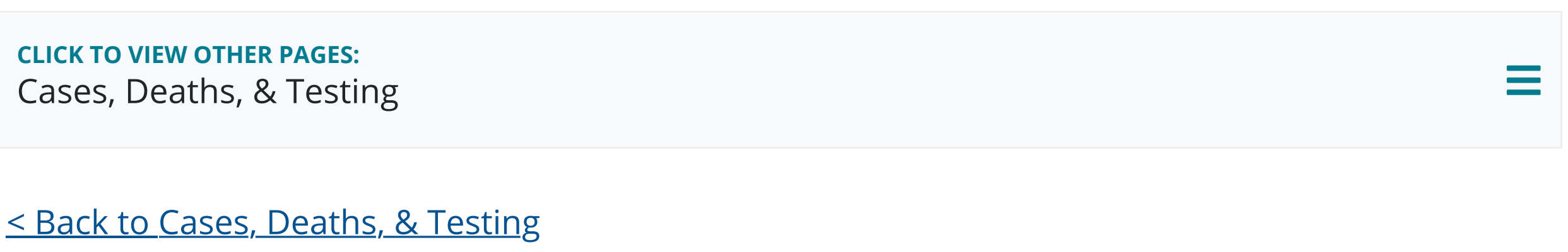


COVID Data Tracker

Maps, charts, and data provided by CDC, updates Mon-Fri by 8 pm ET

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CDC recommends use of [COVID-19 Community Levels](#) to determine the impact of COVID-19 on communities and to take [action](#). CDC also provides [Transmission Levels](#) (also known as Community Transmission Levels) to describe the amount of COVID-19 spread within each county. Healthcare facilities use Transmission Levels to determine [infection control](#) interventions.



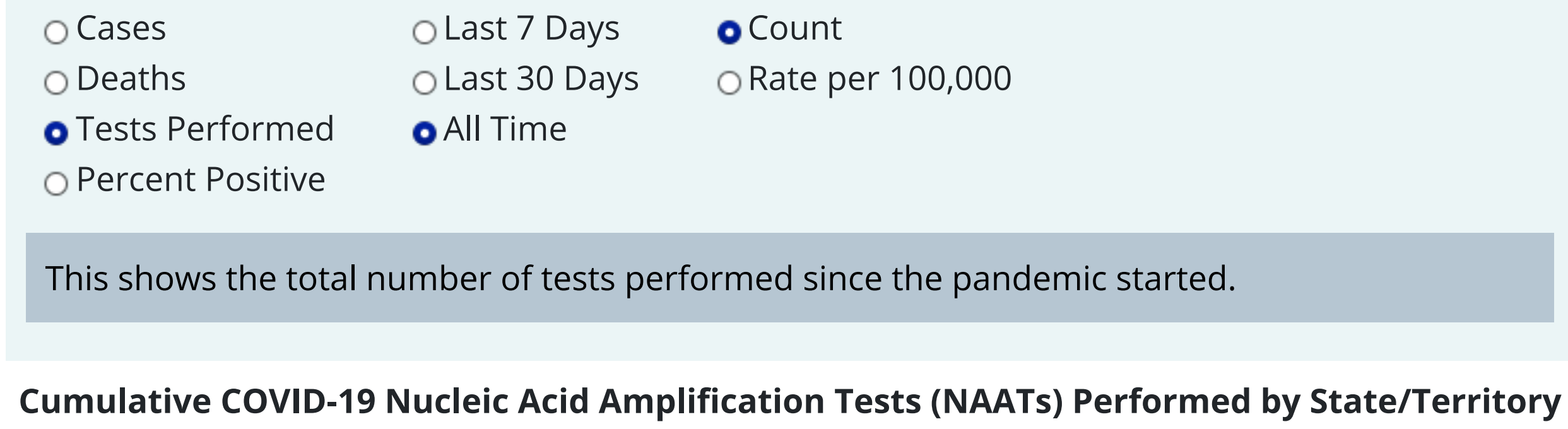
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United States COVID-19 Cases, Deaths, and Laboratory Testing (NAATs) by State, Territory, and Jurisdiction

Maps, charts, and data provided by CDC, updates Mon-Fri by 8 pm ET[†]

[View Footnotes and Download Data](#)



National totals as of: Sep 18 2022. National positivity date as of: Sep 18 2022. CDC | Data as of: Wednesday, September 21, 2022 2:08 PM ET. Posted: Wednesday, September 21, 2022 4:15 PM ET

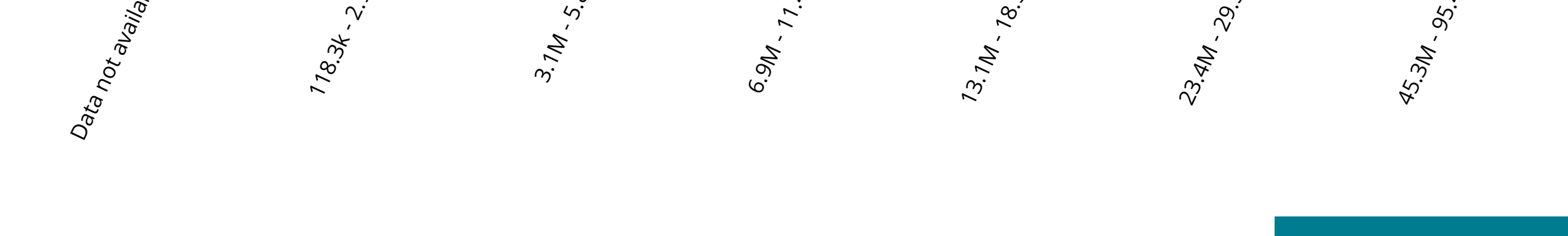
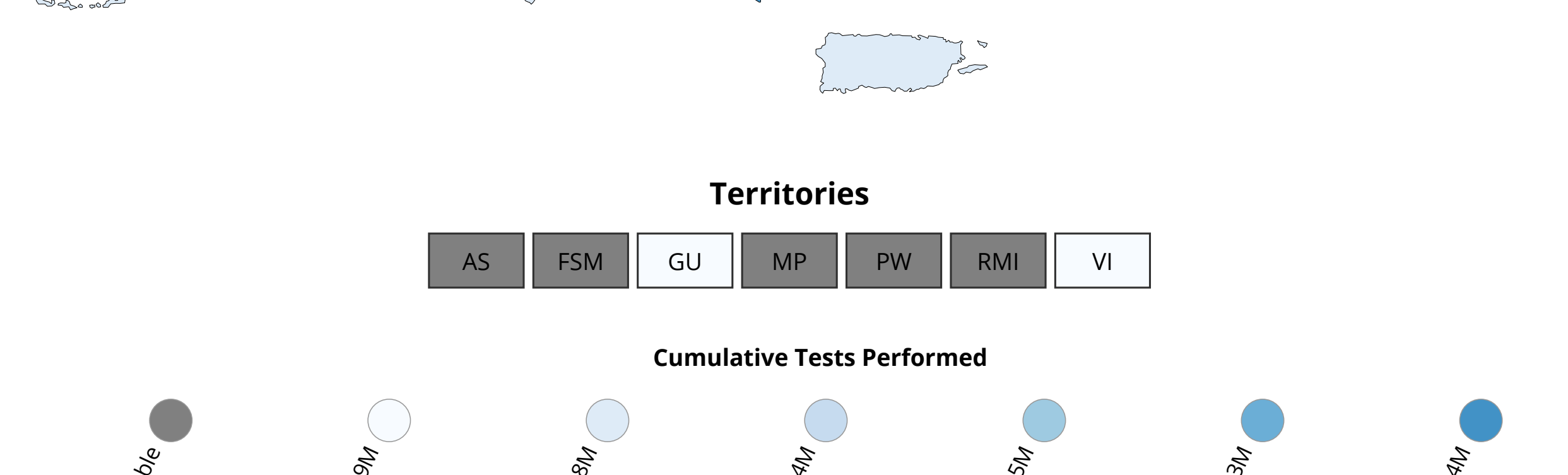
View: Cases Deaths Tests Performed Percent Positive

Time period: Last 7 Days Last 30 Days All Time

Metric: Count Rate per 100,000

This shows the total number of tests performed since the pandemic started.

Cumulative COVID-19 Nucleic Acid Amplification Tests (NAATs) Performed by State/Territory



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Data Downloads and Footnotes

Expand each accordion to view data table and download data

[Data Table for Cumulative COVID-19 Nucleic Acid Amplification Tests \(NAATs\) Performed by State/Territory](#)

CDC | Data as of: Wednesday, September 21, 2022 2:08 PM ET. Posted: Wednesday, September 21, 2022 4:15 PM ET [Download Data](#)

| State | Cumulative Tests Performed | Cumulative Percent Positivity |
|--------------------------------|----------------------------|-------------------------------|
| Alabama | 8,298,073 | 10-14.9% |
| Alaska | 4,284,819 | 5-7.9% |
| American Samoa | N/A | N/A |
| Arizona | 15,561,381 | 10-14.9% |
| Arkansas | 5,096,907 | 10-14.9% |
| California | N/A | N/A |
| Colorado | 17,983,552 | 8-9.9% |
| Connecticut | 15,695,898 | 5-7.9% |
| Delaware | 3,956,519 | 8-9.9% |
| District of Columbia | 5,572,802 | 3-4.9% |
| Federated States of Micronesia | N/A | N/A |
| Florida | 62,982,336 | 10-14.9% |
| Georgia | 18,470,708 | 10-14.9% |
| Guam | 401,171 | 10-14.9% |
| Hawaii | 3,779,503 | N/A |
| Idaho | 3,498,400 | 15-19.9% |
| Illinois | 50,695,128 | 5-7.9% |
| Indiana | 14,626,217 | N/A |
| Iowa | N/A | N/A |
| Kansas | 5,810,736 | 10-14.9% |
| Kentucky | 10,243,036 | 10-14.9% |
| Louisiana | 11,277,621 | 8-9.9% |
| Maine | 4,273,603 | 5-7.9% |
| Maryland | 23,468,958 | 8-9.9% |
| Massachusetts | 45,322,259 | 3-4.9% |
| Michigan | 26,768,589 | 10-14.9% |
| Minnesota | 23,378,015 | 8-9.9% |
| Mississippi | 3,076,458 | 15-19.9% |
| Missouri | 13,051,326 | 10-14.9% |
| Montana | 2,141,811 | 10-14.9% |
| Nebraska | 2,861,940 | 10-14.9% |
| Nevada | N/A | N/A |
| New Hampshire | 4,167,783 | 5-7.9% |
| New Jersey | 29,270,783 | 8-9.9% |
| New Mexico | 6,933,111 | 15-19.9% |
| New York* | 95,356,022 | 5-7.9% |
| New York City* | N/A | N/A |
| North Carolina | 24,365,280 | 10-14.9% |
| North Dakota | 2,425,064 | 5-7.9% |
| Northern Mariana Islands | N/A | N/A |
| Ohio | 23,403,722 | 10-14.9% |
| Oklahoma | 4,475,976 | 20-24.9% |
| Oregon | 9,242,856 | 8-9.9% |
| Palau | N/A | N/A |
| Pennsylvania | 28,266,172 | 10-14.9% |
| Puerto Rico | 3,196,120 | 10-14.9% |
| Republic of Marshall Islands | N/A | N/A |
| Rhode Island | 7,213,416 | 5-7.9% |
| South Carolina | 13,560,965 | 10-14.9% |
| South Dakota | 1,185,394 | 10-14.9% |
| Tennessee | 11,418,001 | 10-14.9% |
| Texas | 53,856,574 | 10-14.9% |
| Utah | 7,655,202 | 10-14.9% |
| Vermont | 4,089,213 | 3-4.9% |
| Virgin Islands | 118,344 | 10-14.9% |
| Virginia | 16,142,329 | 10-14.9% |
| Washington | 17,369,953 | N/A |
| West Virginia | 5,630,370 | 10-14.9% |
| Wisconsin | 18,018,979 | 8-9.9% |
| Wyoming | 1,510,198 | 8-9.9% |

Footnotes

[†]Data will update Monday through Friday as soon as they are reviewed and verified, oftentimes before 8 pm ET. Updates will occur the following day when reporting coincides with a federal holiday. Note: Daily updates (Mon-Fri) might be delayed due to delays in reporting.

- The COVID-19 case and death surveillance data reported by jurisdictions to CDC are subject to change. These data, featuring on [COVID Data Tracker](#) and within [Data.CDC.gov datasets](#), may be incomplete for recent days due to processing and reporting delays. All data are provisional.

Case and Death Data

* Counts for New York City and New York State are shown separately for case and death metrics; data for New York State case and death metrics are for the state excluding data for New York City. Testing metrics for New York State include data for New York City.

The map can be modified to show:

- cases and deaths per 100,000 people in the last 7 days
- total new cases and deaths in the last 7 days
- total cases and deaths since January 21, 2020
- rates for cases (cases/100,000 people) and deaths (deaths/100,000).

The 7-day cumulative rate is calculated as (current day + 6 preceding days) per 100,000 people using the [US Census Bureau Population Estimates Program](#) (2019 Vintage). Rates per 100,000 are calculated as the total cases or deaths per 100,000 people using the [US Census Bureau Population Estimates Program](#) (2019 Vintage).

Zero values for cases/deaths are subject to change due to reduced frequency of state reporting and subsequent adjustments that may occur. The 7-day case/death averages therefore may be artificially low over the weekend before adjustment to these zero values.

Data Sources, References & Notes:

- The case classifications for COVID-19, a nationally notifiable disease, are described in an [updated COVID-19 position statement and case definition](#) issued by the Council of State and Territorial Epidemiologists. However, there is some variation in how jurisdictions implement these case classifications. More information on how CDC collects COVID-19 case surveillance data can be found at [FAQ: COVID-19 Data and Surveillance](#).
- Total cases are based on aggregate counts of COVID-19 cases reported by state and territorial jurisdictions to the Centers for Disease Control and Prevention (CDC) since January 21, 2020, with the exception of persons repatriated to the United States from Wuhan, China, and Japan. All displayed counts include confirmed COVID-19 cases and deaths as reported by U.S. states, U.S. territories, New York City (NYC), and the District of Columbia from the previous day. In accordance with the CSTE definition of COVID-19 cases and deaths, counts for many jurisdictions include both confirmed and probable COVID-19 cases and deaths. COVID-19 case and death data that are not available to CDC are denoted by N/A. For aggregate state-level data, CDC calculates the number of new cases or deaths each day either by using the information provided by states and territorial jurisdictions or by calculating the difference in cumulative counts reported by the state from the day before.
- The number of historical cases and deaths presented on CDC's website reflected the information provided by the states and jurisdictions. Thus, data may reflect either the date the case or death occurred or the date it was recorded in the state. Provision of historical cases and deaths by jurisdictions can influence new case and death numbers and 7-day averages once CDC incorporates these data and assigns the data to the appropriate dates. Historical cases and deaths are still reflected in the cumulative national totals.
- 2018 population estimates are still used for American Samoa, Federated States of Micronesia, Guam, New York City, Northern Mariana Islands, Palau, Republic of Marshall Islands and United States Virgin Islands.

Jurisdictional Reporting Differences

CDC uses various methods to gather aggregate case and death data from states, territories, and other jurisdictions' health departments. Learn more at [About CDC Case and Death COVID-19 Data](#). The methods and frequency of data reporting varies by jurisdiction. The dates used to document case and death incidences also vary.

The dates used by jurisdictions for COVID-19 cases that CDC receives include:

- Event date (the date of specimen collection, confirmed COVID-19 laboratory test result, or clinical diagnosis):** None
- Report date (when the event was reported to the health department or reported by the health department to CDC):** Alabama, American Samoa, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Federated States of Micronesia, Florida, Georgia, Guam, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Louisiana, Maine, Maryland, Minnesota, Montana, Nevada, New Hampshire, New Mexico, New York (excluding NYC), North Dakota, Ohio, Oregon, Palau, Puerto Rico, Republic of Marshall Islands, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, U.S. Virgin Islands, Utah, Virginia, Washington, West Virginia, Wisconsin, Wyoming
- A combination of event date and report date:** Alaska, Arizona, Kentucky, Massachusetts, Michigan, Mississippi, Missouri, Nebraska, New Jersey, New York City, North Carolina, Northern Mariana Islands, Oklahoma, Pennsylvania, Vermont

The dates used by jurisdictions for COVID-19 related deaths that CDC receives include:

- Date of death:** Florida, North Carolina
- Report date (when the event was reported to the health department or reported by the health department to CDC):** American Samoa, Arkansas, California, Colorado, Connecticut, District of Columbia, Federated States of Micronesia, Georgia, Guam, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Louisiana, Maine, Minnesota, Montana, Nevada, New Hampshire, New Jersey, New Mexico (excluding NYC), North Dakota, Ohio, Oregon, Palau, Puerto Rico, Republic of Marshall Islands, Rhode Island, South Carolina, South Dakota, Tennessee, U.S. Virgin Islands, Utah, Virginia, Washington, West Virginia, Wisconsin, Wyoming
- A combination of date of death and report date:** Alabama, Alaska, Arizona, Delaware, Kentucky, Massachusetts, Maryland, Michigan, Mississippi, Missouri, Nebraska, New York City, Northern Mariana Islands, Oklahoma, Texas, Vermont

This information is confirmed and reported to date as of July 19, 2021.

Please note that jurisdictional reporting methods are subject to change. These changes can cause artificial data fluctuations on COVID Data Tracker. For example, when jurisdictions opt to report death data by date of death instead of report date, it may appear that overall deaths from COVID-19 are decreasing. This does not reflect a true decline and data should be interpreted with caution. CDC's overall COVID-19 case and death numbers are validated through a confirmation process with each jurisdiction.

September 28, 2021: Nebraska began submitting both confirmed and probable case and death counts for COVID Data Tracker. Cumulative cases and death counts displayed after 9/27/2021 reflect a large increase because of the addition of historical and recent probable cases and deaths to confirmed totals.

October 25, 2021: CDC stopped spreading aggregate COVID-19 case and death counts evenly over jurisdictions' non-reporting days (i.e., smoothing), which had been done to reflect case and death trends across those days and to improve the quality of data visualizations. This update was made to avoid under-reporting of weekend averages.

March 30, 2022: The increases observed in Rhode Island's COVID-19 death counts on 2/20/2021 and 3/2/2022 are due to data validation and standard maintenance procedures.

Testing Data

- The data represent COVID-19 Nucleic Acid Amplification Test (NAAT) results, which include reverse transcriptase-polymerase chain reaction (RT-PCR) tests from laboratories in the United States, including commercial and reference laboratories, public health laboratories, hospital laboratories, and other testing locations. The data represent laboratory test totals-not individual people-and exclude antibody and antigen tests. The data are provisional and subject to change. National total test counts reflect the latest reported data from states and may not match the sum of the data presented for all jurisdictions. The data may also not include results from all testing sites within a jurisdiction (e.g., point-of-care test sites) and therefore reflect the majority, but not all, COVID-19 NAATs in the United States. Information about how laboratory data are reported to CDC can be found at: <https://www.cdc.gov/coronavirus/2019-ncov/lab/reporting-lab-data.html>
- Percent positivity is one of the metrics used to evaluate the prevalence of COVID-19 in a community during a particular period. It may be used in public health surveillance and to guide policy determinations made by state, local, and territorial public health officials. Percent positivity is calculated by dividing the number of positive nucleic acid amplification tests (NAATs) by the total number of NAATs administered, then multiplying by 100 [(# of positive NAAT tests / total NAAT tests) x 100].
- On September 30th, 2021, CDC moved to presenting the NAAT testing data with a 7-day lag for testing volume and a 3-day lag for percent positivity to better align with other CDC products. This 3-day lag for percent positivity was implemented for all NAAT percent positivity metrics presented on COVID Data Tracker.
- Testing Data update for February 22, 2022: IA has incomplete negative test result data, impacting testing volumes and percent positivity.
- Testing Data update for April 26, 2021: WA has incomplete negative test result data from Sep 1, 2021 - Jan 31, 2022, impacting testing volumes and percent positivity.
- Testing Data update for September 15, 2022: NV sent updated testing data dating back to March 2020 after addressing data cleaning issues.

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Centers for Disease Control and Prevention. COVID Data Tracker. Atlanta, GA: US Department of Health and Human Services, CDC; 2022, September 22. <https://covid.cdc.gov/covid-data-tracker>

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