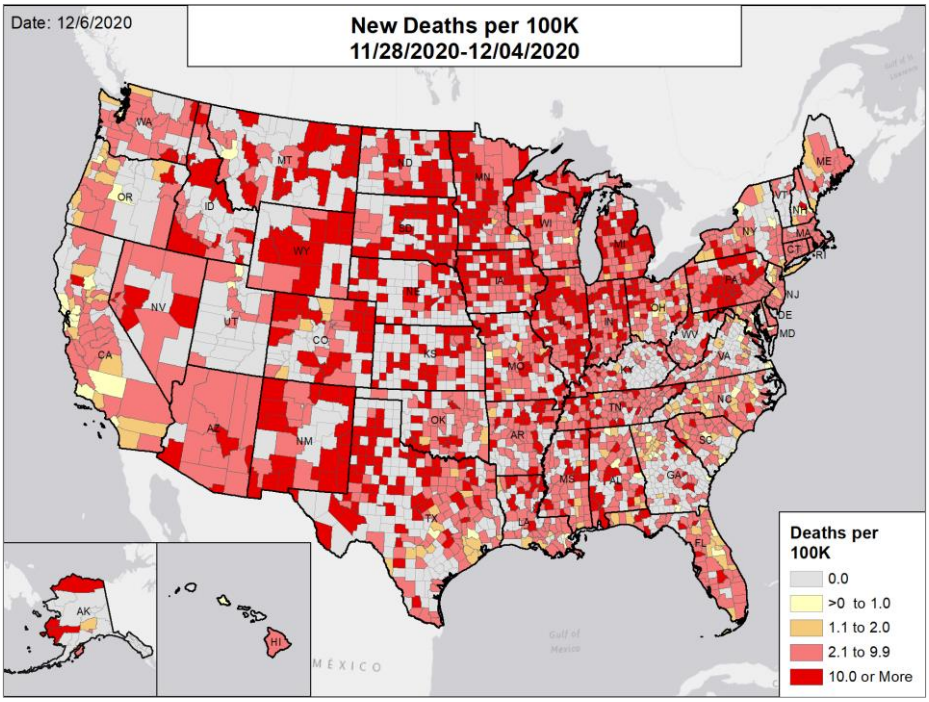
DATA SOURCES

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

Admissions: Unified hospitalization dataset in HHS Protect through 12/4/2020. 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 10/31 - 11/6; the week two months before is 10/3 - 10/9; the week three months before is 9/5 - 9/11.

National Picture

NEW DEATHS PER 100,000



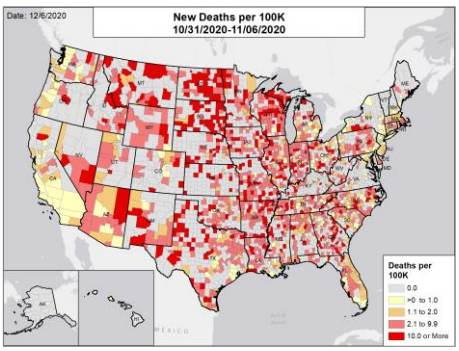
NATIONAL RANKING OF NEW DEATHS PER 100,000

National Rank	State
1	SD
2	ND
3	NE
4	NM
5	KS
6	IA
7	IN
8	MI
9	IL
10	WY
11	PA
12	ID
13	MT
14	MO
15	MN
16	RI
17	WI
18	CO
19	NV
20	AR
21	AL
22	CT
23	TN
24	MS
25	WV
26	OH

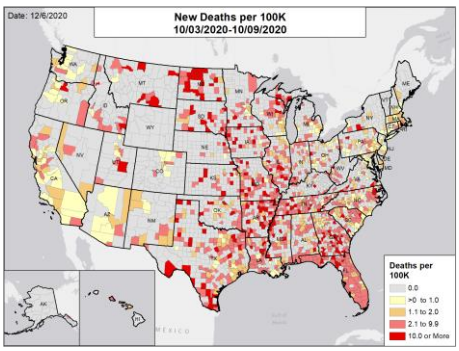
National Rank	State
27	AZ
28	MA
29	OK
30	TX
31	MD
32	KY
33	NJ
34	LA
35	FL
36	WA
37	OR
38	AK
39	NH
40	ME
41	SC
42	NC
43	NY
44	UT
45	DC
46	DE
47	CA
48	GA
49	VT
50	VA
51	HI

NEW DEATHS PER 100,000 IN THE WEEK:

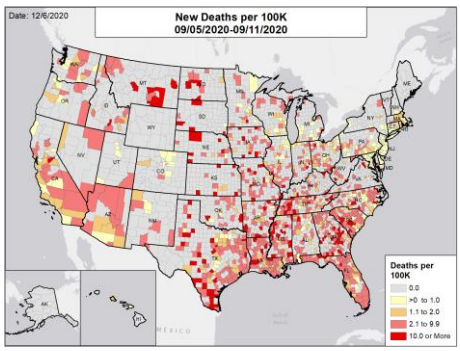
ONE MONTH BEFORE



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.

Deaths: County-level data from USAFacts through 12/4/2020. The week one month before is 10/31 - 11/6; the week two months before is 10/3 - 10/9; the week three months before is 9/5 - 9/11.

METHODS

STATE REPORT | 12.06.2020

Metric	Dark Green	Light Green	Yellow	Orange	Light Red	Red	Dark Red
New cases per 100,000 population per week	≤4	5 – 9	10 – 50	51 – 100	101 – 199	200 – 499	≥500
Percent change in new cases per 100,000 population	≤-26%	-25% – -11%	-10% – 0%	1% – 10%	11% – 99%	100% – 999%	≥1000%
Diagnostic test result positivity rate	≤2.9%	3.0% – 4.9%	5.0% – 7.9%	8.0% – 10.0%	10.1% – 15.0%	15.1% – 20.0%	≥20.1%
Change in test positivity	≤-2.1%	-2.0% – -0.6%	-0.5% – 0.0%	0.1% – 0.5%	0.6% – 2.0%		≥2.1%
Total diagnostic tests resulted per 100,000 population per week	≥2001	1001 – 2000	750 – 1000	500 – 749	250 – 499		≤249
Percent change in tests per 100,000 population	≥26%	11% – 25%	1% – 10%	-10% – 0%	-25% – -11%		≤-26%
COVID-19 deaths per 100,000 population per week	0.0		0.1 – 1.0	1.1 – 2.0	2.1 – 3.0		≥3.1
Percent change in deaths per 100,000 population	≤-26%	-25% – -11%	-10% – 0%	1% – 10%	11% – 25%		≥26%
Skilled Nursing Facilities with at least one resident COVID-19 case, death	0%		1% – 5%		≥6%		
Change in SNFs with at least one resident COVID-19 case, death	≤-2%		-1% – 1%		≥2%		
Total new COVID-19 hospital admissions per 100 beds	≤2	3 – 5	6 – 10	11 – 15	16 – 20	21 – 25	≥26
Change in total new COVID-19 hospital admissions per 100 beds	≤-26%	-25% – -11%	-10% – 0%	1% – 10%	11% – 25%		≥26%

- 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 USAFacts as of 20:30 EST on 12/06/2020. State values are calculated by aggregating county-level data from USAFacts. 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 resulted. Last week data are from 11/26 to 12/2; previous week data are from 11/19 to 11/25; the week one month before data are from 10/29 to 11/4. HHS Protect data is recent as of 12:29 EST on 12/06/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EST on 12/05/2020.
- **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 17:19 EST on 12/06/2020.
- **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 16:52 EST on 12/5/2020.
- **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 11/23-11/29, previous week is 11/16-11/22. Facilities that are undergoing reporting quality review are not included in the table, but may be included in other NHSN analyses.
- **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 10–50 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."