Date: December 11, 2020

To: Acting Mayor Austin Quinn-Davidson

Thru: Heather Harris, Anchorage Health Department Director

From: Janet Johnston, Anchorage Health Department Epidemiologist

Subject: December 11, 2020, COVID-19 Risk Assessment Update for the Municipality of Anchorage

This weekly report shares data available on the State of Alaska and Municipality of Anchorage (MOA) websites for the period of December 3 – December 9, 2020, with some more recent data. Unless otherwise indicated, this data is for cases reported in the MOA.

Key Findings

Municipality of Anchorage COVID-19 metric status for the past week:

- **RED LIGHT** for epidemiology
- **YELLOW LIGHT** for health care capacity
- **RED LIGHT** for public health capacity

With 13 new deaths reported this week, we are starting to see the anticipated effect of increased mortality due to elevated case counts during late October and November. Week-to-week changes in case counts are difficult to interpret this week due to reduced testing and date entry over the Thanksgiving holiday. For the second week in a row, state and national models estimate that the transmission rate (R_o) in Anchorage remains below 1.0. If this trend is real, rather than an artifact of reduced data entry and testing over the holiday weekend, we will see the average new daily case counts plateau or decrease in the coming weeks. While the current 14-day rolling daily average of 85.86 cases per 100,000 population is a decrease from last week, it is still eight-and-a-half times the State's "high alert" level, indicating an extremely high level of virus in the community.

Epidemiology

These metrics consider case counts and COVID-19-related hospitalizations and deaths.

Case Count Trends and Deaths

Key Findings: This measure is **RED.** New cases in Anchorage increased by 17% over last week, a reverse of the decline from Anchorage's peak three weeks ago, although the 14-day average for new cases by onset date decreased 8%.

- **Cumulative cases.** As of December 9, there are 19,549 confirmed cases in the MOA. This includes 19,239 Anchorage residents in- and out-of-state and 310 nonresidents testing positive in Anchorage.

- **Deaths.** There have been 87 deaths among Anchorage residents, an increase of 13 over last week.

Table 1: Case Count Measures

Cases by Date Reported	**November 26 – December 2**	**December 3 - December 9**	**Change**	**Notes**
New cases in the last week	1,630	1,914	284	+17%
New non-resident cases	16	13	-3	One other and 12 unknowns
Average new cases per day, last 7 days	233	273	41	+17%
Cases by Date of Onset	**November 26 – December 2**	**December 3 - December 9**	**Change**	**Notes**
Average new cases per day per 100,000, last 14 days	93.05	85.86	-7	SOA high alert level is 10+; down from mid-November pandemic peak

COVID/PUI Hospitalization Trends

Key Findings: This measure is **RED.** Hospitalizations remain extremely high, with 49 new hospitalized confirmed cases this week. The risk for hospitalization increases significantly with age. We continue to see approximately 15% of cases among Anchorage residents aged 60 or older and more than 5% among residents aged 70 or older. We also continue to see racial disparities in cases, hospitalizations, and deaths.

- **Current hospitalizations**. As of December 9, there were 84 hospitalized COVID-19 cases. The number of hospitalized cases ranged from a low of 84 to a high of 92 last week. As of December 9, there were 10 hospitalized Persons Under Investigation (PUI). The number of hospitalized PUIs ranged from 7 to 11.
- **Age risk**. The age distribution of cases has changed slightly over the last three weeks, with a slight increase in the percentage of cases ages 20 to 29 and a slight decrease in the percentage of cases ages 30 to 39 and 40 to 49. In the last week, people aged 20 to 29 comprised approximately 24% of the cases, but only 16% of the population. Table 2 shows the age distribution for new cases reported in the previous three weeks as well as for cumulative cases, hospitalizations, and deaths. Older age groups are overrepresented in hospitalizations and deaths since the start of the pandemic.
- **Risk by racial category**. Table 3 shows the prevalence of COVID-19 cases, hospitalizations, and deaths by race. People of color, particularly Alaska Natives and Native Hawaiian/Other Pacific Islanders continue to be overrepresented in cases, hospitalizations, and deaths. Alaska Natives decreased again in their proportional number of COVID-19 cases in the last week (12% compared to 16% and 20% the previous weeks). Alaska Natives and American Indians make up just 8% of the total Anchorage population. White people made up just 35% of the cases in the last three weeks and remained below their proportion of the population (62%). Race data is missing for a larger proportion of cases than for hospitalizations and deaths, due in part to our limited capacity to interview all cases. Cases that do not have race data available are excluded from this analysis.

  Data Note: From the beginning of the pandemic, through September 21, 2020, hospitals reported their data through the Alaska State Hospital and Nursing Home Association (ASHNHA) to the CDC. As of September 22, 2020, hospitals report directly to the US Department of Health and Human Services (HHS) TeleTracking System using a template provided by HHS. With this change, ASHNA no longer provides hospital data; therefore, some of the current data may not be directly comparable to previously reported data.

Anchorage Health Department

Table 2 Cases, Hospitalization, and Deaths by Age Category

	Nov 19 - Nov 25			Nov 26 - Dec 2			Dec 3 - Dec 9			All Cases Last Three Weeks		
Age	*Cases*	*Percent*	*Rate**	*Cases*	*Percent*	*Rate**	*Cases*	*Percent*	*Rate**	*Cases*	*Percent*	*Rate**
0 to 9	130	6%	320	112	7%	276	119	6%	293	361	6%	889
10 to 19	244	11%	663	201	12%	546	222	12%	603	667	12%	1,813
20 to 29	416	19%	927	345	21%	769	449	24%	1,000	1,210	21%	2,696
30 to 39	455	21%	1,003	306	19%	675	335	18%	739	1,096	19%	2,416
40 to 49	338	15%	1,019	206	13%	621	227	12%	685	771	13%	2,325
50 to 59	270	12%	736	193	12%	526	242	13%	660	705	12%	1,923
60 to 69	212	10%	739	147	9%	512	189	10%	659	548	10%	1,909
70 to 79	98	4%	604	77	5%	475	72	4%	444	247	4%	1,522
80+	44	2%	788	31	2%	555	46	2%	824	121	2%	2,168
All Cases	2,207	100%	766	1,618	100%	562	1,901	100%	660	5,726	100%	1,988
** Per 100,000*												

	All Cases, All Time			Hospitalizations			Deaths			Anchorage Population		
Age	*Cases*	*Percent*	*Rate**	*Cases*	*Percent*	*Rate**	*Cases*	*Percent*	*Rate**	*Cases*	*Percent*	*Rate**
0 to 9	1,157	6%	2,848	4	1%	10	-	0%	-	40,630	14%	
10 to 19	2,209	11%	6,003	5	1%	14	-	0%	-	36,798	13%	
20 to 29	4,168	22%	9,286	29	6%	65	2	2%	4	44,884	16%	
30 to 39	3,712	19%	8,183	48	9%	106	1	1%	2	45,361	16%	
40 to 49	2,721	14%	8,207	49	10%	148	6	7%	18	33,156	12%	
50 to 59	2,412	13%	6,579	85	17%	232	7	8%	19	36,662	13%	
60 to 69	1,799	9%	6,268	106	21%	369	19	22%	66	28,701	10%	
70 to 79	745	4%	4,591	114	22%	703	27	31%	166	16,226	6%	
80+	336	2%	6,019	70	14%	1,254	25	29%	448	5,582	2%	
All Cases	19,259	100%	6,687	510	100%	177	87	100%	30	288,000	100%	
** Per 100,000*												

Anchorage population source: 2019 1-Year American Community Survey Estimates

Table 3 Cases, Hospitalization, and Deaths by Race Category

	Nov 19 - Nov 25			Nov 26 - Dec 2			Dec 3 - Dec 9			All Cases Last Three Weeks		
Race	*Cases*	*Percent*	*Rate**	*Cases*	*Percent*	*Rate**	*Cases*	*Percent*	*Rate**	*Cases*	*Percent*	*Rate**
American Indian or Alaska Native	294	20%	1,335	202	16%	917	175	12%	795	671	16%	3,047
Asian	72	5%	255	56	4%	198	78	5%	276	206	5%	729
Black or African American	57	4%	342	36	3%	216	49	3%	294	142	3%	851
Native Hawaiian or Other Pacific Islander	71	5%	1,163	49	4%	803	47	3%	770	167	4%	2,735
White	600	41%	331	363	29%	200	493	35%	272	1,456	35%	802
Other Race	230	16%	4,307	386	31%	7,228	397	28%	7,434	1,013	24%	18,970
Two or More Races	145	10%	458	169	13%	534	184	13%	582	498	12%	1,575
All Cases	1,469	100%	504	1,261	100%	433	1,423	100%	488	4,153	100%	1,425
** Per 100,000*												

	All Cases, All Time			Hospitalizations			Deaths			Anchorage Population		
Race	*Cases*	*Percent*	*Rate**	*Cases*	*Percent*	*Rate**	*Cases*	*Percent*	*Rate**	*Cases*	*Percent*	*Rate**
American Indian or Alaska Native	2,812	21%	12,769	76	24%	345	14	25%	64	22,022	8%	
Asian	897	7%	3,173	27	8%	95	6	11%	21	28,273	10%	
Black or African American	671	5%	4,023	24	7%	144	4	7%	24	16,679	6%	
Native Hawaiian or Other Pacific Islander	769	6%	12,596	61	19%	999	9	16%	147	6,105	2%	
White	4,940	37%	2,722	97	30%	53	19	33%	10	181,491	62%	
Other Race	2,034	15%	38,090	19	6%	356	2	4%	37	5,340	2%	
Two or More Races	1,317	10%	4,164	19	6%	60	3	5%	9	31,628	11%	
All Cases	13,440	100%	4,610	323	1	111	57	100%	20	291,538	100%	
** Per 100,000*												
Anchorage population source: 2018 5-Year American Community Survey Estimates												

Thirty percent (30%) of cases, or 5,819 cases, are of an unknown race and are excluded from this analysis.

Health Care Capacity

These metrics measure our ability to provide hospital care in the case of a surge in people sick with COVID-19.

Ability and Capacity to Meet Anticipated Case Surge

Key Findings: This measure is **YELLOW**. The number of available adult ICU beds remains at 5 as of December 9. The transmission rate (R_o) has decreased to approximately 0.95 in Anchorage. Overall, the health care system's ability is sufficient to meet the current demand in hospitalizations; however, increasing hospitalizations and continued high case counts keep us in a watchful and guarded position. As of December 9, there were 12 people on ventilators with COVID-19 in Anchorage.

- **ICU beds**. As of December 9, there were 5 available adult ICU beds out of 72 total staffed adult ICU beds. The number of available adult ICU beds ranged from a low of 5, which occurred on three out of seven days this week, to a high of 18, which occurred once.
- **Non-ICU beds**. As of December 9, there were 92 available adult non-ICU beds out of 523 total staffed adult non-ICU beds.
- **Ventilators**. As of December 9, there were 12 COVID-19 patients on ventilators in Anchorage.
- **Hospital Impact:** As of December 9, 14.8% of all COVID-19 hospitalizations and 11.8% of Emergency Department visits at the three acute care hospitals in Anchorage were related to COVID-19.
- **Reproductive number estimates.** See Table 4 below. These data were pulled on December 10. These numbers are reported using a seven-day lag to be consistent with COVID ActNow's policy of reporting the most recent seven days as preliminary due to fluctuations in data for several days after reporting from states.
- **Projected cases.** Projected daily new cases with no mitigation measures in one week is 228 by December 17, 2020. This is the first time in months that the projected number of cases is a decrease from the current daily new cases. The estimated halving time for new daily COVID-19 cases per day in Anchorage with no mitigation measures is 88.31 days. The daily growth rate has decreased to -0.87%, down from the last report of .73% on December 3, 2020. As noted previously, the current daily growth estimate may be artificially low due to data entry delays and reduced testing associated with the holiday last week.

Table 4: Reproductive Number Estimates

Geography, Source	November 25 (last week's report)	November 25 (updated)	December 2
Anchorage, COVID ActNow	0.89	0.94	0.96
Anchorage, SOA model (in-state residents only)	0.94	0.91	0.94
Alaska, COVID ActNow	1.03	1.05	1.05
Alaska, SOA model (in-state residents only)	1.04	1.04	1.05

Testing Activity

Key Findings: This measure **YELLOW**. This measure remains lower (6.9%) than the peak of 10.6% on November 9. Test positivity has remained between 6.0% and 7.0% from November 23 thru December 3.

This measure reports a seven-day average of tests through December 3, 2020. The State reports test results according to the date when the sample was collected. Therefore, testing numbers for the more recent days are low and increase over time until all test results have been reported. We are changing the time lag for reporting test positivity from four days to seven days to allow for more test results, which will provide a more stable estimate.

Table 5: Percent Positive Measure

Indicator	November 26 (last week's report)	November 26 (updated)	December 3	Benchmark
Percent positive	6.10%	6.14%	6.90%	<5%: **GREEN** 5%-10%: **YELLOW** >10%: **RED**

Ability and Capacity to Test Widely

Key Findings: This measure is **YELLOW.** Test volume increased from previous weeks, but this is expected due to the Thanksgiving holiday. Average test turnaround times are relatively stable since the last report.

Each week's average daily counts are calculated using a five-day lag to allow for sample processing time. Because some tests take more than five days to process, the average daily counts for more recent weeks will increase as more test results are received.

Table 6: Average Daily Test Count Measures

Average Daily Tests	November 15 - 21	November 22 - 28	November 29 - December 5	*White House Target (>2,000 per 100,000 population per week)*
Tests in the week	36,710	25,544	28,140	>5,713
Per 100,000	1,836	1,278	1,407	*>285*

Table 7: Average Turnaround Time Measures

Lab	December 3	December 10	*Change*
Commercial	1.0	1.1	*increase*
Alaska State Public Health Lab	1.0	1.3	*increase*
Facility	0.7	0.4	*decrease*

Personal Protective Equipment Availability

Key Findings: This measure remains **YELLOW**. The supply chain remains disrupted, with a relatively small number of providers requiring PPE from the EOC. The EOC encourages providers to stay in contact with their normal PPE suppliers as more items become available through the normal supply chain. This light will turn green when supply chain access to PPE returns to normal.

- **Access to PPE.** Most health care and first responders can achieve sufficient PPE, but not through normal channels.
- **Requests.** The EOC continues to receive and fill requests from health care providers within the Municipality. The EOC issued 1,483 PPE items to 10 agencies during the week ending December 4, 2020. This was slightly more than the 1,265 PPE items issued the week before but less than the average of 9,996 PPE items issued per week since the start of the pandemic. Masks and gowns were the items most in demand this week.

Public Health Capacity

These metrics measure AHD's capacity to track and follow the positive cases and their contacts, ensuring as many people as possible self-isolate or quarantine depending on the situation, and testing symptomatic contacts. AHD is fully transitioned to using the CommCare system for case interviews and contact tracing.

Track and Follow New Cases and Contacts

Key Findings: This measure is **RED.** With increasing case counts, the capacity to interview cases promptly and monitor high-risk contacts continues to be stretched thin.

- **Positive case outreach.** The MOA Public Health Professional's goal is to interview or leave a message for each new case within 24 hours of receiving the case assignment. However, with increasing cases and processing times, many cases are being closed without an interview because they cannot be reached before the end of their infectious period.
- **Interview completion.** Of the 1,814 Anchorage cases opened in CommCare between December 2 and December 8, 1,068 (58.9%) had completed an interview by the end of the day on December 9. Most interviews (90.8%) were completed within one day of the case being opened in CommCare, and another 6.9% were completed within two days. The remaining 24 cases were completed between three and five days after the case was opened. The median time from specimen collection to interview completion was 5 days, with 85.9% of interviews completed with 7 days of specimen collection.
- **New contacts.** There were 122 contacts newly registered into CommCare between December 2 and December 8 who were still awaiting investigation as of December 10.

Transmission Trends

This section summarizes trends in infection and transmission found in CommCare or through feedback from the AHD COVID-19 response team.

- **Exposure source.** We continue to see cases in congregate residential settings and among employees at a variety of businesses. Among the 396 cases (21.8%) with exposure type specified, the most commonly reported exposure types were household (56%), social events (11%), and employment (10%). Of the 1,814 cases opened in CommCare between December 2 and December 8, 867 (47.8%) provided information about occupation. Occupation was then categorized into the pre-specified list summarized in Table 8, with the largest group (46.9%) falling into the Other category. Given the high level of community spread, this does not mean that these cases acquired COVID-19 at work. With a large number of cases in the community and limited capacity for conducting case interviews, it is difficult to identify where exactly transmission is occurring.

Table 8: Occupation Among Interviewed Cases

Occupation	Count	Percent
Other	407	46.9%
Student	123	14.2%
Unemployed	104	12.0%
Health Care Worker	89	10.3%
Retired	81	9.3%
Self Employed	29	3.3%
Food Service	19	2.2%
City	6	0.7%
Child Care	6	0.7%
Correctional Worker	3	0.3%
Total	**867**	**100.0%**

- **At-risk populations.** As of December 10, 438 cases have been identified within homeless shelters, supportive housing locations, and unsheltered homeless individuals. This is an increase of 6 cases since our report last week. Twenty-five cases have been hospitalized since the beginning of the outbreak, and four have died. There were no new hospitalizations or deaths reported last week. Regular screening continues on an ongoing basis at these locations with confirmed cases, and close contacts are moved into isolation and quarantine as soon as cases are confirmed.

Public Health Advisory

To prevent unneeded serious illness and deaths, AHD urges everyone to do the following:

- **Stay home** except to get food, to go to work, or to recreate outdoors.
    - Where possible, use delivery options and work from home.
    - Trails and parks are ideal for exercise while distanced from others.
- If you feel sick, **stay home** except to get tested.
- **Wear a mask** and **stay at least 6 feet from others** in public.
    - Masks are recommended for anyone over the age of two.
    - Masks are recommended during all indoor exercise or sports.
    - Masks are recommended during all outdoor exercise or sports unless athletes generally can maintain ten (10) feet of physical distancing at all times.
- Protect your friends and family by avoiding gatherings, especially indoors. **Gatherings are not safe**.
    - Incorporate CDC holiday gathering recommendations into your planning.
    - Reconsider any travel plans for the holiday season.
- **Protect the vulnerable** by avoiding contact with those at higher risk of severe illness, such as older adults or those with certain medical conditions.
    - Check-in on older and medically fragile family members and ensure they can get food and other essentials without leaving the house.
    - If you work among older or medically fragile individuals, keep your number of contacts small and get tested regularly.
    - Stores are encouraged to add more curbside pick-up options or special hours for older and medically fragile patrons.

Policy Recommendations

- **Change in CDC Quarantine Guidelines.** The new guidance provides acceptable alternatives for people who may have been exposed to COVID-19 to shorten quarantine.
    - Quarantine can end after Day 10 (on Day 11) without testing and if no symptoms have been reported.
    - If sufficient testing materials are available, quarantine can end after Day 7 (on Day 8) if the person has a negative COVID test and if no symptoms were reporting during daily monitoring. The test specimen may be collected starting on Day 6, but the quarantined individual must stay in quarantine thru Day 7 or until receiving the negative test result, whichever is later.
    - In either case, quarantined individuals are to continue to monitor for symptoms for 14 days and self-isolate and get tested if they develop symptoms.