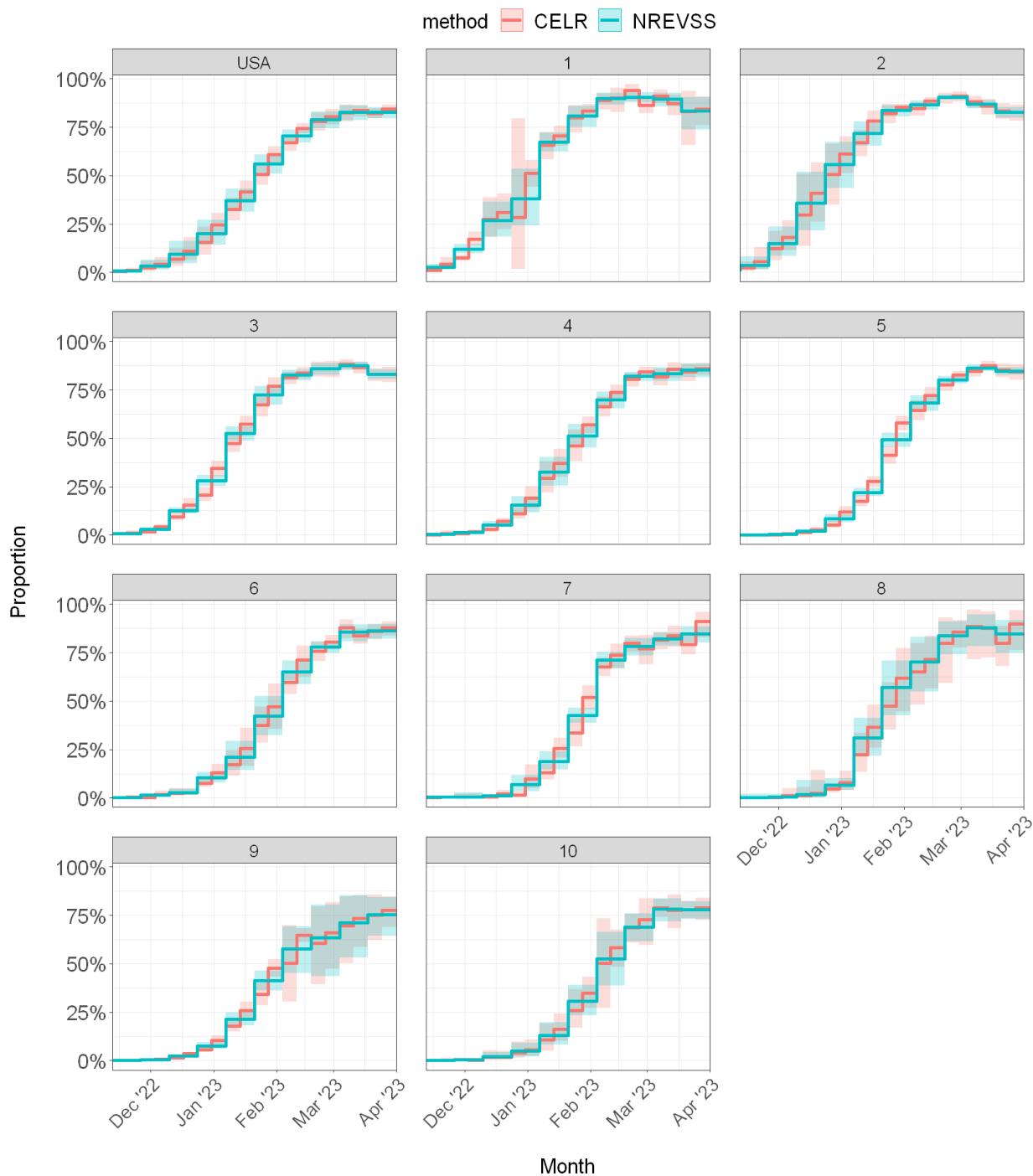


SUPPLEMENTARY FIGURE 3. Comparison of proportions* of Omicron lineage XBB.1.5 with 95% CIs,[†] by U.S. Department of Health and Human Services Regions 1–10,[§] estimated weekly with COVID-19 electronic reporting–derived survey weights versus biweekly with National Respiratory and Enteric Virus Surveillance System–derived weights[¶] — United States, November 6, 2022–April 1, 2023



Abbreviations: CELR = COVID-19 electronic laboratory reporting; NREVSS = National Respiratory and Enteric Virus Surveillance System; NS3 = National SARS-CoV-2 Strain Surveillance program.

* Sequences are reported to CDC through NS3, contract laboratories, public health laboratories, and other U.S. institutions. Variant proportion estimation methods use a complex survey design and statistical weights to account for the probability that a specimen is sequenced. <https://covid.cdc.gov/covid-data-tracker/#variant-proportions>

† 95% CIs for estimates are shown by shaded areas.

§ <https://www.hhs.gov/about/agencies/iea/regional-offices/index.html>

¶ Test positivity data (weekly numbers of positive specimens and total tests administered) from CELR were no longer available following the expiration of the public health emergency declaration (archived here: <https://healthdata.gov/dataset/COVID-19-Diagnostic-Laboratory-Testing-PCR-Testing/j8mb-icvb>). Beginning May 11, 2023, COVID-19 nucleic acid amplification test positivity data by U.S. Department of Health and Human Services Region from NREVSS, which correlated well with CELR data ([Correlations and Timeliness of COVID-19 Surveillance Data Sources and Indicators — United States, October 1, 2020–March 22, 2023 | MMWR \(cdc.gov\)](#)), were used along with the number of positive specimens by state from CELR to estimate survey design weights.