



MISSISSIPPI

SUMMARY

- Mississippi is in the red zone for cases, indicating 101 or more new cases per 100,000 population last week, with the 16th highest rate in the country. Mississippi is in the yellow zone for test positivity, indicating a rate between 5.0% and 7.9%, with the 15th highest rate in the country.
- Mississippi has seen stability in new cases and a decrease in test positivity over the last week as a whole, but with specific counties increasing.
- The number of red zone counties are increasing again.
- The following three counties had the highest number of new cases over the last 3 weeks: 1. DeSoto County, 2. Lafayette County, and 3. Harrison County. These counties represent 18.6% of new cases in Mississippi.
- 65% of all counties in Mississippi have moderate or high levels of community transmission (yellow, orange, or red zones), with 27% having high levels of community transmission (red zone).
- During the week of Sep 7 - Sep 13, 18% of nursing homes had at least one new resident COVID-19 case, 28% had at least one new staff COVID-19 case, and 6% had at least one new resident COVID-19 death.
- Mississippi had 110 new cases per 100,000 population in the last week, compared to a national average of 86 per 100,000.
- Current staff deployed from the federal government as assets to support the state response are: 5 to support medical activities from VA.
- Between Sep 12 - Sep 18, on average, 62 patients with confirmed COVID-19 and 58 patients with suspected COVID-19 were reported as newly admitted each day to hospitals in Mississippi. An average of 89% 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

- Mississippi has made progress through continuing the strong mitigation efforts statewide, but needs to strengthen mitigation efforts in university towns to decrease spread from universities to the local community. Consider a further decrease in hours and occupancy limits in bars and restaurants in university counties and anywhere university and college students gather if cases begin to rise, as is being done by the Mayor of Oxford.
- University of Mississippi has developed a strong plan for testing of symptomatic students, staff, and faculty along with contact tracing and isolation, but needs to further strengthen the detection of silent spread on campuses through routine saliva testing of students on university research platforms or through the Jackson Medical Center campus. Screening should increase to 1,000 individuals per week over the next 4 weeks, carefully following trends in test positivity in asymptomatic students to ensure mitigation and containment of asymptomatic spread. If test positivity on campus is over 10% after 2 weeks, would increase to 1,600 individuals per week or 10% of the student body in both on and off campus housing.
- SEC athlete testing plan is well thought through and excellent.
- The federal government will support surge testing in the Oxford community and university to further strengthen detection of asymptomatic students. Abbott BINAX will be arriving at Historically Black Colleges and Universities this week to ensure rapid diagnosis and isolation of both symptomatic and asymptomatic cases.
- University of Mississippi is recruiting college and university faculty, staff, and students to expand public health messaging and increase contact tracing capacity and ensure protection of local communities through strict mask wearing and social distancing when off campus and when around vulnerable individuals on campus.
- Use focused wastewater surveillance to detect cases early and direct diagnostic testing and public health interventions to alerted dorms or student areas.
- In preparation for fall, increase testing capacity by increasing the budget and capacity of public health labs.
- Ensure hospitals move elective surgery testing and testing for patients admitted without suspected COVID-19 to pooled testing to reserve tests for community outreach; expand outpatient testing, pooling specimens where appropriate.
- Develop a plan for increased surveillance for silent community spread by using the Abbott BinaxNOW or antigen tests. Establish weekly surveillance in critical populations to monitor degree of community spread among K-12 teachers; staff working at nursing homes, assisted living and other congregate living settings; prison staff; and first responders as tests become available.
- Ask citizens and students to limit ALL social gatherings to 10 or fewer people. Recreating spreading events through bar-like gatherings in homes will result in continued high cases and those with comorbidities becoming infected. Careful monitoring of tailgating events both on and off campus will be essential.
- Ensure all nursing homes, assisted living, and elderly care sites follow CMS staff testing requirements and, if cases within local universities rise, increase testing even further to prevent spread from students to residents through staff. Continue aggressive protection of those in long-term care facilities with continued testing.
- Specific, detailed guidance on community mitigation measures can be found on the [CDC website](https://www.cdc.gov).



MISSISSIPPI

STATE REPORT | 09.20.2020

	STATE, LAST WEEK	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION, LAST WEEK	UNITED STATES, LAST WEEK
NEW COVID-19 CASES (RATE PER 100,000)	3,266 (110)	+1%	71,681 (107)	283,590 (86)
VIRAL (RT-PCR) LAB TEST POSITIVITY RATE	7.3%	-1.2%*	6.1%	4.4%
TOTAL VIRAL (RT-PCR) LAB TESTS (TESTS PER 100,000)	21,912** (736)	+12%**	1,067,059** (1,595)	5,881,734** (1,792)
COVID-19 DEATHS (RATE PER 100,000)	131 (4.4)	+24%	1,809 (2.7)	5,580 (1.7)
SNFs WITH ≥1 NEW RESIDENT COVID-19 CASE (≥1 NEW STAFF CASE)	18% (28%)	-3%* (-2%*)	17% (30%)	9% (19%)
SNFs WITH ≥1 NEW RESIDENT COVID-19 DEATH	6%	-3%*	7%	4%



* 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 – 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 9/18/2020; last week is 9/12 - 9/18, previous week is 9/5 - 9/11.

Testing: CELR (COVID-19 Electronic Lab Reporting) state health department-reported data through 9/16/2020. Last week is 9/10 - 9/16, previous week is 9/3 - 9/9.

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. The 100% represents the baseline mobility level prior to the pandemic; lower percent mobility indicates less population movement. Data is

MISSISSIPPI

STATE REPORT | 09.20.2020

COVID-19 COUNTY AND METRO ALERTS*

Top 12 shown in table (full lists below)

METRO AREA (CBSA) LAST WEEK

COUNTY LAST WEEK

LOCALITIES
IN RED
ZONE

8

Tupelo
Cleveland
Greenville
Clarksdale
Corinth
Indianola
Grenada
West Point

22

Lee
Bolivar
Itawamba
Prentiss
Washington
Pontotoc
Alcorn
Coahoma
Sunflower
Adams
Tallahatchie
Grenada

LOCALITIES
IN ORANGE
ZONE

3

Gulfport-Biloxi
Greenwood
McComb

11

DeSoto
Harrison
Jackson
Marshall
Panola
Leflore
Newton
Pike
Marion
Walthall
Sharkey

LOCALITIES
IN YELLOW
ZONE

9

Jackson
Memphis
Oxford
Hattiesburg
Starkville
Meridian
Laurel
Natchez
Brookhaven

20

Lafayette
Hinds
Oktibbeha
Lauderdale
Jones
Forrest
Union
Copiah
Tate
Lincoln
Yazoo
Covington

All Red Counties: Lee, Bolivar, Itawamba, Prentiss, Washington, Pontotoc, Coahoma, Alcorn, Sunflower, Adams, Tallahatchie, Grenada, Tishomingo, Tippah, Perry, Clarke, Clay, Jasper, Quitman, Amite, Humphreys, Benton

All Yellow Counties: Lafayette, Hinds, Oktibbeha, Lauderdale, Jones, Forrest, Union, Copiah, Tate, Lincoln, Yazoo, Covington, Hancock, George, Chickasaw, Leake, Yalobusha, Holmes, Montgomery, Tunica

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

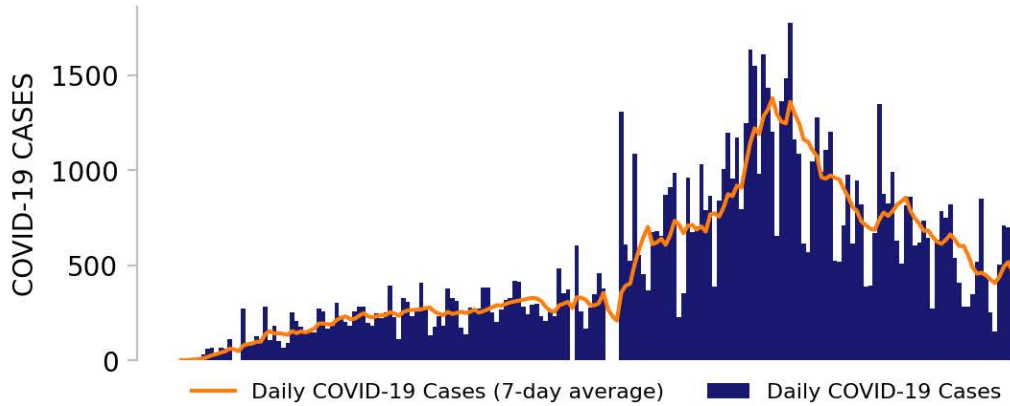
Note: Lists of red, orange, and yellow localities are sorted by the number of new cases in the last 3 weeks, from highest to lowest. Some dates may have incomplete data due to delays in reporting. Data may be backfilled over time, resulting in week-to-week changes.

DATA SOURCES – Additional data details available under METHODS

MISSISSIPPI

STATE REPORT | 09.20.2020

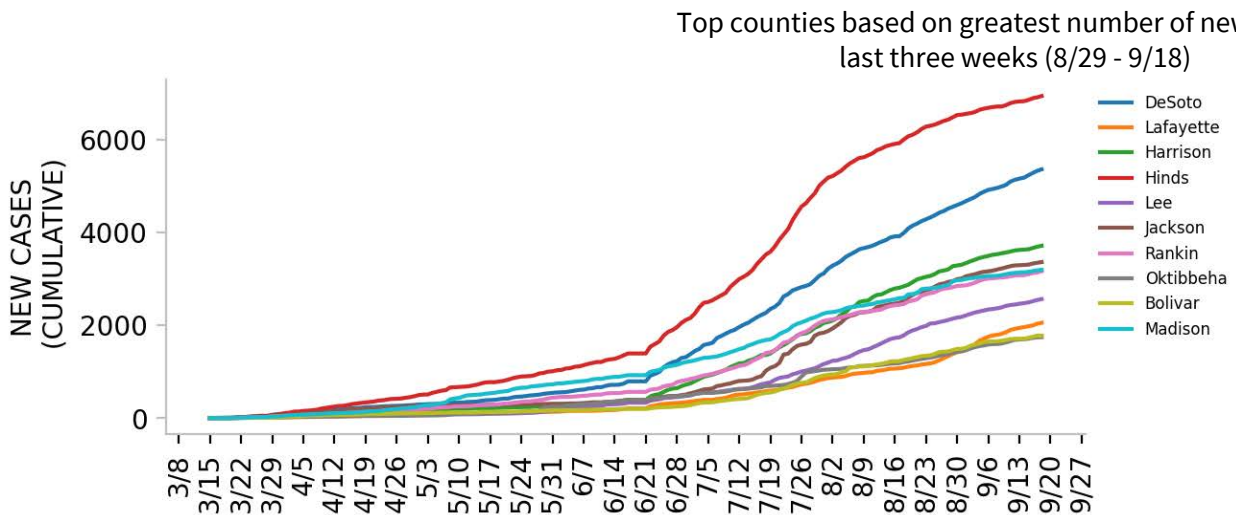
NEW CASES



TESTING



TOP COUNTIES



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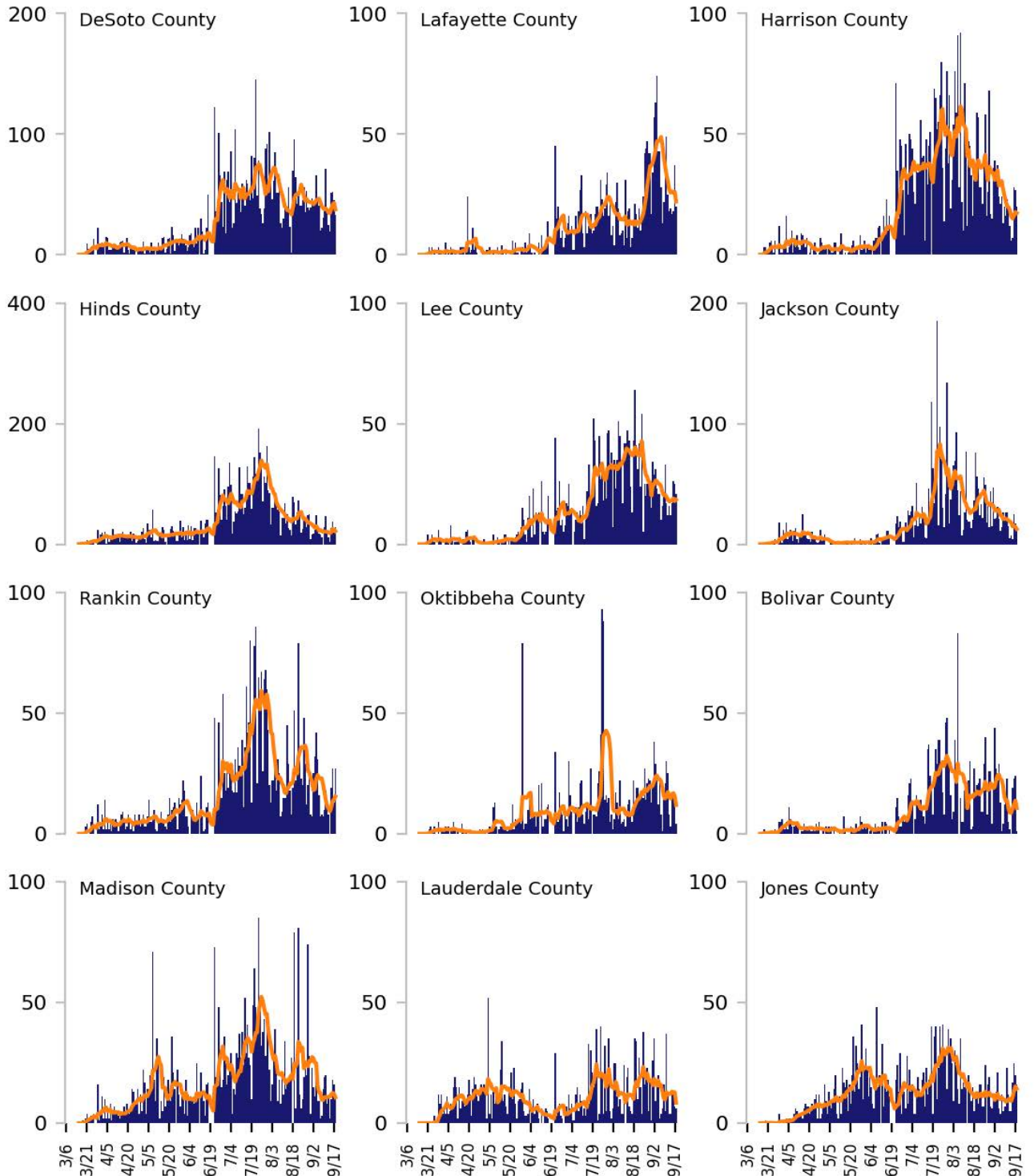
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Cases: State values are calculated by aggregating county-level data from USAFacts; therefore, the values may not match those reported

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

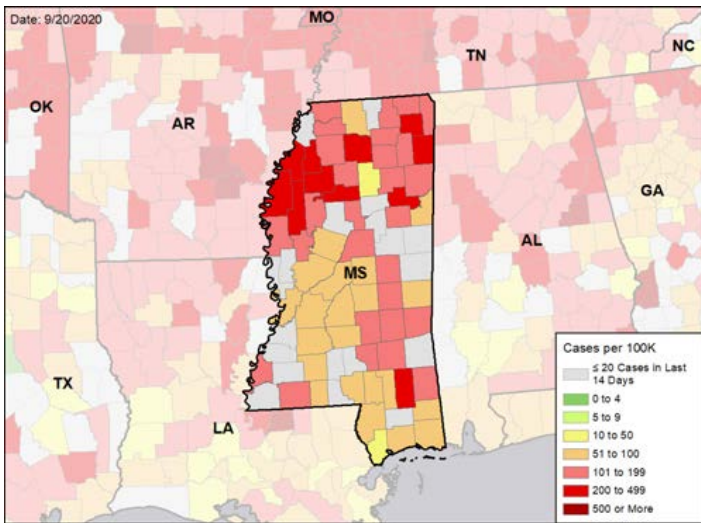


MISSISSIPPI

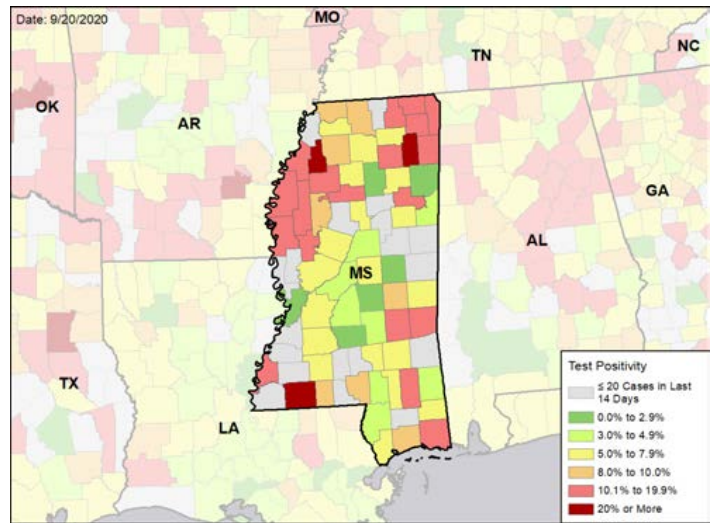
STATE REPORT | 09.20.2020

CASE RATES AND VIRAL LAB TEST POSITIVITY DURING THE LAST WEEK

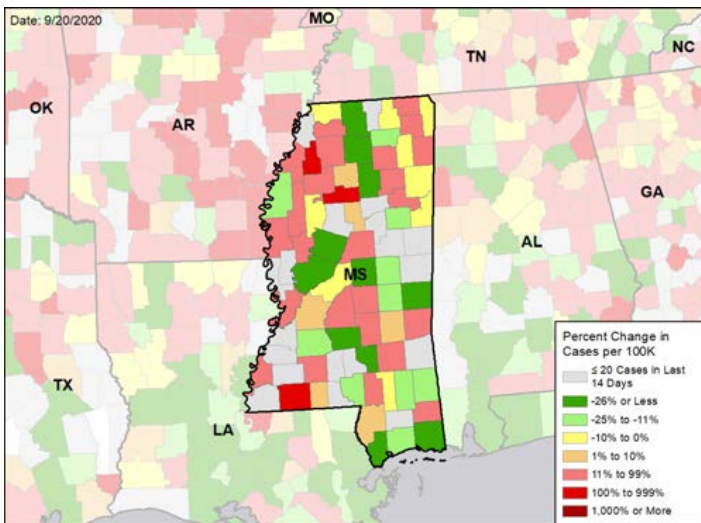
NEW CASES PER 100,000 DURING THE LAST WEEK



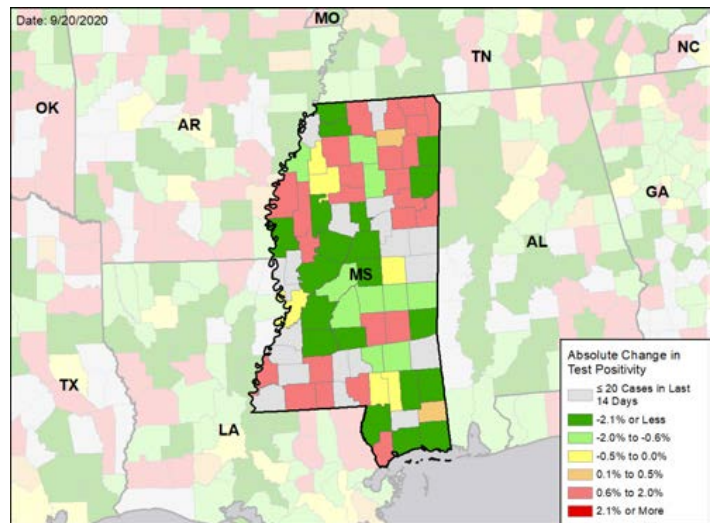
VIRAL (RT-PCR) LABORATORY TEST POSITIVITY DURING THE LAST WEEK



WEEKLY CHANGE IN NEW CASES PER 100,000



WEEKLY CHANGE IN VIRAL (RT-PCR) LABORATORY TEST POSITIVITY



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