



TENNESSEE

SUMMARY

- Tennessee is in the red zone for cases, indicating 101 or more new cases per 100,000 population, with the 3rd highest rate in the country. Tennessee is in the red zone for test positivity, indicating a rate at or above 10.1%, with the 7th highest rate in the country.
- Tennessee has seen an increase in new cases and stability in test positivity.
- The following three counties had the highest number of new cases over the last 3 weeks: 1. Davidson County, 2. Shelby County, and 3. Knox County. These counties represent 24.2% of new cases in Tennessee.
- 100% of all counties in Tennessee have moderate or high levels of community transmission (yellow, orange, or red zones), with 99% having high levels of community transmission (red zone).
- During the week of Dec 28 - Jan 3, 45% of nursing homes had at least one new resident COVID-19 case, 66% had at least one new staff COVID-19 case, and 24% had at least one new resident COVID-19 death.
- Tennessee had 788 new cases per 100,000 population, compared to a national average of 532 per 100,000.
- Current staff deployed from the federal government as assets to support the state response are: 2 to support operations activities from FEMA; 12 to support medical activities from ASPR; and 7 to support operations activities from ASPR.
- Between Jan 2 - Jan 8, on average, 367 patients with confirmed COVID-19 and 123 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Tennessee. This is an increase of 5% in total new COVID-19 hospital admissions.
- As of Jan 8, 458,100 vaccine doses have been distributed to Tennessee. 196,642 individuals have received the first dose.

RECOMMENDATIONS

- Data reporting has stabilized and reveals a clear continuation of the pre-holiday high rate of spread as measured by rising test positivity, increased cases, increased hospitalization rates, and rising fatalities. The slope of the rate of rise across the country remains the same as the Northern Plains slope in the fall and has continued into November, December, and now January with more states entering the rapid acceleration phase of viral spread, increasing hospitalizations and deaths.
- Nearly all metro areas over 500,000 persons are in full resurgence, and aggressive action must meet this increasing community spread in our large metros. Metros that continued to improve post-Thanksgiving are now destabilizing.
- The United States remains at a high plateau of 150-160,000 confirmed and suspected new COVID-19 admissions per week and over 130,000 total COVID-19 inpatients. Significant, continued deterioration from California across the Sunbelt and up into the Southeast, Mid-Atlantic, and Northeast suggests increasing and aggressive community spread, which requires aggressive and increased mitigation, testing, use of monoclonal antibodies, and vaccination.
- This fall/winter surge has been at nearly twice the rate of rise of cases as the spring and summer surges. This acceleration and the epidemiologic data suggest the possibility that some strains of the US COVID-19 virus may have evolved into a more transmissible virus. Given that possibility, and the presence of the UK variant that is already spreading in our communities and may be 50% more transmissible, we must be ready for and mitigate a much more rapid transmission.
- Aggressive mitigation must be used to match a more aggressive virus, moving beyond what worked in the summer to more layered mitigation; without uniform implementation of effective face masking (two or three ply and well-fitting) and strict physical distancing, epidemics could quickly worsen as more transmissible variants spread and become predominant. Enhanced genotypic surveillance will help identify when and where more transmissible viruses emerge, which could help galvanize communities to action.
- Messaging must be focused on proactive testing of those under 40 to prevent asymptomatic silent spread to their household members and on a call to action for immediate testing and rapid infusion of monoclonal antibodies for those at risk for severe disease. Every hospital should have outpatient infusion sites immediately available to save lives.
- Strongly recommend the creation of young adult testing sites with BinaxNOW to encourage rapid testing and, for those testing positive, immediate isolation and aggressive protection of vulnerable household members.
- Do not delay the rapid immunization of those over 65 and vulnerable to severe disease; recommend creation of high throughput vaccination sites with use of EMT personnel and nursing students to monitor for potential anaphylaxis. No vaccines should be in freezers but should instead be put in arms now; active and aggressive immunization in the face of this surge would save lives.
- Careful planning, efficient implementation, and transparent messaging on the state's vaccination campaign are critical to maintaining public confidence and maximizing vaccine acceptance. Multiple states have launched vaccine-specific dashboards with regular updating of the number of individuals vaccinated to date, as well as vaccine-related information and messaging; these are a best practice. Given persistent vaccine hesitancy, continued active encouragement by the Governor, health officials, and community influencers are needed.
- The COVID-19 pandemic spread is unyielding in Tennessee, impacting hospitals and staff. Effective mitigation is needed statewide. Tennesseans must know that even though vaccines are coming, they will not immediately stop this current wave, which started weeks ago and continues to surge. Have community leaders talk to their peers about vigilance and vaccination. Effective mitigation efforts include statewide mask requirements, limited indoor dining, and bar closures.
- Early and limited data from returning university students and staff indicate COVID presence at universities; mandatory, weekly testing will identify asymptomatic cases and can prevent transmission into the community.
- In K-12 schools, establish public health protocols to conduct active testing for teachers and students in districts with high positivity and cases. In accordance with CDC guidelines, masks should be worn by students and teachers.
- Nearly 70% of LTCF sites have COVID-positive staff and nearly 50% have COVID-positive residents, indicating the depth of viral spread across Tennessee. Continue weekly testing of all staff until residents and staff are fully vaccinated.
- Specific, detailed guidance on community mitigation measures can be found on the [CDC website](#).





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	STATE	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION	UNITED STATES
NEW COVID-19 CASES (RATE PER 100,000)	53,804 (788)	+33%	401,743 (600)	1,744,828 (532)
VIRAL (RT-PCR) LAB TEST POSITIVITY RATE	21.0%	+0.2%*	16.3%	14.3%
TOTAL VIRAL (RT-PCR) LAB TESTS (TESTS PER 100,000)	111,440** (1,632**)	-28%**	1,521,048** (2,273**)	9,104,878** (2,774**)
COVID-19 DEATHS (RATE PER 100,000)	711 (10.4)	+49%	3,680 (5.5)	21,090 (6.4)
SNFs WITH ≥1 NEW RESIDENT COVID-19 CASE	45%	N/A*†	35%	29%
SNFs WITH ≥1 NEW STAFF COVID-19 CASE	66%	N/A*†	59%	49%
SNFs WITH ≥1 NEW RESIDENT COVID-19 DEATH	24%	N/A*†	16%	16%
TOTAL NEW COVID-19 HOSPITAL ADMISSIONS (RATE PER 100 BEDS)	3,431 (21)	+5% (+5%)	38,210 (25)	165,234 (23)
NUMBER OF HOSPITALS WITH SUPPLY SHORTAGES (PERCENT)	29 (28%)	-2% (-6%*)	160 (17%)	1,086 (21%)
NUMBER OF HOSPITALS WITH STAFF SHORTAGES (PERCENT)	48 (47%)	+1% (+2%*)	201 (22%)	1,177 (23%)
COVID-19 VACCINE SUMMARY	DOSES DISTRIBUTED		1ST DOSES ADMINISTERED	
	TOTAL	RATE PER 100,000	TOTAL	PERCENT OF ADULTS
	458,100	6,707	196,642	3.7%

* 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. 90% 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 dataset compiled from state and local health departments; therefore, the values may not match those reported directly by the state. Data is through 1/8/2021; previous week is 12/26 - 1/1.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 1/6/2021. Previous week is 12/24 - 12/30.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data is through 1/3/2020, previous week is 12/21-12/27.

Admissions: Unified hospitalization dataset in HHS Protect. Totals include confirmed and suspected COVID-19 admissions.

Shortages: Unified hospital dataset in HHS Protect. Values presented show the latest reports from hospitals in the week ending 1/8/2021.

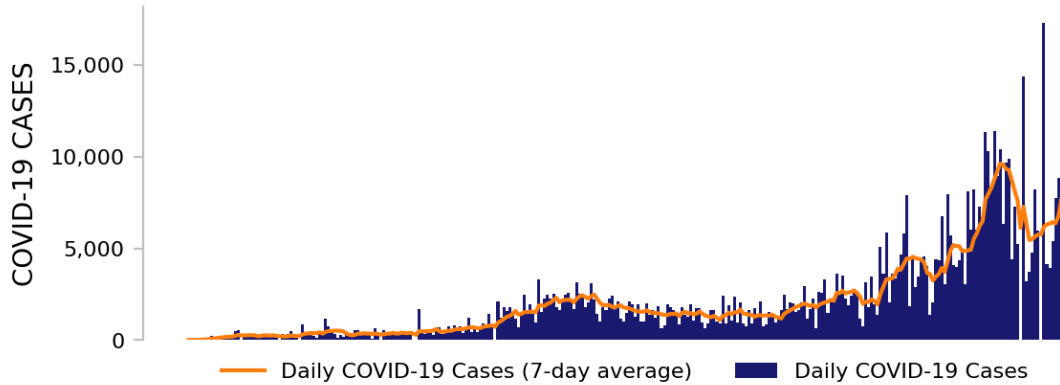
Vaccinations: [CDC COVID Data Tracker](#). Data includes both the Moderna and Pfizer BioNTech COVID-19 vaccines and reflects current data available as of 16:56 EST on 01/10/2021. Data last updated 09:00 EST on 01/08/2021. Adults is defined as the population 18 years old and older.



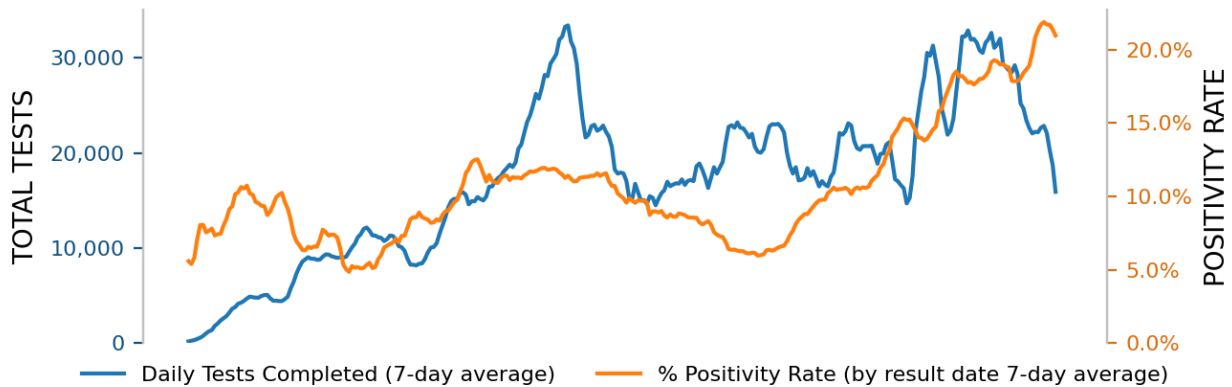
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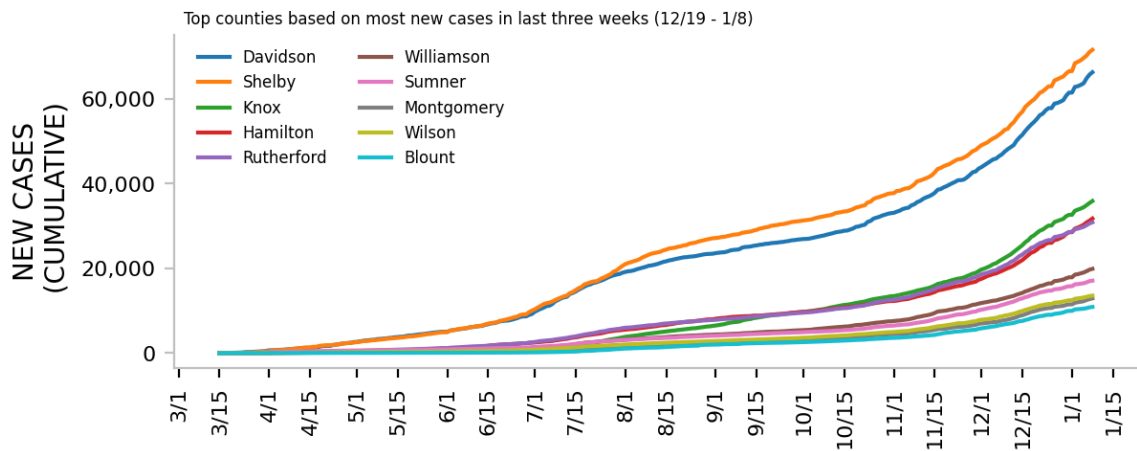
NEW CASES



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 a CDC-managed dataset compiled from state and local health departments; therefore, the values may not match those reported directly by the state. Data is through 1/8/2021.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 1/6/2021.

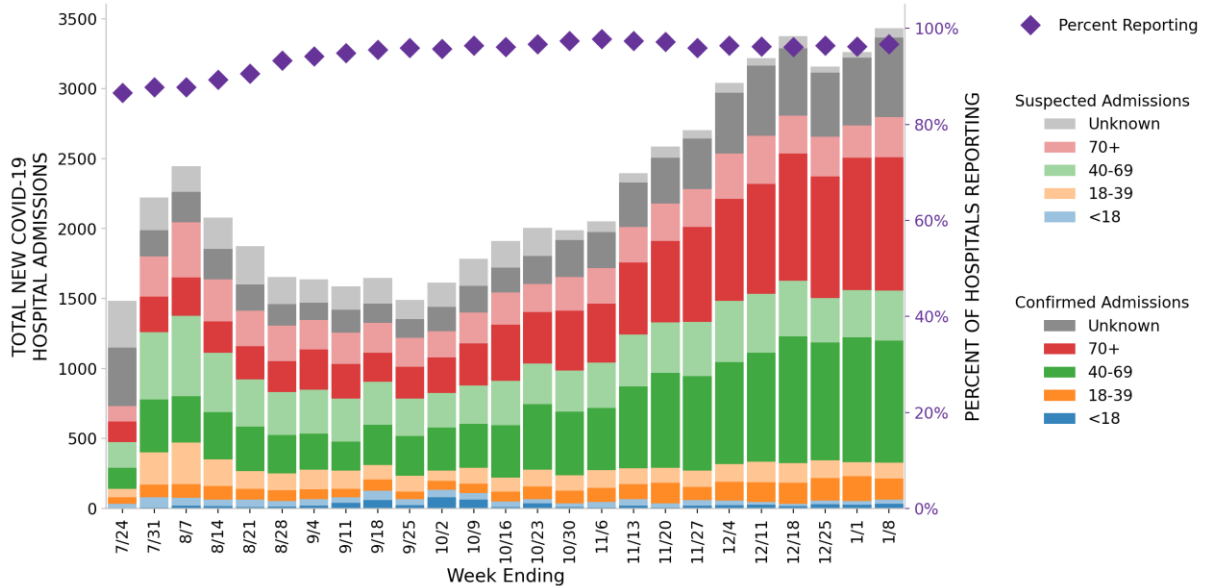


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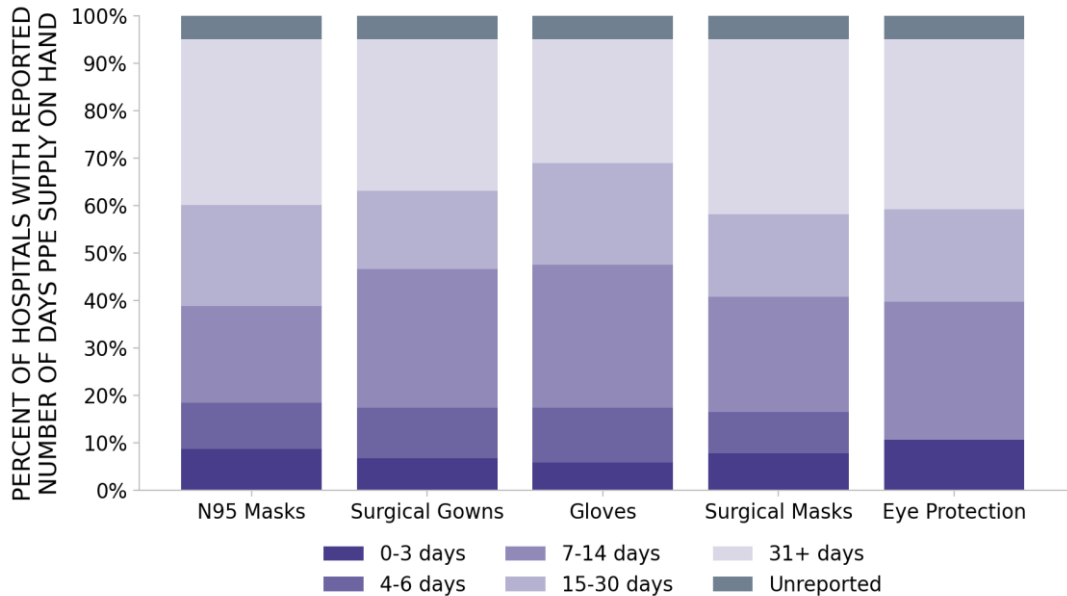
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103 hospitals are expected to report in Tennessee

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. Values presented show the latest reports from hospitals in the week ending 1/6/2021.



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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	27 ■ (+0)	Nashville-Davidson--Murfreesboro--Franklin Knoxville Memphis Chattanooga Johnson City Kingsport-Bristol Clarksville Jackson Morristown Cleveland Cookeville Sevierville	94 ■ (+0)	Davidson Shelby Knox Hamilton Rutherford Williamson Sumner Montgomery Wilson Blount Sullivan Washington
LOCALITIES IN ORANGE ZONE	0 ■ (+0)	N/A	1 ▲ (+1)	Houston
LOCALITIES IN YELLOW ZONE	0 ■ (+0)	N/A	0 ■ (+0)	N/A
Change from previous week's alerts:		▲ Increase	■ Stable	▼ Decrease

All Red CBSAs: Nashville-Davidson--Murfreesboro--Franklin, Knoxville, Memphis, Chattanooga, Johnson City, Kingsport-Bristol, Clarksville, Jackson, Morristown, Cleveland, Cookeville, Sevierville, Tullahoma-Manchester, Greeneville, Crossville, McMinnville, Athens, Lawrenceburg, Shelbyville, Dayton, Newport, Lewisburg, Dyersburg, Martin, Union City, Paris, Brownsville

All Red Counties: Davidson, Shelby, Knox, Hamilton, Rutherford, Williamson, Sumner, Montgomery, Wilson, Blount, Sullivan, Washington, Sevier, Bradley, Maury, Putnam, Robertson, Madison, Anderson, Greene, Hamblen, Cumberland, Roane, Loudon, Tipton, Jefferson, Coffee, Hawkins, Carter, Dickson, Monroe, Warren, Gibson, Lawrence, McMinn, Bedford, Rhea, Giles, Cocke, Franklin, Lincoln, Campbell, Fayette, Cheatham, Marshall, Henderson, Dyer, Weakley, Obion, Carroll, Hardin, White, Claiborne, Overton, DeKalb, McNairy, Morgan, Scott, Hickman, Marion, Grainger, Macon, Fentress, Henry, Chester, Smith, Hardeman, Lauderdale, Unicoi, Sequatchie, Polk, Wayne, Crockett, Haywood, Grundy, Cannon, Union, Decatur, Meigs, Bledsoe, Humphreys, Johnson, Stewart, Benton, Trousdale, Moore, Lewis, Perry, Lake, Pickett, Jackson, Clay, Van Buren, Hancock

* 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 dataset compiled from state and local health departments; therefore, the values may not match those reported directly by the state. Data is through 1/8/2021.

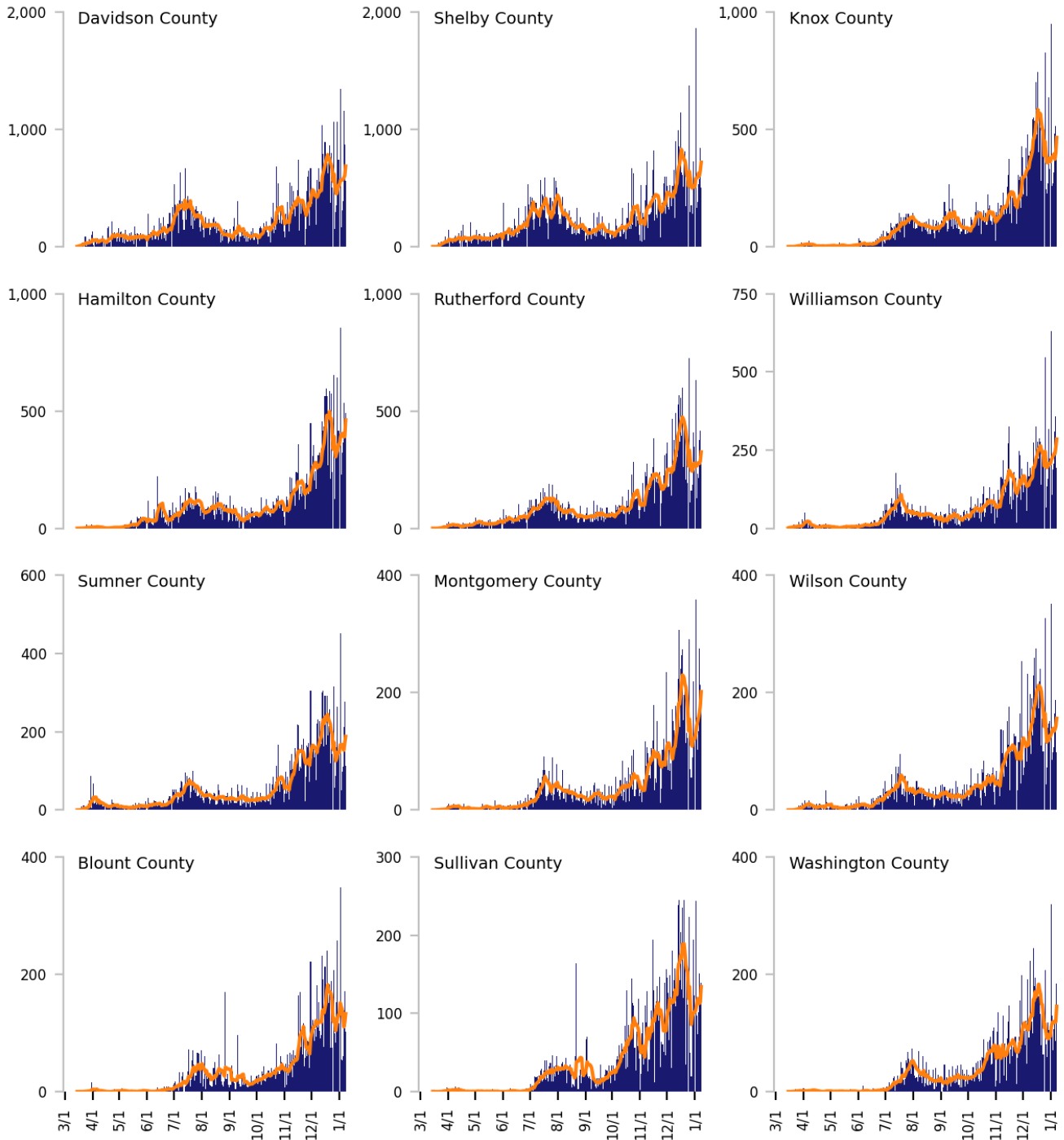
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 1/6/2021.



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

— Daily COVID-19 Cases (7-day average) ■ Daily COVID-19 Cases

TOTAL DAILY CASES



DATA SOURCES – Additional data details available under METHODS

Cases: State values are calculated by aggregating county-level data from a CDC-managed dataset compiled from state and local health departments; therefore, the values may not match those reported directly by the state. Data is through 1/8/2021. Last 3 weeks is 12/19 - 1/8.

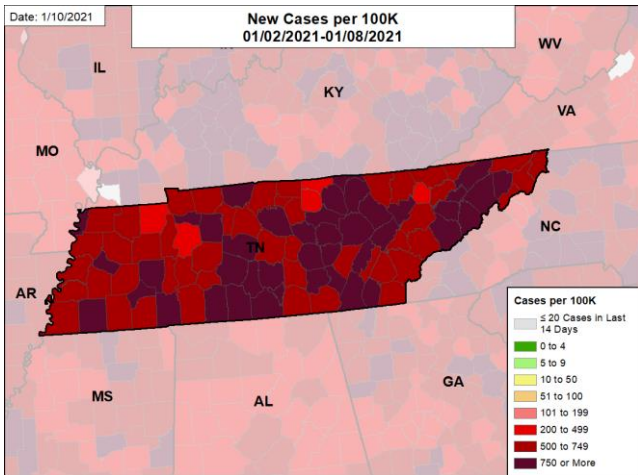


TENNESSEE

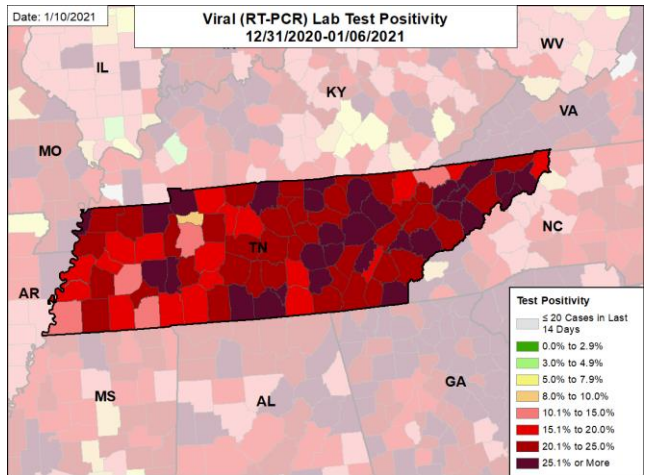
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CASE RATES AND VIRAL LAB TEST POSITIVITY

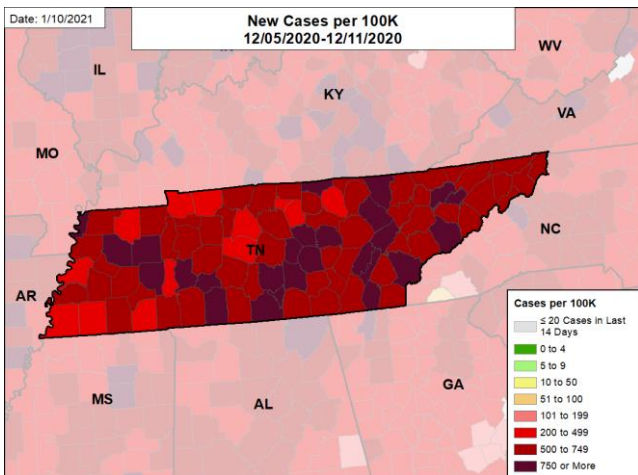
NEW CASES PER 100,000



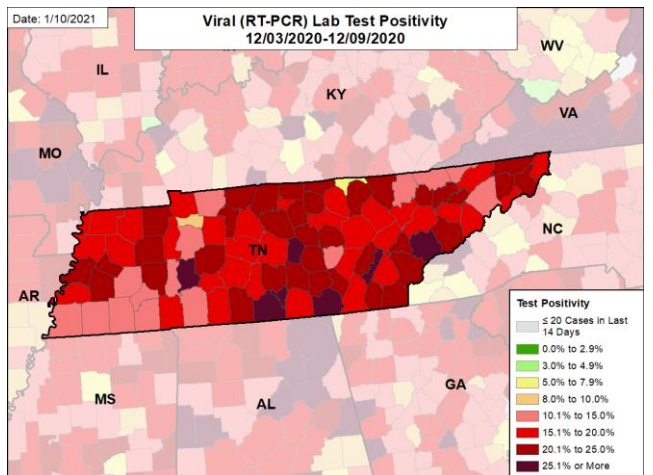
VIRAL (RT-PCR) LABORATORY TEST POSITIVITY



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

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Cases: State values are calculated by aggregating county-level data from a CDC-managed dataset compiled from state and local health departments; therefore, the values may not match those reported directly by the state. Data is through 1/8/2021. The week one month before is 12/5 - 12/11.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 1/6/2021. The week one month before is 12/3 - 12/9.

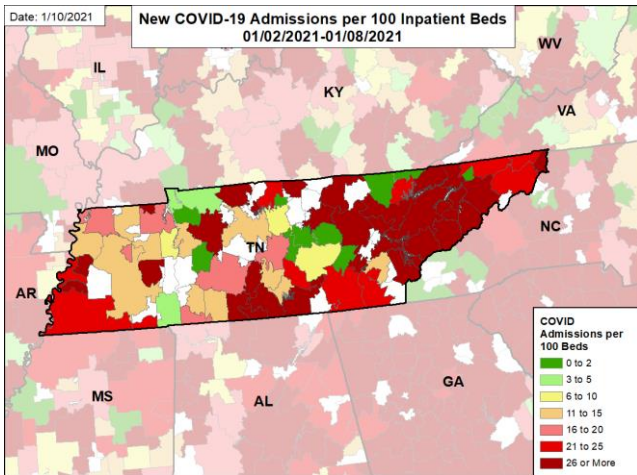


TENNESSEE

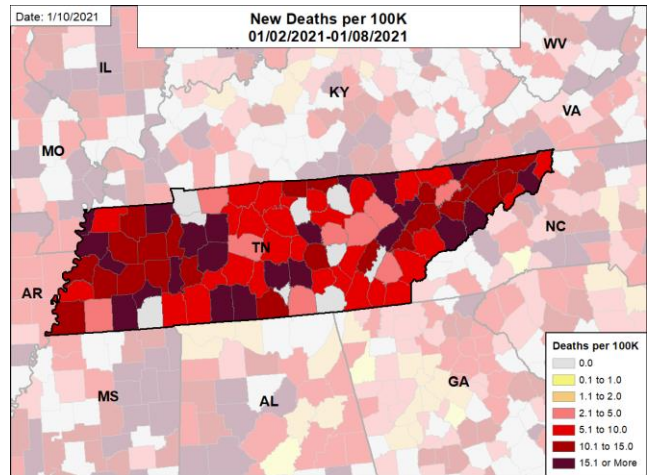
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HOSPITAL ADMISSIONS AND DEATH RATES

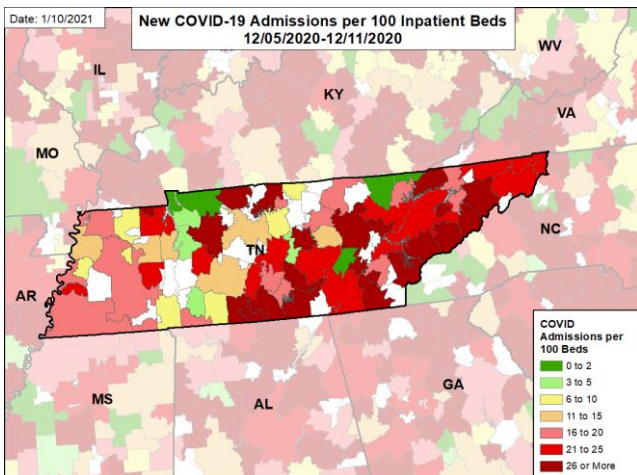
TOTAL NEW COVID-19 ADMISSIONS PER 100 INPATIENT BEDS



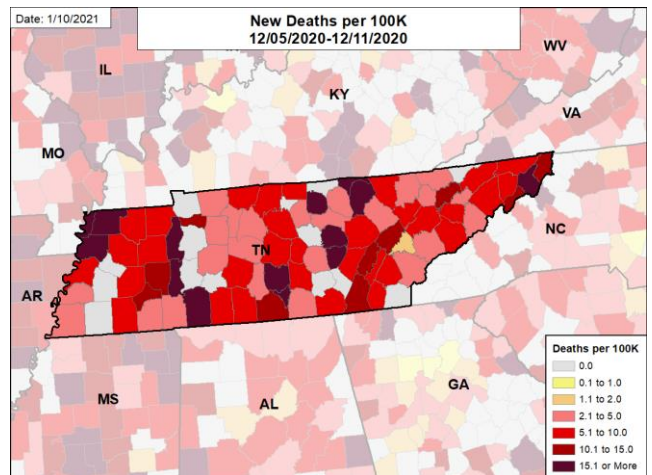
NEW DEATHS PER 100,000



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.

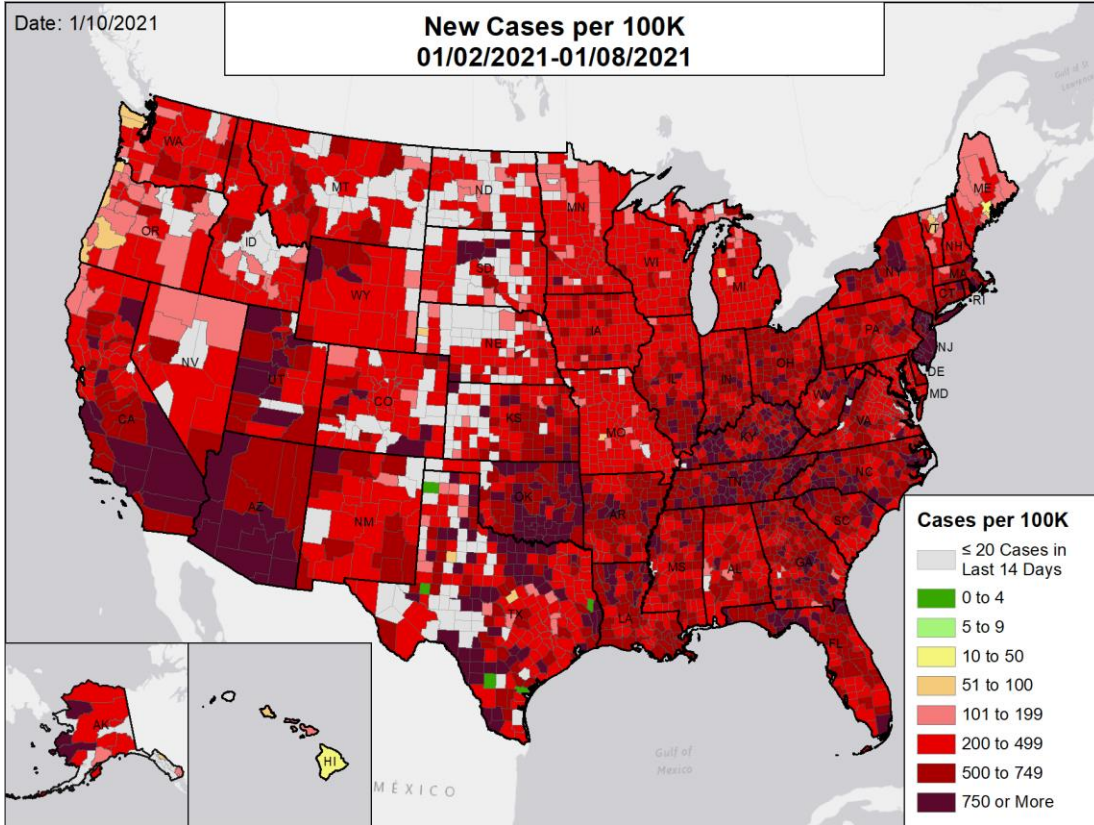
Deaths: State values are calculated by aggregating county-level data from a CDC-managed dataset compiled from state and local health departments; therefore, the values may not match those reported directly by the state. Data is through 1/8/2021. The week one month before is 12/5 - 12/11.

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

COVID-19 VACCINE SUMMARY

TOTAL DOSES DISTRIBUTED
(RATE PER 100,000)

22,137,350
(6,667)

TOTAL 1ST DOSES ADMINISTERED
(PERCENT OF ADULTS)

6,688,231
(2.5%*)

DATA SOURCES

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Cases: State values are calculated by aggregating county-level data from a CDC-managed dataset compiled from state and local health departments; therefore, the values may not match those reported directly by the state. Data is through 1/8/2021.

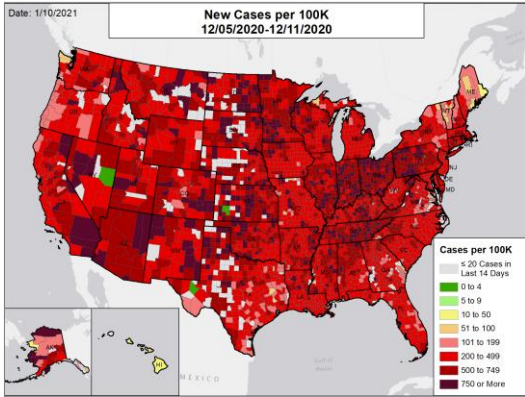
Vaccinations: [CDC COVID Data Tracker](#). Data includes both the Moderna and Pfizer BioNTech COVID-19 vaccines and reflects current data available as of 16:56 EST on 01/10/2021. Data last updated 09:00 EST on 01/08/2021. Adults is defined as the population 18 years old and older. * Excludes territories and federal entities since adult population is not available for these.



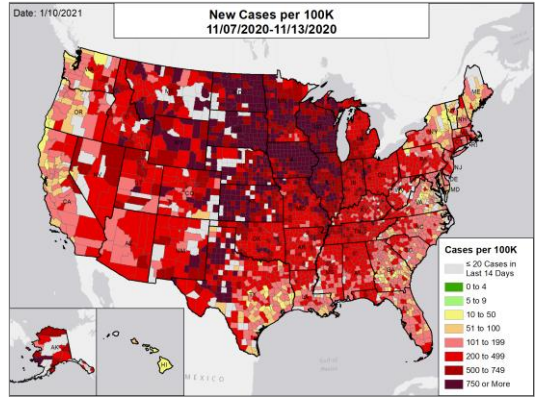
National Picture

NEW CASES PER 100,000 IN THE WEEK:

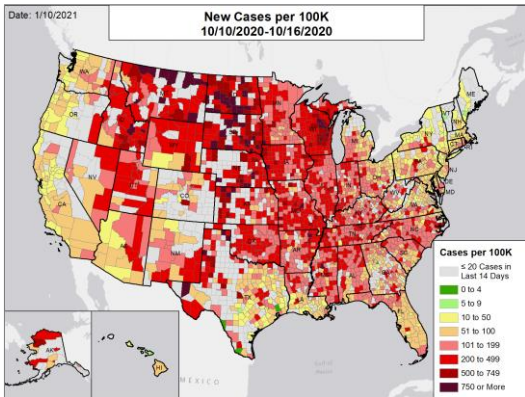
ONE MONTH BEFORE



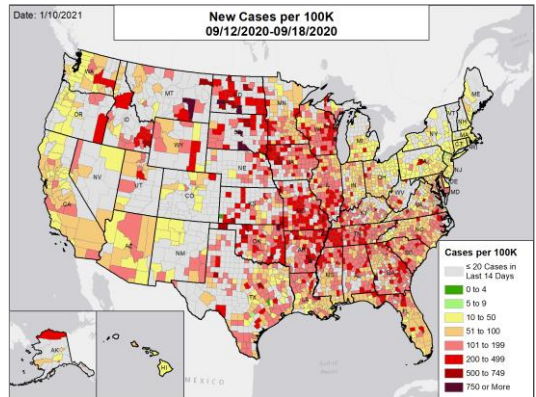
TWO MONTHS BEFORE



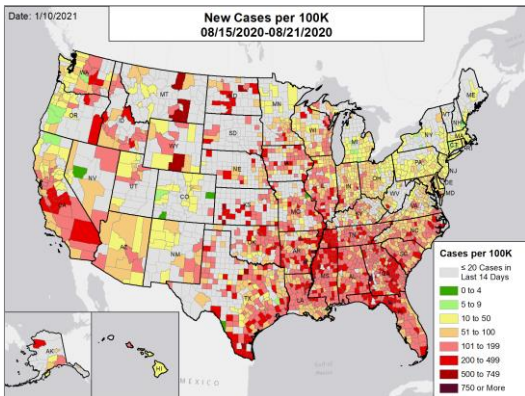
THREE MONTHS BEFORE



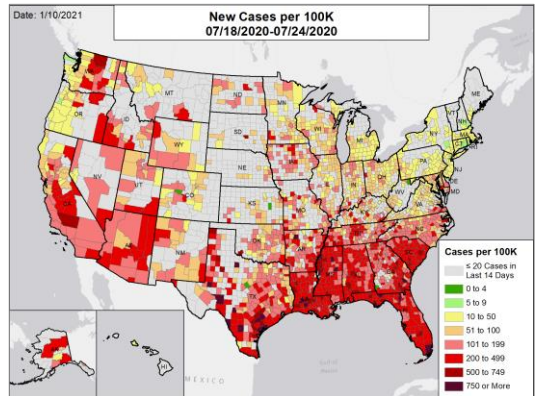
FOUR MONTHS BEFORE



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.

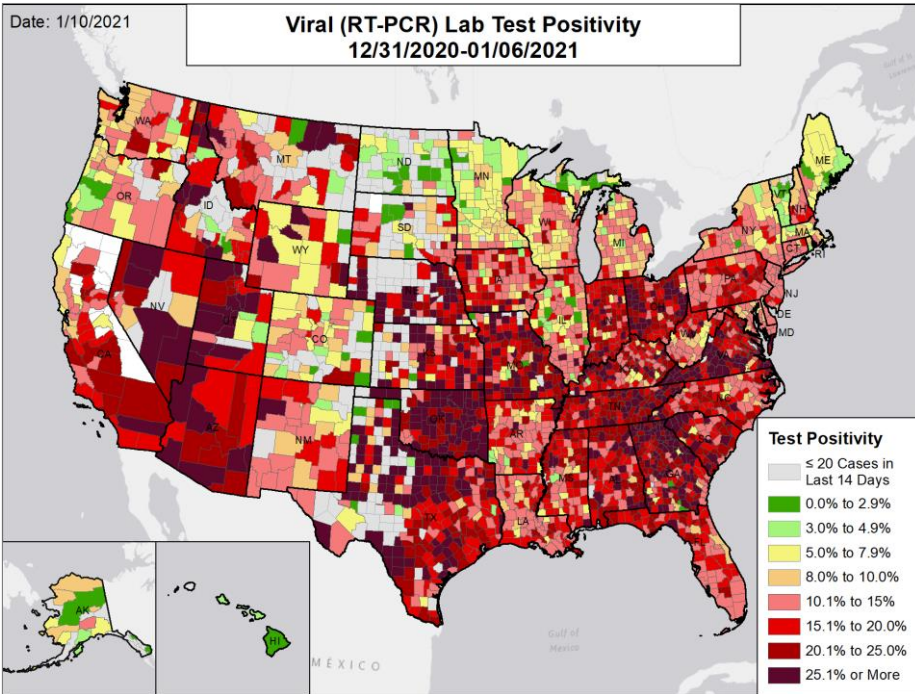
Cases: State values are calculated by aggregating county-level data from a CDC-managed dataset compiled from state and local health departments; therefore, the values may not match those reported directly by the state. The week one month before is 12/5 - 12/11; the week two months before is 11/7 - 11/13; the week three months before is 10/10 - 10/16; the week four months before is 9/12 - 9/18; the week five months before is 8/15 - 8/21; the week six months before is 7/18 - 7/24.



National Picture

VIRAL (RT-PCR) LAB TEST POSITIVITY

NATIONAL RANKING OF TEST POSITIVITY



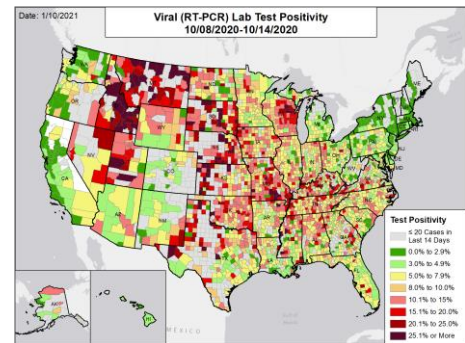
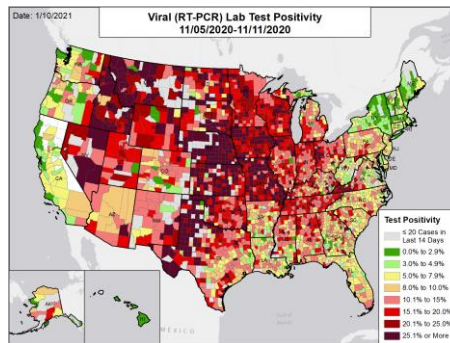
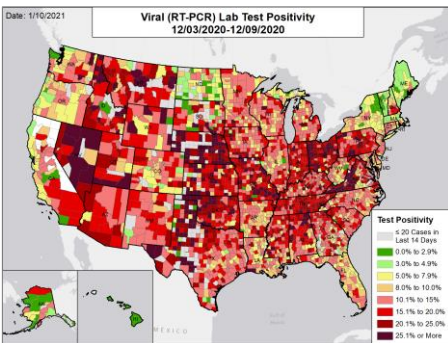
National Rank	State	National Rank	State
1	OK	27	LA
2	UT	28	MT
3	NV	29	CT
4	VA	30	NJ
5	AZ	31	NM
6	ID	32	SD
7	TN	33	WI
8	GA	34	IL
9	SC	35	NY
10	AL	36	DE
11	TX	37	MD
12	NE	38	WA
13	MO	39	MI
14	CA	40	OR
15	IN	41	MA
16	MS	42	RI
17	KY	43	CO
18	KS	44	MN
19	NC	45	ME
20	NH	46	WY
21	OH	47	DC
22	AR	48	AK
23	IA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

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.

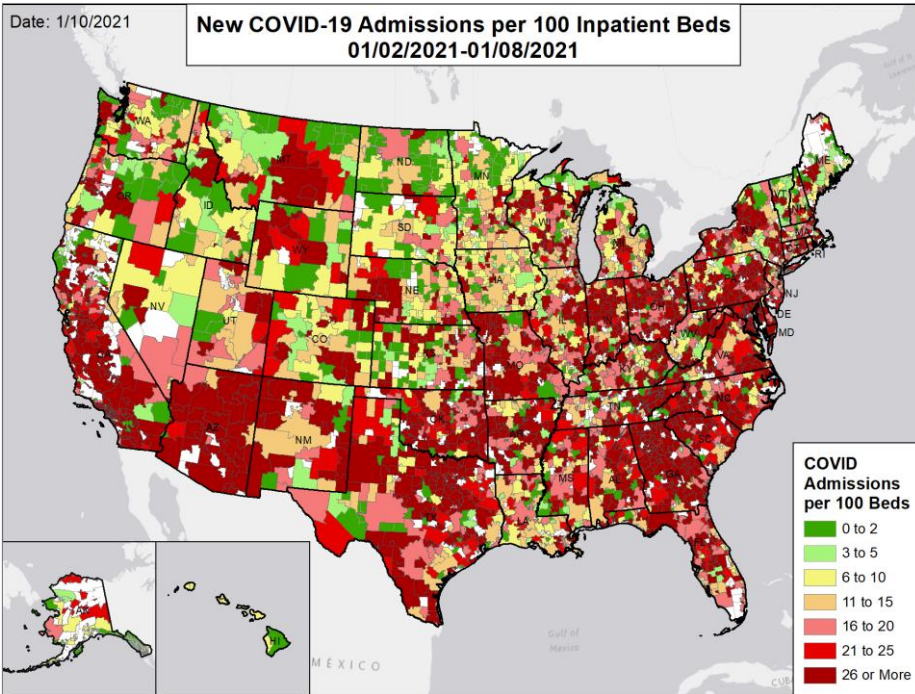
Testing: Combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 1/6/2021. The week one month before is 12/3 - 12/9; the week two months before is 11/5 - 11/11; the week three months before is 10/8 - 10/14.



National Picture

TOTAL NEW COVID-19 ADMISSIONS PER 100 INPATIENT BEDS

NATIONAL RANKING OF ADMISSIONS PER 100 BEDS



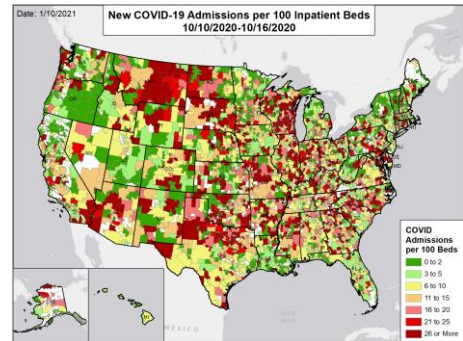
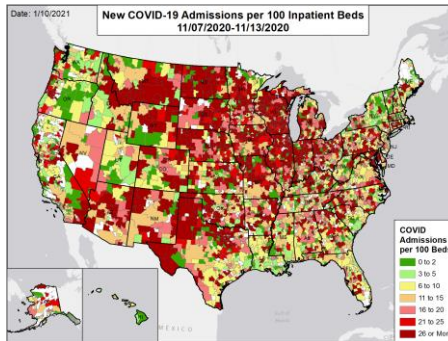
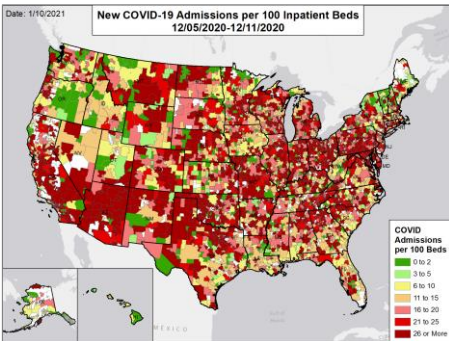
National Rank	State	National Rank	State
1	AZ	27	WI
2	AR	28	MA
3	MD	29	MS
4	GA	30	KS
5	OK	31	NV
6	CA	32	OR
7	SC	33	MT
8	KY	34	NH
9	DC	35	WY
10	AL	36	UT
11	TX	37	LA
12	PA	38	MI
13	VA	39	CO
14	NM	40	NE
15	OH	41	ID
16	NC	42	WA
17	IN	43	MN
18	MO	44	ME
19	DE	45	SD
20	NJ	46	ND
21	TN	47	VT
22	FL	48	RI
23	WV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

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

ONE MONTH BEFORE

TWO MONTHS BEFORE

THREE MONTHS BEFORE



DATA SOURCES

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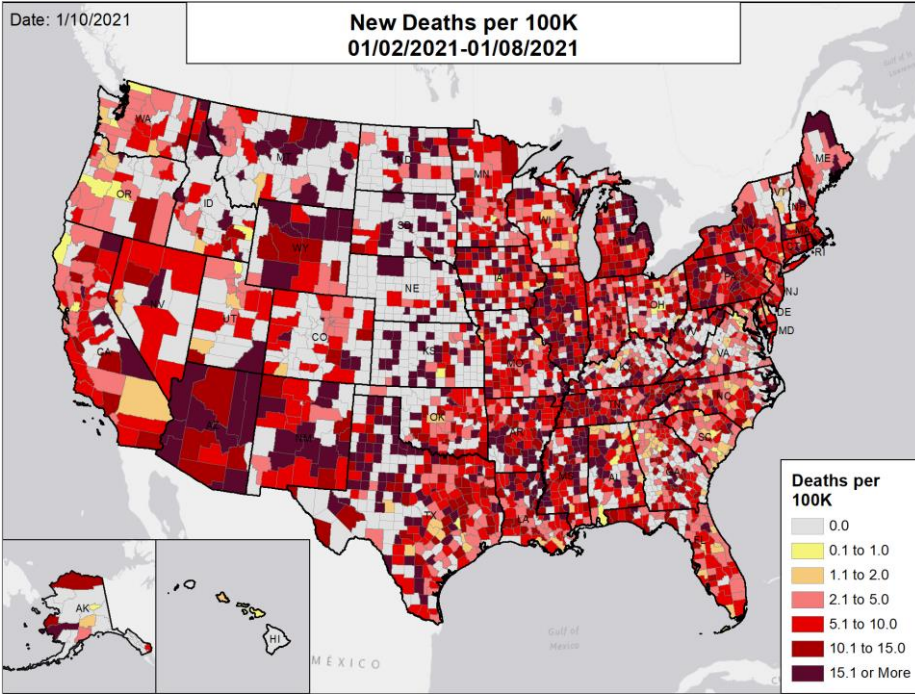
Admissions: Unified hospitalization dataset in HHS Protect through 1/8/2021. Totals include confirmed and suspected COVID-19 admissions. The week one month before is 12/5 - 12/11; the week two months before is 11/7 - 11/13; the week three months before is 10/10 - 10/16.



National Picture

NEW DEATHS PER 100,000

NATIONAL RANKING OF NEW DEATHS PER 100,000



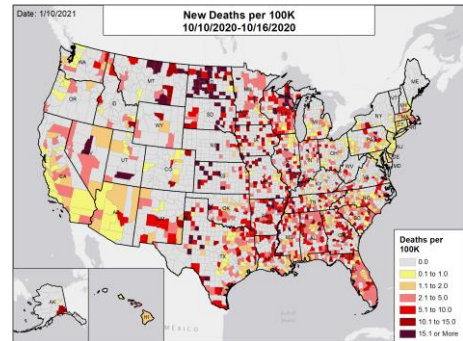
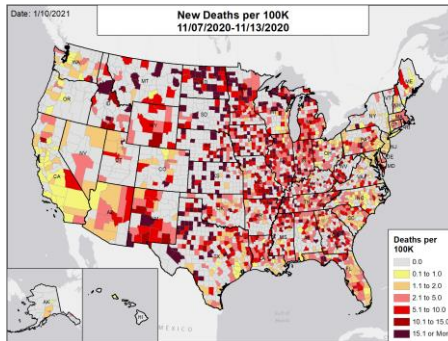
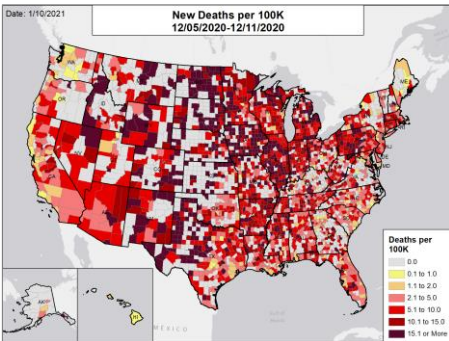
National Rank	State	National Rank	State
1	RI	27	ND
2	AZ	28	TX
3	WV	29	NC
4	TN	30	ME
5	NM	31	MN
6	PA	32	OK
7	MS	33	NE
8	KS	34	KY
9	CT	35	OH
10	MI	36	ID
11	IL	37	WI
12	WY	38	FL
13	AR	39	CO
14	MT	40	MD
15	MA	41	SC
16	NV	42	UT
17	IN	43	GA
18	SD	44	VT
19	LA	45	WA
20	CA	46	DC
21	IA	47	DE
22	MO	48	VA
23	NJ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

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: State values are calculated by aggregating county-level data from a CDC-managed dataset 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 12/5 - 12/11; the week two months before is 11/7 - 11/13; the week three months before is 10/10 - 10/16.



METHODS

STATE REPORT | 01.10.2021

Metric	Dark Green	Light Green	Yellow	Orange	Light Red	Red	Dark Red	Darkest Red
New cases per 100,000 population per week	≤4	5 – 9	10 – 50	51 – 100	101 – 199	200 – 499	500 – 749	≥750
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% – 25.0%	≥25.1%
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	≥5000	3001 – 4999	2000 – 2999	1000 – 1999	500 – 999		≤499	
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 – 5.0	5.1 – 10.0	10.1 – 15.0	≥15.1
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%	
Percent of hospitals with supply/staff shortages	≤0%		1% – 9%	10% – 19%	20% – 24%	25% – 29%	≥30%	
Change in percent of hospitals with supply/staff shortages	≤-10%	-9% – -5%	-4% – 0%	1% – 4%	5% – 9%		≥10%	

- 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 17:26 EST on 01/10/2021. 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 resulted. Last week data are from 12/31 to 1/6; previous week data are from 12/24 to 12/30; the week one month before data are from 12/3 to 12/9. HHS Protect data is recent as of 16:57 EST on 01/10/2021. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EST on 01/09/2021.
- **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 17:02 EST on 01/10/2021.
- **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 18:25 EST on 01/10/2021.
- **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 12/28-1/3, previous week is 12/21-12/27.
- **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.”
- **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 18:25 EST on 01/10/2021.
- **Vaccinations:** [CDC COVID Data Tracker](#). Data includes both the Moderna and Pfizer BioNTech COVID-19 vaccines and reflects current data available as of 16:56 EST on 01/10/2021. Data last updated 09:00 EST on 01/08/2021. Adults is defined as the population 18 years old and older.