IOWA

STATE REPORT | 08.09.2020

SUMMARY

- Iowa is in the red zone for cases, indicating more than 100 new cases per 100,000 population last week, and the yellow zone for test positivity, indicating a rate between 5% to 10%.
- Iowa has seen stability in new cases and stability in test positivity over the past week.
- The following three counties had the highest number of new cases over the past 3 weeks: 1. Polk County, 2. Linn County, and 3. Dubuque County. These counties represent 32.5 percent of new cases in Iowa.
- Iowa had 103 new cases per 100,000 population in the past week, compared to a national average of 114 per 100,000.
- The federal government has deployed the following staff as assets to support the state response: 21 to support medical activities from VA.
- Between Aug 01 - Aug 07, on average, 37 patients with confirmed COVID-19 and 46 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Iowa. An average of 86 percent of hospitals reported either new confirmed or new suspected COVID patients each day during this period; therefore, this may be an underestimate of the actual total number of COVID-related hospitalizations. Underreporting may lead to a lower allocation of critical supplies.*

RECOMMENDATIONS

- Very slow drop in transmission (as measured by case rates and testing positivity) could be accelerated by intensifying restrictions in all counties and cities with case rates over 100 per 100,000 population.
- Mandate cloth face coverings outside of the home, especially in indoor settings in all yellow and red zone counties and metro areas.
- Close indoor bars and gyms, limit indoor dining and restrict gatherings as described below for yellow and red zone counties and metro areas.
- Launch aggressive public messaging and education on the need for social distancing and use of face coverings, especially in yellow and red zone counties and metro areas. Emphasize risks of COVID, especially for the elderly and those with comorbid conditions such as diabetes, hypertension, and obesity.
- Make public COVID dashboard more visually compelling and educational, with county-level details for comparison. Promote its use in educational campaigns.
- Ensure sufficient capacity for contact tracing to have all cases isolated immediately upon diagnosis and interviewed within 48 hours. Ensure adequate housing for isolation and quarantine, especially for multigenerational or crowded households.
- Enforce effective social distancing and use of face coverings in all indoor work environments, especially in crowded environments such as meat-packing plants. Consider fining facilities/businesses that violate mandates.
- Continue protection for residents of long-term care facilities by requiring tests for all new admissions and periodic testing of staff, especially in facilities located in red zone areas. Enforce mask use by all staff at all times.
- Specific, detailed guidance on community mitigation measures can be found on the CDC website.

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

COVID-19

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	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW CASES (RATE PER 100,000)	3,246 (103)	-6.8%	15,236 (108)	375,035 (114)
DIAGNOSTIC TEST POSITIVITY RATE	7.5%	-0.2%*	8.8%	7.1%
TOTAL DIAGNOSTIC TESTS (TESTS PER 100,000)	54,788** (1,737)	+8.8%**	181,597** (1,284)	4,863,237** (1,482)
COVID DEATHS (RATE PER 100,000)	47 (1)	+4.4%	141 (1)	7,261 (2)
SNFs WITH AT LEAST ONE RESIDENT COVID-19 CASE	4.5%	-0.2%*	6.2%	12.1%

MOBILITY ▶

MOBILITY RELATIVE TO BASELINE

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

DATA SOURCES

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

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 8/7/2020; last week is 8/1 - 8/7, previous week is 7/25 - 7/31.

Testing: State-level values calculated by using 7-day rolling averages of reported tests. Regional- and national-level values calculated by using a combination of CELR (COVID-19 Electronic Lab Reporting) state health department-reported data and HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) through 8/5/2020. Last week is 7/30 - 8/5, previous week is 7/23 - 7/29. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/08/2020.

Mobility: Descartes Labs. This data depicts the median distance moved across a collection of mobile devices to estimate the level of human mobility within a county; 100% represents the baseline mobility level. Data is anonymized and provided at the county level. Data through 8/7/2020.

SNFs: Skilled nursing facilities. National Healthcare Safety Network. Data report resident cases. Last week is 7/27-8/2, previous week is 7/20-7/26.

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COVID-19 COUNTY AND METRO ALERTS*

LOCALITIES IN RED ZONE

LOCALITIES IN YELLOW ZONE

METRO AREA (CBSA) LAST WEEK	**1** Omaha-Council Bluffs	**16** Top 12 shown (full list below)	Des Moines-West Des Moines Cedar Rapids Waterloo-Cedar Falls Dubuque Iowa City Davenport-Moline-Rock Island Fort Dodge Ames Sioux City Marshalltown Clinton Ottumwa
COUNTY LAST WEEK	**10** Pottawattamie Franklin Emmet Hardin Floyd Shelby Clarke Crawford Montgomery Lucas	**38** Top 12 shown (full list below)	Polk Linn Dubuque Black Hawk Johnson Dallas Webster Woodbury Marshall Story Clinton Warren

All Yellow CBSAs: Des Moines-West Des Moines, Cedar Rapids, Waterloo-Cedar Falls, Dubuque, Iowa City, Davenport-Moline-Rock Island, Fort Dodge, Ames, Sioux City, Marshalltown, Clinton, Ottumwa, Muscatine, Pella, Carroll, Fort Madison-Keokuk

All Yellow Counties: Polk, Linn, Dubuque, Black Hawk, Johnson, Dallas, Webster, Woodbury, Marshall, Story, Clinton, Warren, Wapello, Muscatine, Sioux, Plymouth, Bremer, Marion, Boone, Jackson, Page, Benton, Carroll, Buchanan, Lee, Clayton, Madison, Hancock, Tama, Lyon, Butler, Poweshiek, Winneshiek, Humboldt, Harrison, O'Brien, Mills, Cedar

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

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

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

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

DATA SOURCES

Cases and Deaths: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 8/7/2020; last week is 8/1 - 8/7, three weeks is 7/18 - 8/7.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 8/5/2020. Last week is 7/30 - 8/5. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

POLICY RECOMMENDATIONS FOR COUNTIES IN THE RED ZONE

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

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

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

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

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

Public Officials
- Limit gyms to 25% occupancy and close bars until percent positive rates are under 3%; create outdoor dining opportunities with pedestrian areas
- Limit social gatherings to 25 people or fewer
- Institute routine weekly testing of all workers in assisted living and long-term care facilities. Require masks for all staff and prohibit visitors
- Ensure that all business retailers and personal services require masks and can safely social distance
- Increase messaging on the risk of serious disease for individuals in all age groups with preexisting obesity, hypertension, and diabetes mellitus, and recommend to shelter in place
- Work with local community groups to provide targeted, tailored messaging to communities with high case rates, and increase community level testing
- Recruit more contact tracers as community outreach workers to ensure all cases are contacted and all positive households are individually tested within 24 hours
- Provide isolation facilities outside of households if COVID-positive individuals can't quarantine successfully
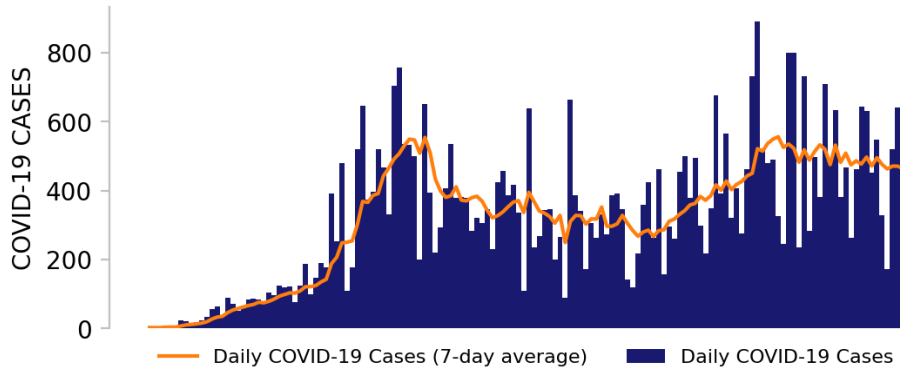
Testing
- Move to community-led neighborhood testing and work with local community groups to increase access to testing
- Surge testing and contact tracing resources to neighborhoods and zip codes with highest case rates
- **Diagnostic pooling**: Laboratories should use pooling of samples to increase testing access and reduce turnaround times to under 12 hours. Consider pools of 3-5 individuals
- **Surveillance pooling**: For family and cohabitating households, screen entire households in a single test by pooling specimens of all members into single collection device
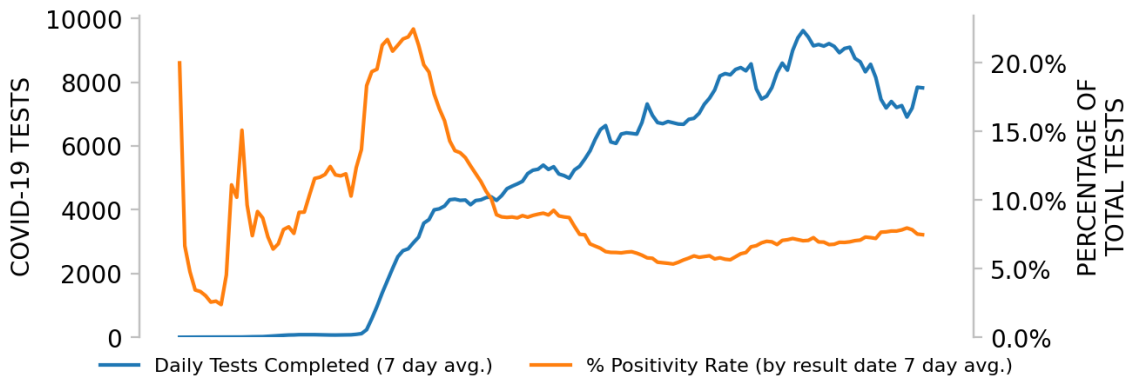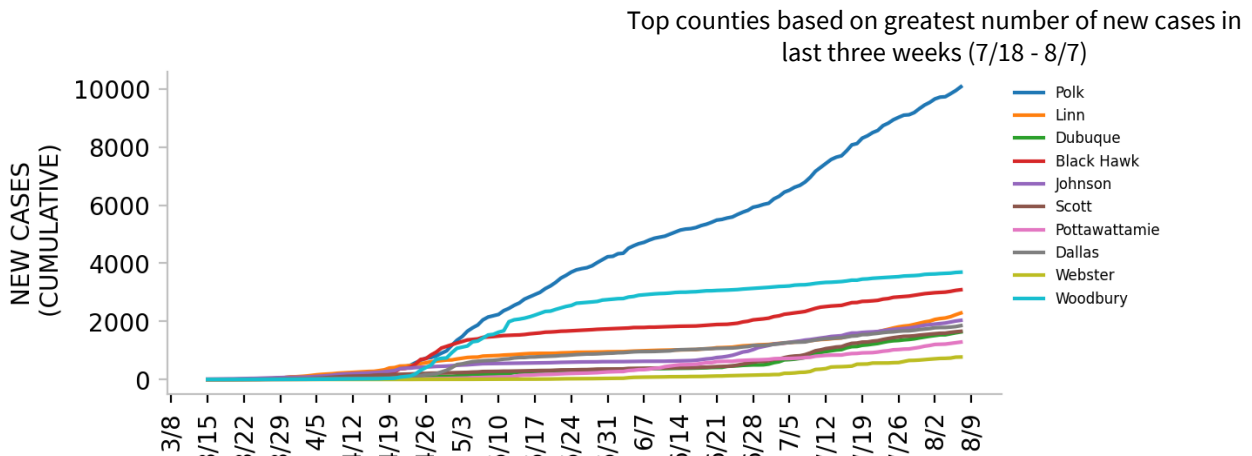
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NEW CASES ▶

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

TESTING ▶

Legend: — Daily Tests Completed (7 day avg.)   — % Positivity Rate (by result date 7 day avg.)

Top counties based on greatest number of new cases in last three weeks (7/18 - 8/7)

TOP COUNTIES ▶

Legend:
— Polk
— Linn
— Dubuque
— Black Hawk
— Johnson
— Scott
— Pottawattamie
— Dallas
— Webster
— Woodbury

DATA SOURCES

Cases: County-level data from USAFacts. State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported directly by the state. Data is through 8/7/2020.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 8/5/2020.

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

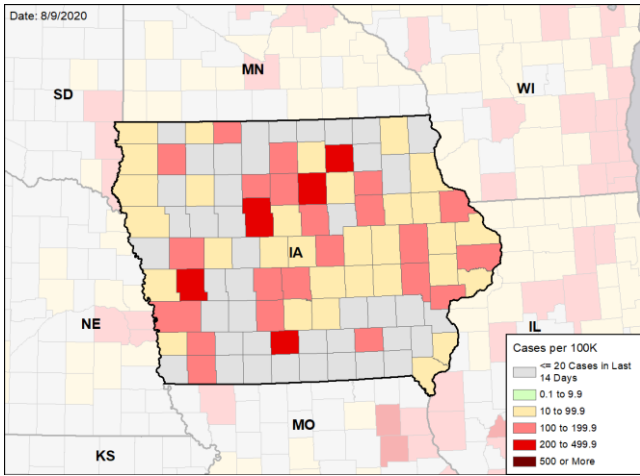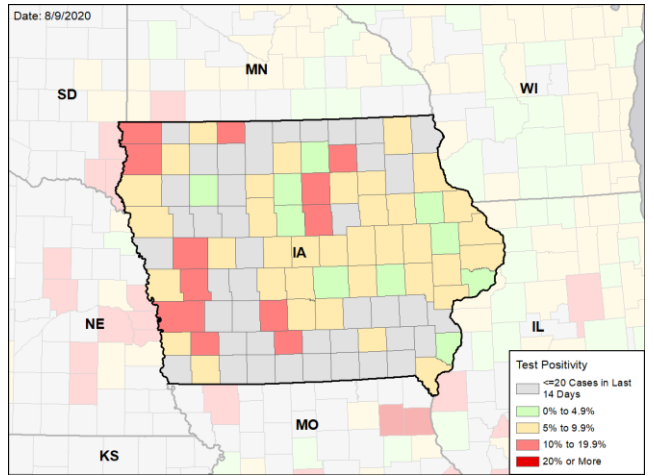**TOTAL DAILY CASES**

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CASE RATES AND DIAGNOSTIC TEST POSITIVITY DURING THE LAST WEEK
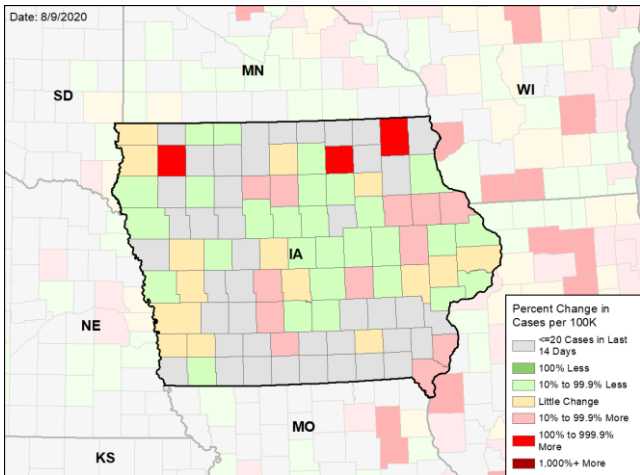
NEW CASES PER 100,000 DURING LAST WEEK

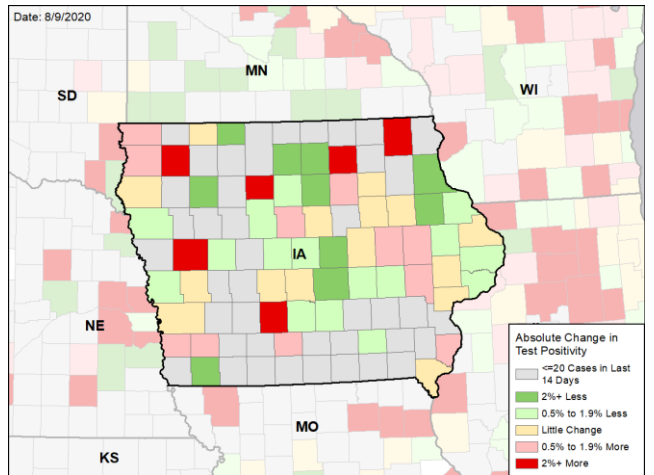

TEST POSITIVITY DURING LAST WEEK

WEEKLY % CHANGE IN NEW CASES PER 100K

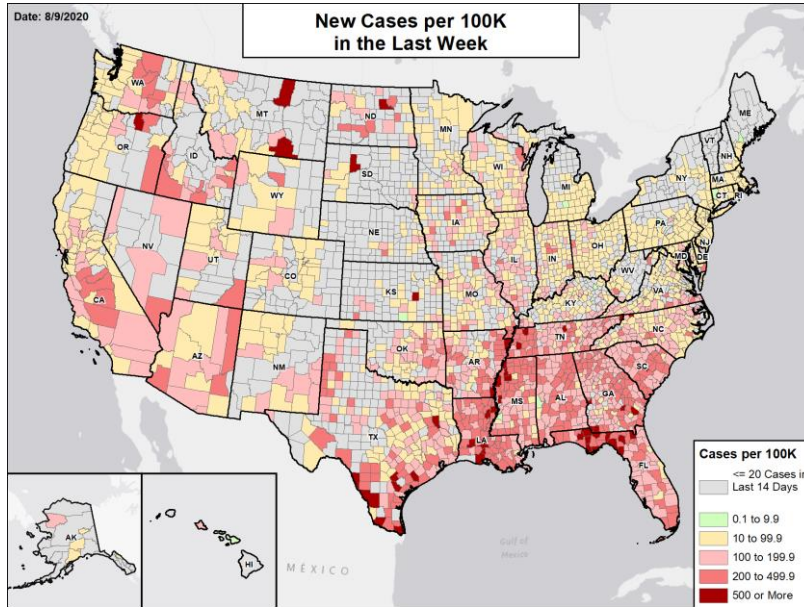### WEEKLY CHANGE IN TEST POSITIVITY

DATA SOURCES

Cases: County-level data from USAFacts through 8/7/2020. Last week is 8/1 - 8/7, previous week is 7/25 - 7/31.
Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 8/5/2020. Last week is 7/30 - 8/5, previous week is 7/23 - 7/29. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.
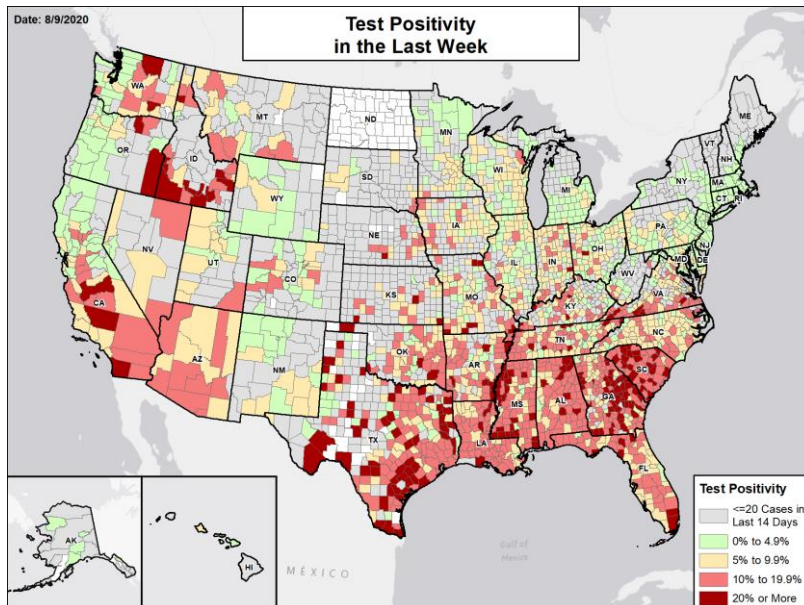
National Picture

NEW CASES PER 100,000 LAST WEEK

TEST POSITIVITY LAST WEEK

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

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

DATA NOTES

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

- **Cases and deaths:** County-level data from USAFacts as of 15:15 EDT on 08/09/2020. State values are calculated by aggregating county-level data from USAFacts; therefore, values may not match those reported directly by the state. Data are reviewed on a daily basis against internal and verified external sources and, if needed, adjusted. Last week data are from 8/1 to 8/7; previous week data are from 7/25 to 7/31.

- **Testing:** CELR (COVID-19 Electronic Lab Reporting) state health department-reported data are used to describe state-level totals when able to be disaggregated from serology test results and to describe county-level totals when information is available on patients' county of residence or healthcare providers' practice location. HHS Protect laboratory data (provided directly to Federal Government from public health labs, hospital labs, and commercial labs) are used otherwise. Some states did not report on certain days, which may affect the total number of tests resulted and positivity rate values. Total diagnostic tests are the number of tests performed, not the number of individuals tested. Diagnostic test positivity rate is the number of positive tests divided by the number of tests performed and resulted. Last week data are from 7/30 to 8/5; previous week data are from 7/23 to 7/29. HHS Protect data is recent as of 14:00 EDT on 08/09/2020. Testing data are inclusive of everything received and processed by the CELR system as of 19:00 EDT on 08/08/2020. Testing data may be backfilled over time, resulting in changes week-to-week in testing data. It is critical that states provide as up-to-date testing data as possible.

- **Mobility:** Descartes Labs. These data depict the median distance moved across a collection of mobile devices to estimate the level of human mobility within a locality; 100% represents the baseline mobility level. Data is recent as of 13:00 EDT on 08/09/2020 and through 8/7/2020.

- **Hospitalizations:** Unified hospitalization dataset in HHS Protect. This figure may differ from state data due to differences in hospital lists and reporting between federal and state systems. These data exclude psychiatric, rehabilitation, and religious non-medical hospitals. In addition, hospitals explicitly identified by states/regions as those from which we should not expect reports were excluded from the percent reporting figure. The data presented represents raw data provided; we are working diligently with state liaisons to improve reporting consistency. Data is recent as of 17:15 EDT on 08/09/2020.

- **Skilled Nursing Facilities:** National Healthcare Safety Network (NHSN). Data report resident cases. Quality checks are performed on data submitted to the NHSN. Data that fail these quality checks or appear inconsistent with surveillance protocols may be excluded from analysis. Also note that data presented by NHSN is more recent than the data publicly posted by CMS. Therefore, data presented may differ slightly from those publicly posted by CMS.