



MISSOURI

STATE REPORT

01.03.2021

Issue 29

SUMMARY

- Missouri is in the red zone for cases, indicating 101 or more new cases per 100,000 population, with the 33rd highest rate in the country. Missouri is in the red zone for test positivity, indicating a rate at or above 10.1%, with the 13th highest rate in the country.
- Missouri has seen stability in new cases and an increase in test positivity.
- The following three counties had the highest number of new cases over the last 3 weeks: 1. St. Louis County, 2. Jackson County, and 3. St. Charles County. These counties represent 37.2% of new cases in Missouri.
- 87% of all counties in Missouri have moderate or high levels of community transmission (yellow, orange, or red zones), with 77% having high levels of community transmission (red zone).
- During the week of Dec 21 - Dec 27, 31% of nursing homes had at least one new resident COVID-19 case, 43% had at least one new staff COVID-19 case, and 13% had at least one new resident COVID-19 death.
- Missouri had 308 new cases per 100,000 population, compared to a national average of 413 per 100,000.
- Current staff deployed from the federal government as assets to support the state response are: 96 to support operations activities from FEMA and 5 to support operations activities from ASPR.
- Between Dec 26 - Jan 1, on average, 268 patients with confirmed COVID-19 and 225 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Missouri. This is a minimal change in total new COVID-19 hospital admissions.
- As of Jan 2, 218,800 vaccine doses have been distributed to Missouri. 89,565 individuals have received the first dose.

RECOMMENDATIONS

- Data reporting has been unstable for the past week, but hospital reporting has been stable and the United States remains at a high plateau of 140-150,000 confirmed and suspected COVID admissions per week and 120-125,000 total inpatients. Significant continued deterioration, from California across the Sunbelt and up into the Southeast, Mid-Atlantic, and Northeast, despite low testing rates during the holidays, suggests aggressive community spread.
- This fall/winter surge has been at nearly twice the rate of rise of cases as the spring and summer surges. This acceleration suggests there may be a USA variant that has evolved here, in addition to the UK variant that is already spreading in our communities and may be 50% more transmissible. Aggressive mitigation must be used to match a more aggressive virus; without uniform implementation of effective face masking (two or three ply and well-fitting) and strict social distancing, epidemics could quickly worsen as these variants spread and become predominant.
- 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 to monitor for potential anaphylaxis and fully utilize nursing students. 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 balanced messaging on the state's vaccination campaign are all 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. Michigan and Nebraska are excellent examples. Given persistent vaccine hesitancy, continued active encouragement by the Governor, health officials, and community influencers are needed; televised immunizations are potentially useful.
- New COVID hospital admissions (most reliable indicator during this time period) continue to be at the highest levels. There is a significant amount of ongoing, undiagnosed asymptomatic transmission.
- Missourians must understand that virus levels are high in their communities. If they were around people outside of their household during the holiday season, they must get tested.
- Along with the mask mandate, reducing indoor dining capacity to 25% and closing bars are effective in decreasing transmission.
- Ensure all universities returning after winter break move to mandatory weekly testing of all on and off campus students; begin planning now. Immediately identifying and removing asymptomatic individuals will prevent community spread.
- When K-12 schools return, establish public health protocols 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.
- With the high percentage of COVID-positive LTCF staff, 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](#).

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)	18,886 (308)	+5%	51,478 (364)	1,355,755 (413)
VIRAL (RT-PCR) LAB TEST POSITIVITY RATE	17.8%	+1.2%*	16.1%	13.1%
TOTAL VIRAL (RT-PCR) LAB TESTS (TESTS PER 100,000)	47,858** (780**)	-31%**	189,892** (1,343**)	7,999,180** (2,437**)
COVID-19 DEATHS (RATE PER 100,000)	254 (4.1)	-39%	892 (6.3)	17,456 (5.3)
SNFs WITH ≥1 NEW RESIDENT COVID-19 CASE	31%	N/A*†	25%	30%
SNFs WITH ≥1 NEW STAFF COVID-19 CASE	43%	N/A*†	40%	48%
SNFs WITH ≥1 NEW RESIDENT COVID-19 DEATH	13%	N/A*†	12%	15%
TOTAL NEW COVID-19 HOSPITAL ADMISSIONS (RATE PER 100 BEDS)	3,453 (23)	-2% (-1%)	5,896 (17)	154,388 (21)
NUMBER OF HOSPITALS WITH SUPPLY SHORTAGES (PERCENT)	27 (23%)	+0% (+0%*)	93 (20%)	1,075 (21%)
NUMBER OF HOSPITALS WITH STAFF SHORTAGES (PERCENT)	27 (23%)	-15% (-36%*)	62 (14%)	1,109 (22%)

* 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. 87% 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 1/1/2021; previous week is 12/19 - 12/25.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 12/30/2020. Previous week is 12/17 - 12/23.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data are reported separately for cases among residents and staff. Data is through 12/27/2020, previous week is 12/14-12/20.

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.

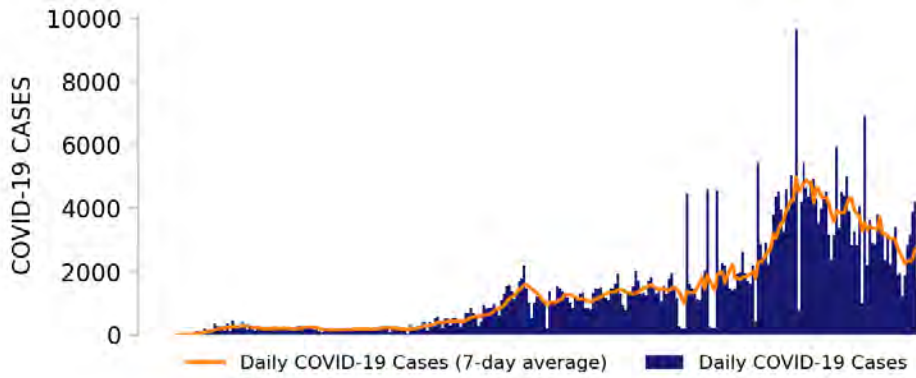
Shortages: Unified hospital dataset in HHS Protect. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. Includes hospitals reporting a staffing shortage currently or projected within one week. Low supply is defined as a hospital reporting 0 or 1-3 days' supply, not able 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 1/1/2021.



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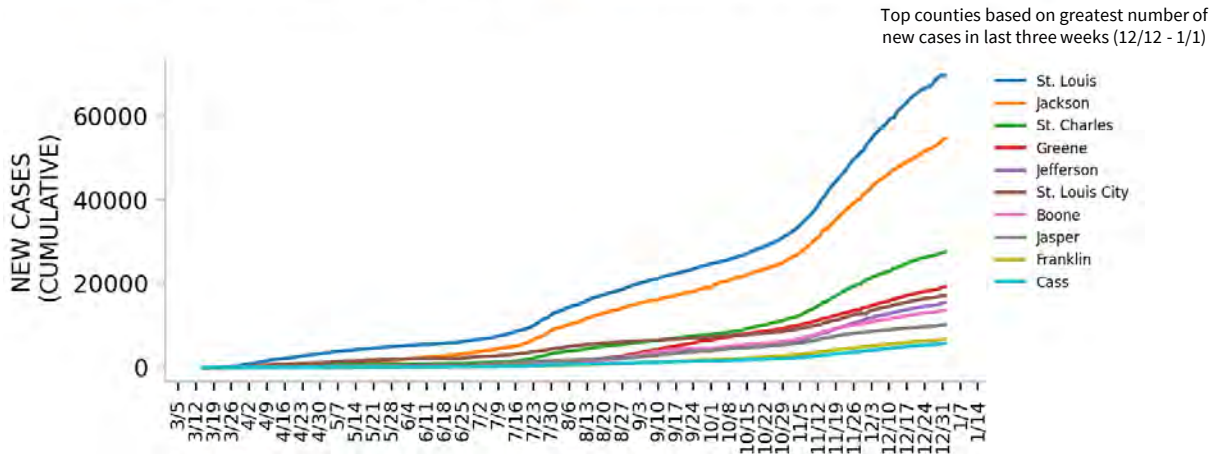
NEW CASES



TESTING



TOP COUNTIES



Top counties based on greatest number of new cases in last three weeks (12/12 - 1/1)

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 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 1/1/2021.

Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 12/30/2020.

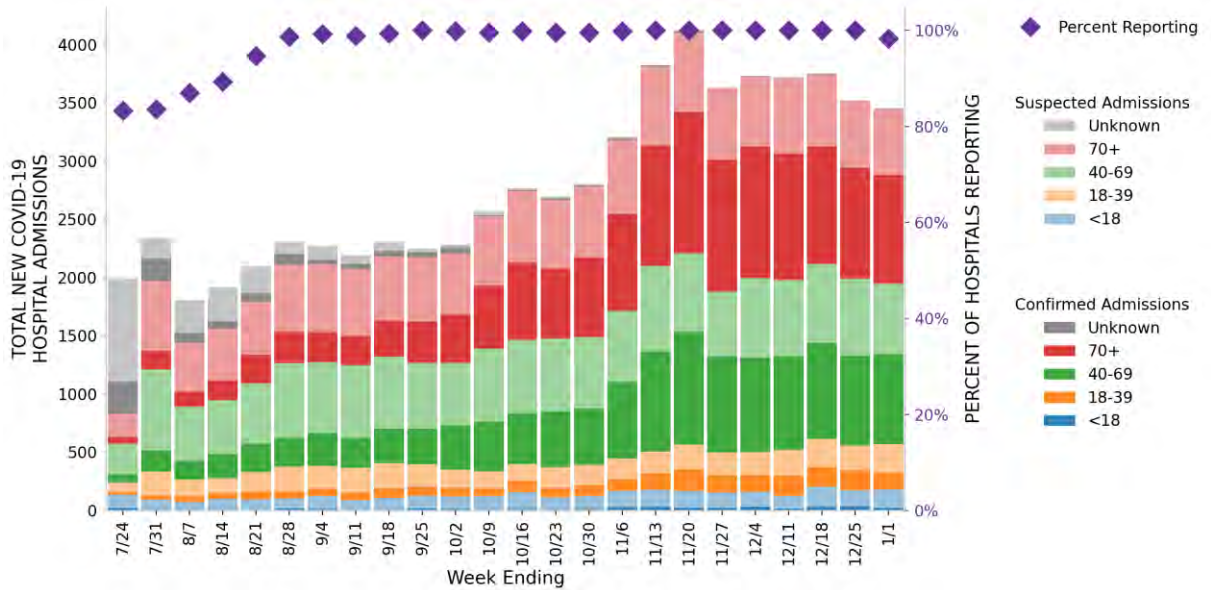


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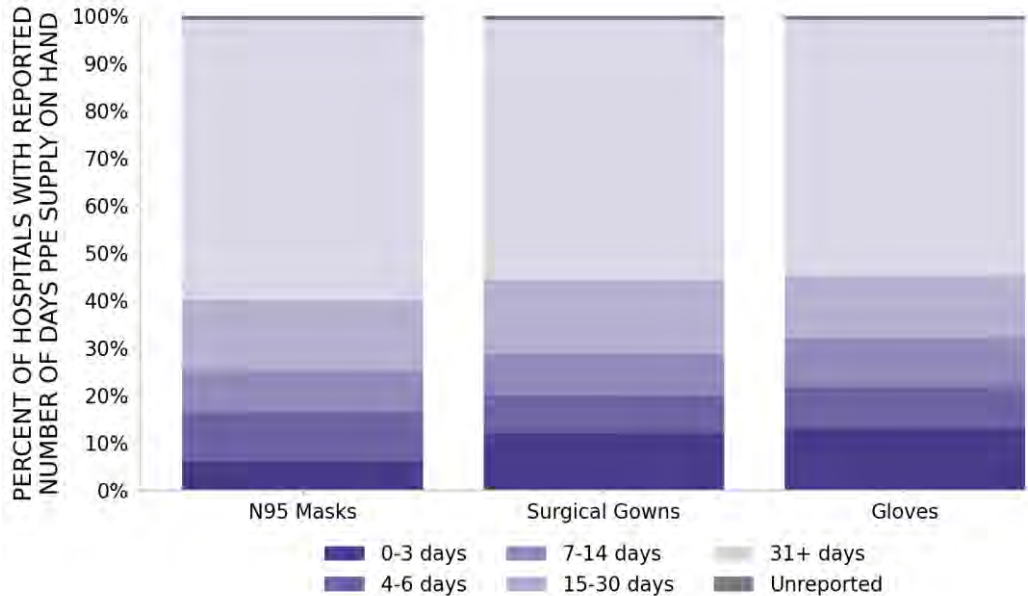
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115 hospitals are expected to report in Missouri

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 12/30/2020.



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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	24 ■ (+0)	St. Louis Kansas City Springfield Columbia Jefferson City Joplin St. Joseph Cape Girardeau Sedalia Mexico Branson Fort Leonard Wood	88 ▼ (-7)	St. Louis Jackson St. Charles Greene Jefferson St. Louis City Boone Jasper Franklin Cass Christian Clay
LOCALITIES IN ORANGE ZONE	2 ■ (+0)	Farmington Quincy	8 ▲ (+1)	St. Francois Webster Stone Osage Gasconade Monroe Maries Hickory
LOCALITIES IN YELLOW ZONE	1 ■ (+0)	Maryville	4 ▲ (+3)	Polk Nodaway New Madrid Gentry
Change from previous week's alerts:		▲ Increase	■ Stable	▼ Decrease

All Red CBSAs: St. Louis, Kansas City, Springfield, Columbia, Jefferson City, Joplin, St. Joseph, Cape Girardeau, Sedalia, Mexico, Branson, Fort Leonard Wood, Rolla, Poplar Bluff, Warrensburg, Kirksville, Hannibal, Lebanon, West Plains, Sikeston, Marshall, Kennett, Moberly, Fort Madison-Keokuk

All Red Counties: St. Louis, Jackson, St. Charles, Greene, Jefferson, St. Louis City, Boone, Jasper, Franklin, Cass, Christian, Clay, Cape Girardeau, Cole, Lincoln, Buchanan, Pettis, Callaway, Platte, Audrain, Taney, Pulaski, Phelps, Camden, Johnson, Newton, Lafayette, Adair, Crawford, Laclede, Butler, Howell, Vernon, Scott, Warren, Miller, Ray, Saline, Marion, Dunklin, Lawrence, Texas, Barry, Wright, Clinton, Ste. Genevieve, Washington, Randolph, Madison, Bates, Henry, Cooper, Pike, Morgan, Perry, McDonald, Livingston, Benton, Andrew, Macon, Stoddard, Moniteau, Douglas, Harrison, Carroll, Iron, Mississippi, Ralls, Dent, DeKalb, Montgomery, Grundy, Wayne, Caldwell, Pemiscot, Ripley, St. Clair, Lewis, Daviess, Sullivan, Howard, Bollinger, Chariton, Schuyler, Ozark, Shelby, Clark, Carter

* 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 1/1/2021.

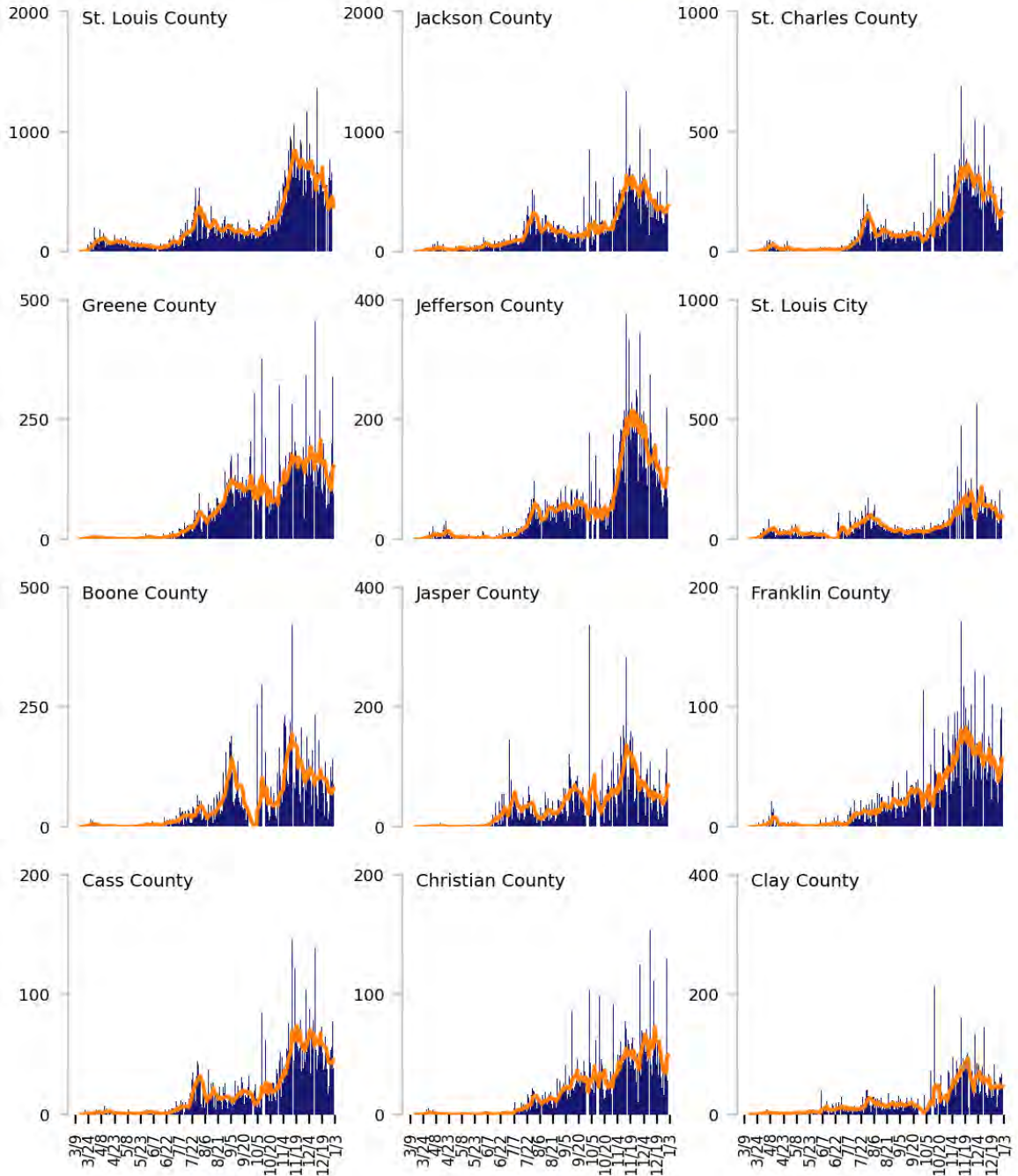
Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 12/30/2020.



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

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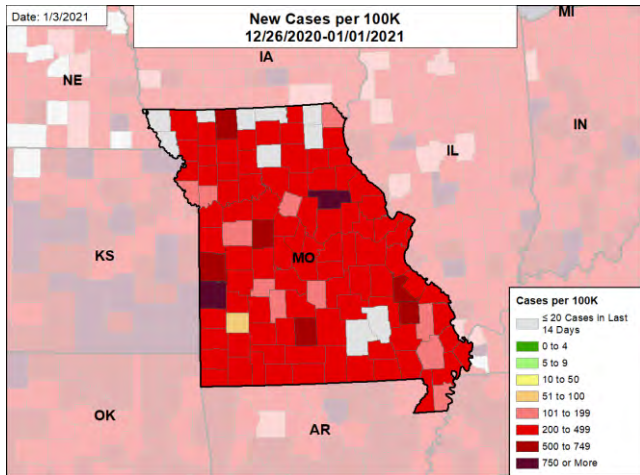


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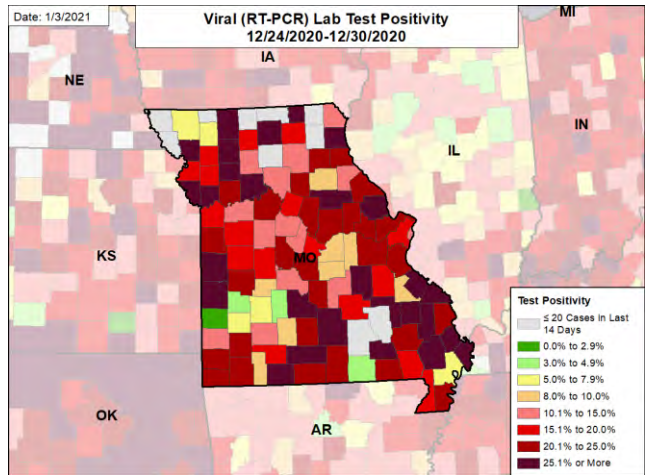
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CASE RATES AND VIRAL LAB TEST POSITIVITY

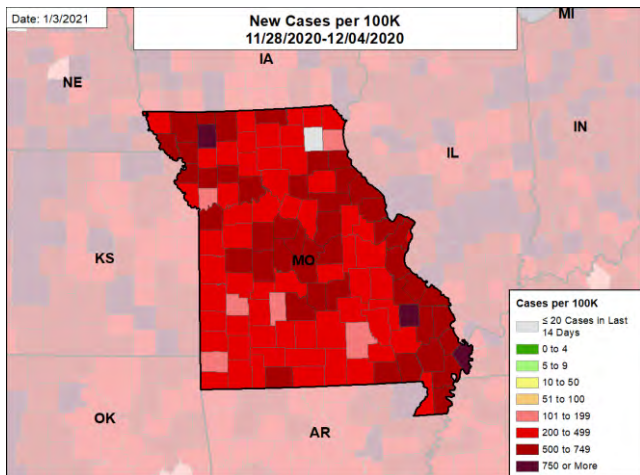
NEW CASES PER 100,000



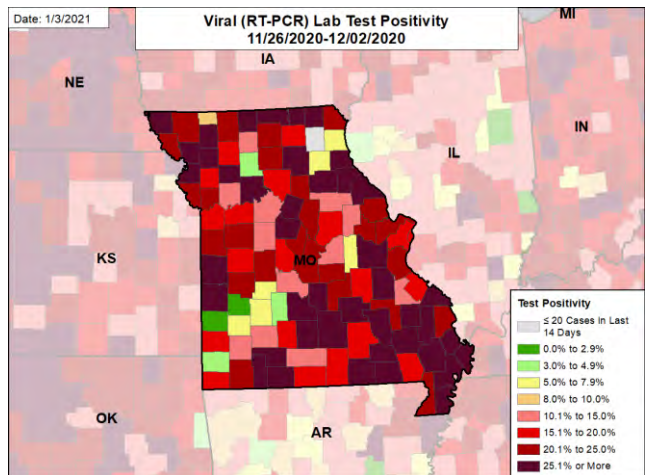
VIRAL (RT-PCR) LABORATORY TEST POSITIVITY



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 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 1/1/2021. The week one month before is 11/28 - 12/4.

Testing: HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 12/30/2020. The week one month before is 11/26 - 12/2.

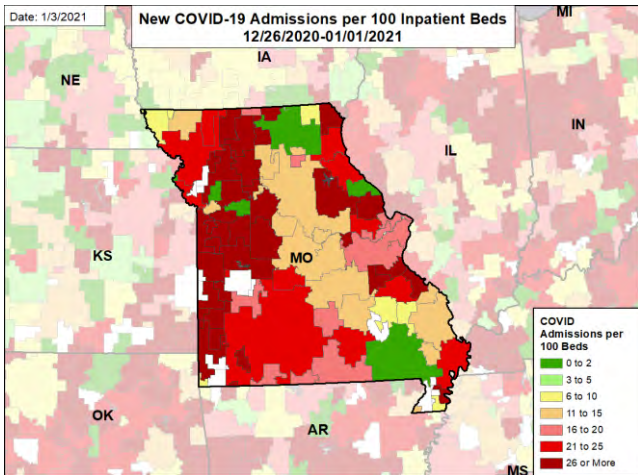


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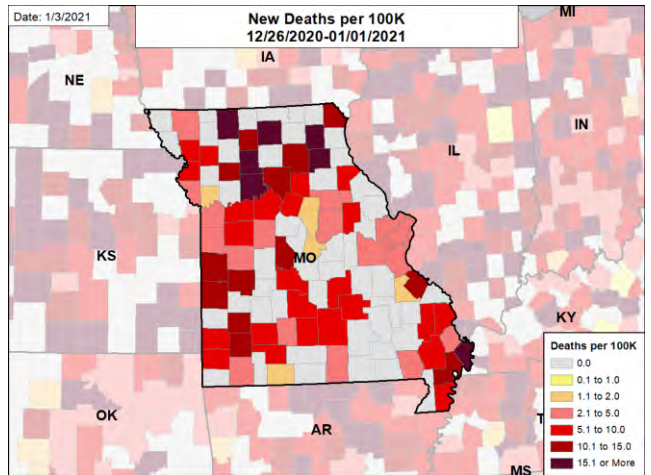
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HOSPITAL ADMISSIONS AND DEATH RATES

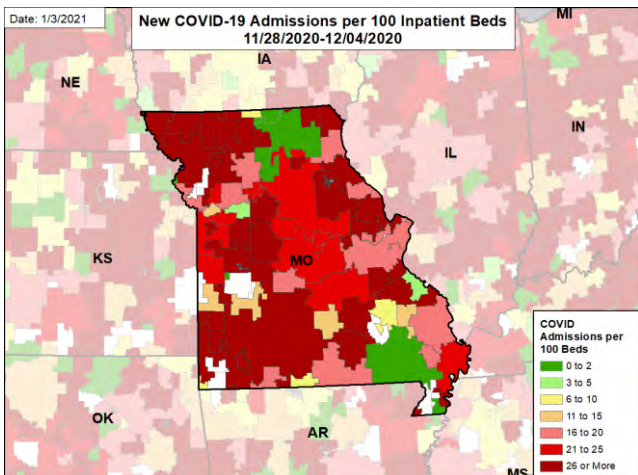
TOTAL NEW COVID-19 ADMISSIONS PER 100 INPATIENT BEDS



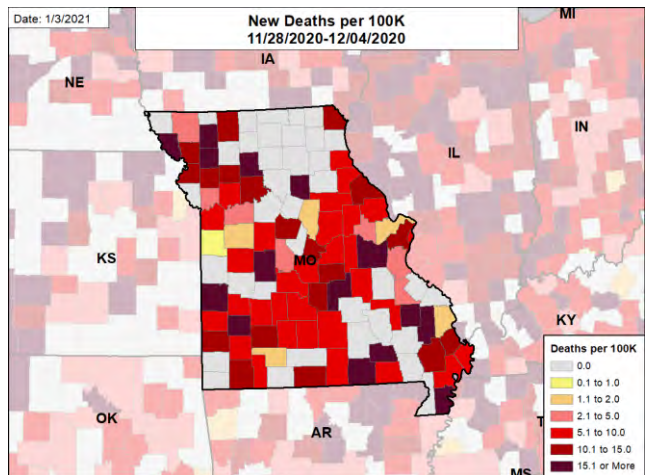
NEW DEATHS PER 100,000



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 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 1/1/2021. The week one month before is 11/28 - 12/4.

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.