

Summary

The Texas Department of State Health Services (DSHS) is working closely with the Centers for Disease Control and Prevention (CDC) in monitoring Coronavirus Disease 2019 (COVID-19) which is causing an outbreak of respiratory illness worldwide. Data from multiple sources is being utilized to monitor the situation in Texas.

Between March 6, 2020 and the current report week, **8,498,690 confirmed and probable cases** of COVID-19 were reported in Texas. So far for 2023, there have been **307,889 confirmed and probable cases** of COVID-19 reported in Texas.

COVID-19 cases reported in Texas decreased by **12.3%** in **Week 18** compared to the previous week, Week 17.

COVID-19-associated deaths increased by **8.0%** in **Week 15** when compared to the previous week. COVID-19-associated deaths are shown by week during which the death occurred, up to two weeks prior to current report week because death certificates are required to be filed within 10 days of date of death. Death data in this report exclude the most recent two MMWR weeks due to lag time inherent in death registration and reporting processes.

Table 1: Summary of COVID-19 Cases, COVID-19-Associated Fatalities, and Hospitalizations for the Current Reporting Week*

Texas Surveillance Component	Change from Previous Week	Current Week	Previous Week
New COVID-19 Cases (Probable and Confirmed)**	▼ 883	6,278	7,161
New COVID-19 Confirmed Cases**	▼ 817	3,122	3,939
New COVID-19 Probable Cases**	▼ 66	3,156	3,222
Total COVID-19 Cases (Probable and Confirmed)**	▲ 6,278	8,498,690	8,492,412
Total COVID-19 Confirmed Cases**	▲ 3,122	6,671,922	6,668,800
Total COVID-19 Probable Cases**	▲ 3,156	1,826,768	1,823,612
Newly Reported COVID-19-Associated Fatalities	▲ 4	54	50
Hospitalized COVID-19 Cases (day of report)	▼ 18	854	872
Hospitalized COVID-19 Cases (rolling 7-day average)	▼ 55	873	928

▲ = increase and ▼ = decrease

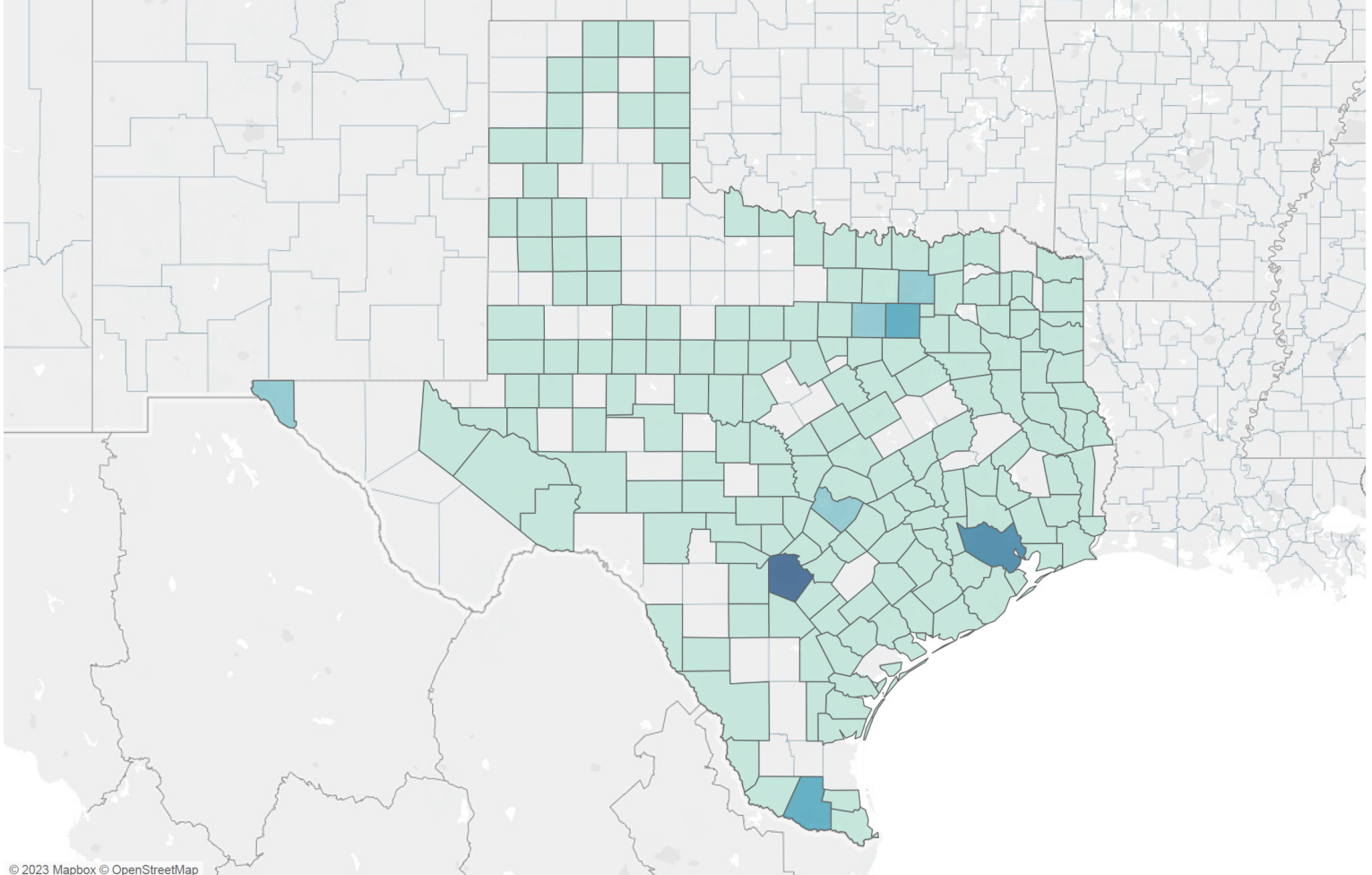
*Numbers and percentages might vary from the previous COVID-19 report due to additional data becoming available for non-finalized surveillance years. COVID-19 case data for 2020-2021 are finalized. All other data are provisional and subject to change.

**Cases for the current week include both cases reported in the last week and may include newly reported cases from prior weeks.

Weekly COVID-19 Case Map

A map of the weekly confirmed and probable COVID-19 cases by county can be viewed on the next page.

Figure 1: Texas Map Displaying COVID-19 Case Counts by County for the Current Reporting Week.



Confirmed and Probable COVID-19 Cases

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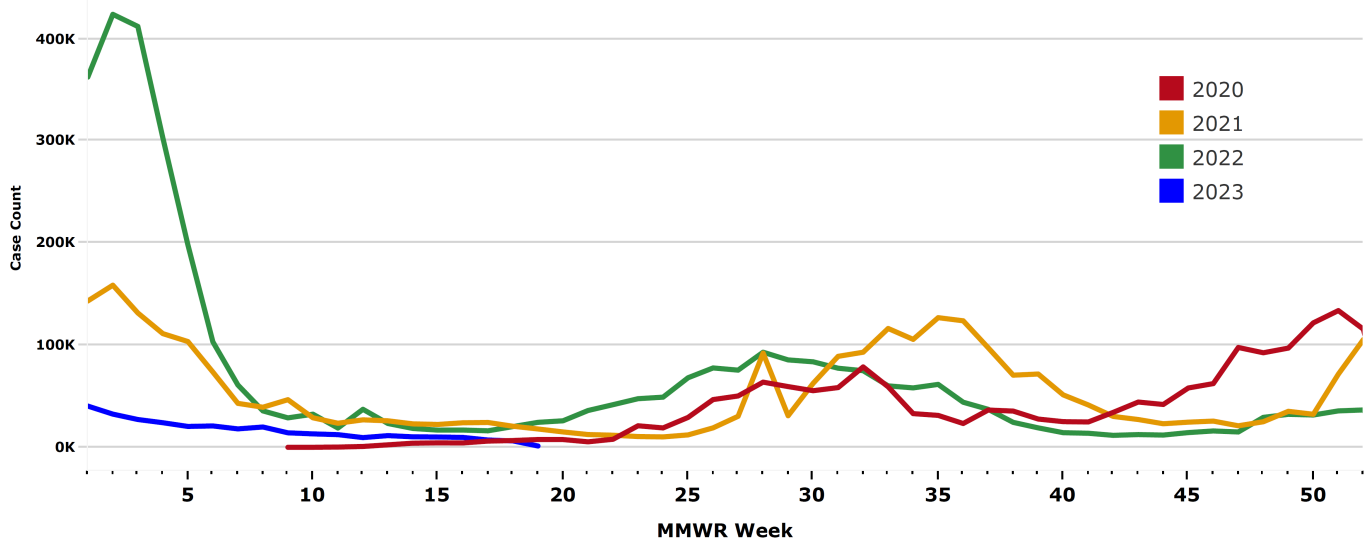
Note: Texas counties that are not highlighted in a shade of teal have a zero count.

COVID-19 Case Map Notes

Case counts and case rates are shown in the interactive version of this map on the COVID-19 Data webpage. COVID-19 case rates are calculated per 100,000 people for the 7-day period ending on the date shown. We calculate this by dividing the 7-day total by the area population and multiplying by 100,000. This makes it easier to compare cases across areas of different population size.

The population used is the 2020 population estimate from the Texas Demographer. There may be COVID-19 cases with incomplete addresses reported to Texas DSHS which are not included in the COVID-19 Case Map by County, Figure 1.

Figure 2: Number of Newly Reported Cases of COVID-19 by MMWR Week, Texas, 2020 to Current Report Week (N = 8,489,690)



Note: The COVID-19 pandemic reported the first locally acquired SARS-CoV-2 case in Texas during the MMWR Week 10 in 2020. Prior to MMWR Week 10 in 2020 there were no locally acquired cases of SARS-CoV-2 infection reported in Texas residents. Case counts are reported based on all MMWR weeks as they are provided.

Laboratory Results

Providers throughout Texas submit specimens for SARS CoV-2 testing (PCR, Antigen) to Texas laboratories which are reported to the National Electronic Disease Surveillance System (NEDSS). Statewide, COVID-19 laboratory reporting decreased in **Week 18**.

Table 2: Summary of All COVID-19 Confirmatory PCR Tests Reported for the Current Week Versus the Previous Week

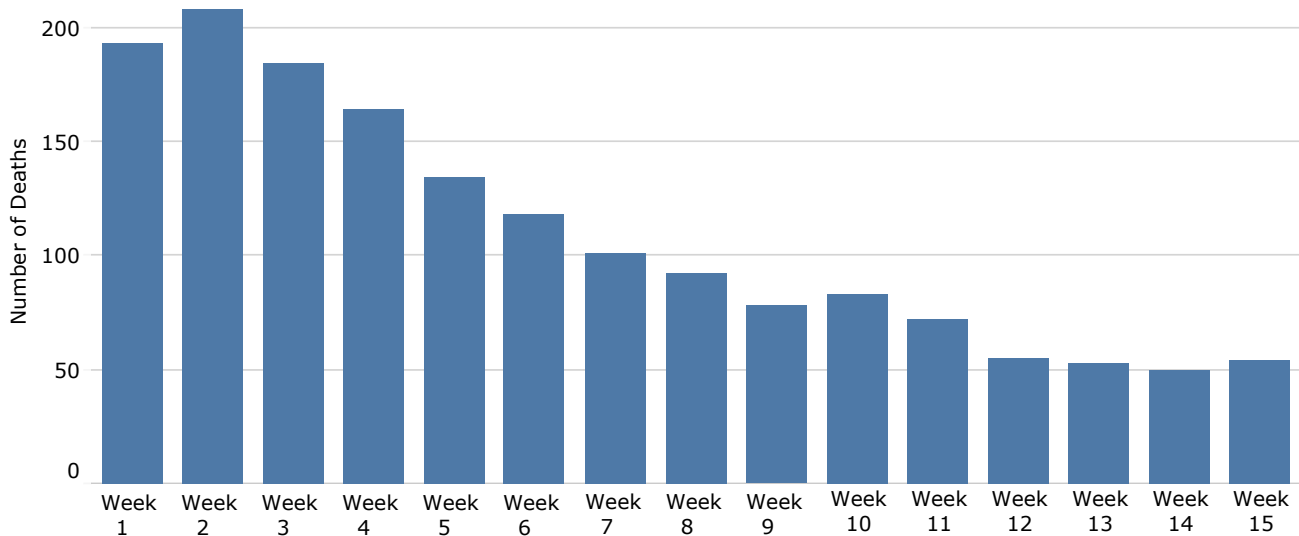
PCR Tests Reported	Current Week	Previous Week	Change from Previous Week
PCR tests	52,862	56,785	decrease of 3,923
per 100,000 population	173.1	185.9	

COVID-19 Mortality

COVID-19 mortality data in this report are obtained from death certificates of Texas residents whose underlying or contributing cause(s) of death is reported as COVID-19. Reporting of deaths typically occurs up to two weeks following date of death. Data is preliminary until data close out occurs.

As of MMWR Week 15, **1,688 COVID-19-associated deaths** were reported in 2023 from death certificates of Texas residents. There were **54 COVID-19-associated deaths** reported in Week 15. In total from March 28, 2020 through May 02, 2023, **92,334 COVID-19-associated deaths** have been identified from death certificates of Texas residents.

Figure 3: COVID-19-Associated Deaths Identified from Vital Statistics Data by MMWR Week of Death, MMWR Year 2023 Week 15



Note: Counts shown reflect the available death certificate data. This will be updated as death certificate data becomes available. Data exclude the most recent two MMWR weeks due to lag time inherent in death registration and reporting processes. Death certificate data should be considered provisional and subject to change as additional information becomes available.

Table 3: COVID-19-Associated Mortality Rate by Age for the Current Year

Age Group	Total Number of COVID-19 Deaths (2023)*	Total Mortality Rate (Per 100,000) (2023)**	MMWR Week Total Number of COVID-19 Deaths*	MMWR Week Mortality Rate (per 100,000)**
< 1 years	<10	<10	<10	<10
1-9 years	<10	<10	<10	<10
10-19 years	<10	<10	<10	<10
20-29 years	<10	<10	<10	<10
30-39 years	<10	<10	<10	<10
40-49 years	31	0.79	<10	<10
50-59 years	72	2.02	<10	<10
60-64 years	80	4.73	<10	<10
65-69 years	111	7.55	<10	<10
70-74 years	159	13.86	<10	<10
75-79 years	193	23.20	<10	<10
80+ years	841	87.50	27	2.81
Unknown	183	N/A	<10	<10
Overall	1,688	5.41	54	0.17

* If the cell number of deaths is less than 10, the number or percent of COVID-19 deaths is suppressed and <10 or n/a is written in the cell.

** The population estimates from the Texas Demographer are used for population rates. Data is provisional and subject to change, errors, and duplicates.



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Table 4: COVID-19-Associated Mortality Rate by Race/Ethnicity for the Current Year

Race/Ethnicity	Total Number of COVID-19 Deaths (2023)*	Total Mortality Rate (per 100,000)** (2023)	MMWR Report Week Number of COVID-19 Deaths*	MMWR Report Week Mortality Rate (per 100,000)**
White	1,112	9.01	37	0.30
Black	128	3.39	<10	<10
Hispanic	392	3.12	13	0.10
Asian	37	2.11	<10	<10
Other Race	18	2.48	<10	<10
Unknown Race/Ethnicity	<10	<10	<10	<10
Overall	1,688	5.41	54	0.17

* If the cell number of deaths is less than 10, the number or percent of COVID-19 deaths is suppressed and <10 or n/a is written in the cell.

** The population estimates from the Texas Demographer are used for population rates. Data is provisional and subject to change, errors, and duplicates.

Table 5: COVID-19-Associated Mortality Rate by PHR for the Current Year

Public Health Region	Total Number of COVID-19 Deaths (2023)*	Total Mortality Rate (per 100,000)** (2023)	MMWR Report Week Number of COVID-19 Deaths*	MMWR Report Week Mortality Rate (per 100,000)**
PHR 1	70	7.62	<10	<10
PHR 2/3	533	5.86	21	0.23
PHR 4/5N	136	8.74	<10	<10
PHR 6/5S	339	4.02	<10	<10
PHR 7	174	4.58	<10	<10
PHR 8	183	5.57	<10	<10
PHR 9/10	100	5.92	<10	<10
PHR 11	151	6.37	<10	<10
Overall	1,688	5.41	54	0.17

* If the cell number of deaths is less than 10, the number or percent of COVID-19 deaths is suppressed and <10 or n/a is written in the cell.

** The population estimates from the Texas Demographer are used for population rates. Data is provisional and subject to change, errors, and duplicates.

Table 6: COVID-19-Associated Mortality Rate by Sex for the Current Year

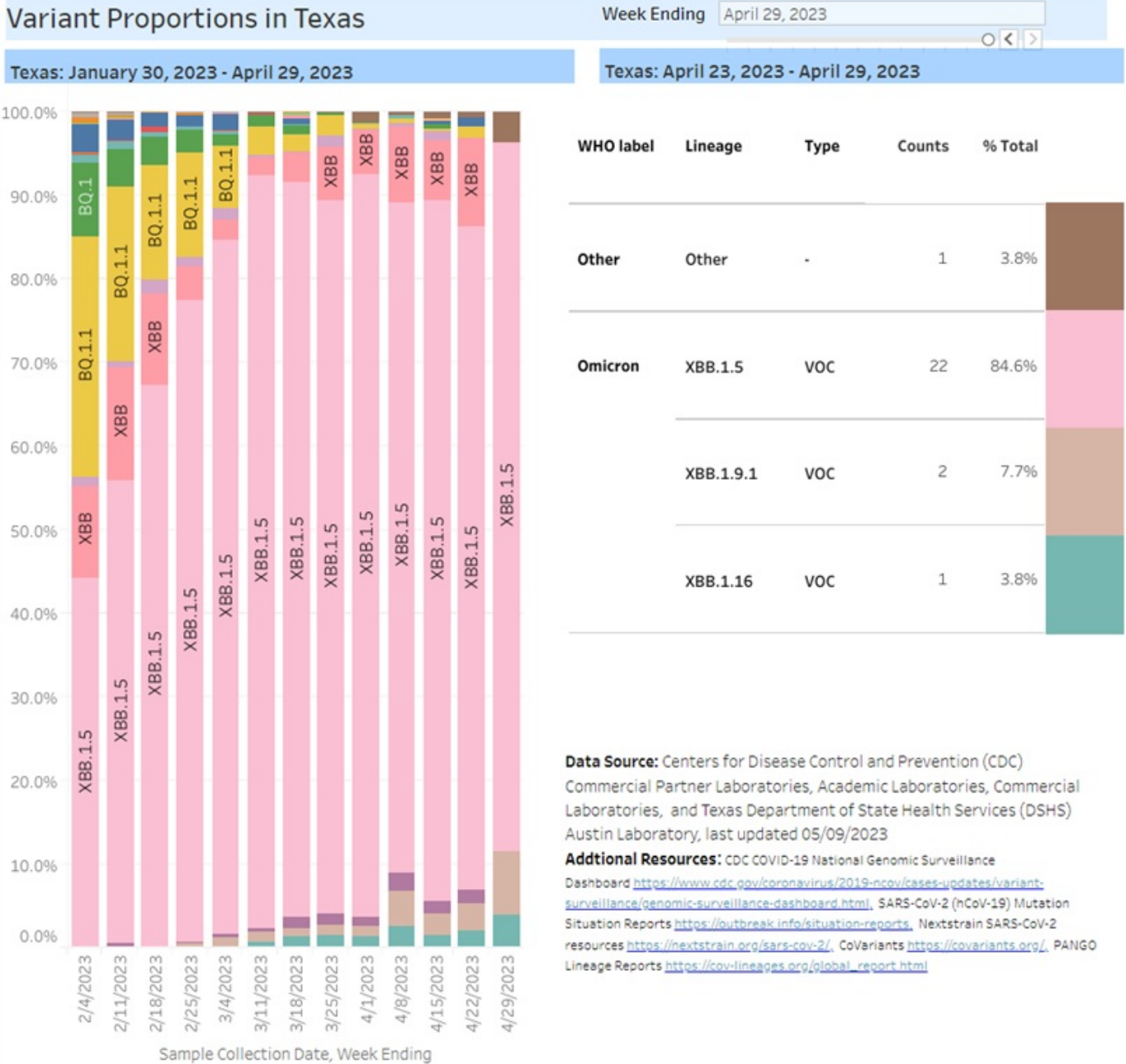
Sex	Total Number of COVID-19 Deaths (2023)*	Total Mortality Rate (per 100,000)** (2023)	MMWR Report Week Number of COVID-19 Deaths*	MMWR Report Week Mortality Rate (per 100,000)**
Female	737	4.70	23	0.15
Male	951	6.14	31	0.20
Overall	1,688	5.41	54	0.17

* If the cell number of deaths is less than 10, the number or percent of COVID-19 deaths is suppressed and <10 or n/a is written in the cell.

** The population estimates from the Texas Demographer are used for population rates. Data is provisional and subject to change, errors, and duplicates.

COVID-19 Sequencing and Variant Surveillance

An interactive version of the DSHS COVID-19 variant dashboard, updated weekly, can be viewed at: <https://www.dshs.texas.gov/covid-19-coronavirus-disease-2019/texas-covid-19-data/variants-genomic-surveillance-sars>



Note: Further information about Figure 5 data sources, limitations and context is described in the Texas COVID-19 Surveillance Components and Measures Section of this report.



Texas COVID-19 Surveillance Components and Measures

Provisional Data

Provisional data may not be complete. More data may be coming in to complete the data set, and DSHS and others have not completed quality checks of the information. Provisional data become final once the data set is complete and quality checks are finished. That process often takes several months.

COVID-19 Case Reporting

Investigations are performed on all cases of Coronavirus Disease 2019 (COVID-19). *This condition is reportable by law in Texas.*

Confirmed Case

A person who has tested positive through a molecular test that looks for the virus's genetic material. Texas uses the confirmed case definition adopted by the Council of State and Territorial Epidemiologists (CSTE). See the DSHS Epidemiologic Case Criteria Guide for full case definition.

Probable Case

A person who has tested positive through an antigen test. Texas uses the probable case definition adopted by the Council of State and Territorial Epidemiologists (CSTE).

New Confirmed Cases, New Probable Cases or Newly Reported Fatalities

Cases or fatalities reported for the first time on the DSHS COVID-19 report that day.

Mortality

COVID-19-associated deaths in Texas Residents.

Deaths associated with COVID-19 are reported to health departments in Texas. Deaths suspected of being caused by a reportable disease are required to be reported in accordance with Texas Health and Safety Code §81.045. Death certificates must be filed with Texas DSHS within 14 days of the date of death but may be amended at a later date. COVID-19 associated deaths are deaths for which COVID-19 is listed as a cause of death on the death certificate. A medical certifier, usually a doctor, determines the cause(s) of death. DSHS does not include deaths of people who had COVID-19 but died of an unrelated cause. Fatalities are reported by where the person lived as listed on the death certificate. Fatality data may include both confirmed and probable cases. Data is considered provisional and subject to update as additional information becomes available until annual data has been finalized.

Laboratory

Positive SARS-CoV-2 laboratory results are reported to the Texas DSHS National Electronic Disease Surveillance System (NEDSS) by laboratories or local health departments. Positive SARS-CoV-2 laboratory results, including antigen, antibody and molecular tests performed under CLIA oversight must be reported to Texas DSHS in accordance with Texas Health and Safety Code §81.045. This number does not include tests with results pending. Testing data is considered provisional and subject to update as additional information becomes available until annual data has been finalized.

Genomic Surveillance

Variants of SARS-CoV-2, the virus that causes COVID-19, are expected to continue to emerge, a natural process that occurs as viruses spread. Some variants will disappear, and others will continue to spread and may overtake previous variants. For example, the ancestral strain of the virus that caused the first Texas COVID-19 cases in early 2020 is no longer being detected. It was displaced by the Alpha variant, followed by the Delta variant and Omicron variants and may continue to be replaced by other emerging variants.

The Texas SARS-CoV-2 genomic sequencing data includes data provided by the CDC's commercial partner laboratories as a part of the national SARS-CoV-2 genomic surveillance program, sequencing conducted at academic and commercial laboratories, and Texas Department of State Health Services Austin Laboratory's genomic sequencing. The programs sequence hundreds of COVID-19 cases each week to monitor the spread of variants in Texas. This information helps scientists and public health professionals understand how the virus spreads and changes over time. It also helps researchers know whether existing COVID-19 tests, treatments, and vaccines will continue to work against emerging variants.

This report shows data on variants of concern (VOC), variants of interest (VOI) and variants being monitored (VBM) with all other variants grouped together. More information on variant classification is available on the CDC website at

<https://www.cdc.gov/coronavirus/2019-ncov/variants/variant-info.html>

Lab Confirmed COVID-19 Patients in Texas Hospitals

The total number of patients in Texas hospitals who have tested positive for COVID-19.



Appendix 1: Data Sources and Limitations

Data sources for this report are Texas DSHS Vital Statistics, COVID-19-Associated Fatalities, and National Electronic Disease Surveillance System (NEDSS), each of which have associated limitations. The use of multiple data sources can lead to overestimation through duplication of case reports within each system, and between systems. COVID-19 case investigation data entered into NEDSS is dependent upon accurate user entry of case information into the system and resources available for public health follow up.

Limitations

Vital Statistics

- Delay in reporting of COVID-19-associated fatalities of 10-14 days on average from date of death.

NEDSS

- Cases created off electronic laboratory report (ELR) feed may be missing information, such as patient race or ethnicity, or complete address
- The completeness of case investigations is dependent on the information available to case investigators in the initial report, the resources available to local health departments for case follow up, and the availability of medical records and the information provided by the case.
- Case count data from 2020 and 2021 is considered finalized. Data from 2022 and 2023 are considered provisional and subject to update until data are finalized.

Note: DSHS completed the process of transferring case investigations from the COVID Case Investigation System (CCIS) to the Texas National Electronic Disease Surveillance System (NEDSS) in November 2021. Deduplication between cases entered into CCIS and NEDSS has taken place and the transition was completed as of 11/15/2021. NEDSS data cited in this report is provisional and subject to the limitations of resources available for case investigation, the participation of the public in case investigation, and the process of transition from CCIS to NEDSS. Deduplication of newly reported COVID-19 laboratory results in NEDSS occurs automatically prior to data ingestion into NEDSS preventing generation of duplicate case reports.

Variant Dashboard Limitations

The data shown in this report is collected by the CDC's commercial partner laboratories as a part of the national SARS-CoV-2 genomic surveillance program, commercial laboratories, academic laboratories and Texas Department of State Health Services Austin Laboratory's genomic sequencing. Because samples collected by CDC National SARS-CoV-2 Strain Surveillance (NS3) partner laboratories are intended to be representative of Texas' proportion of the national population and estimate the prevalence of variants statewide, this data is not intended to count every variant case present in Texas. It does not necessarily represent geographic trends within the state of Texas. Some areas may be oversampled due to high numbers of participating laboratories.

Local health officials may have more specific information regarding variant cases in their jurisdictions. No sample weighting is applied to this data. Sequencing results included in this data set take an average of 11 days from initial sample collection to report date. DSHS will post results after two weeks so that there will be enough results to represent a reliable estimate. The data visualization on the DSHS website is updated weekly on Tuesdays before 5 pm. Data is displayed by week of sample collection. Data should be considered preliminary and subject to change.

Appendix 2: Data Cleaning Procedures

This report is generated on a weekly cycle, with the report prepared on Thursdays covering a one-week period beginning and ending the previous MMWR week.

Deduplication occurs routinely within NEDSS and ELR imports are prevented from creating duplicate case investigation and patient records if records matching first name, last name, date of birth and patient sex already exist. Data cleaning for this report included removal of out of state cases, matching residency based on patient address and county assignment in NEDSS. County of residency is determined based on zip code of residence, followed by provider zip code if residence zip code is unavailable. If both provider and residence zip codes are unavailable, ordering facility zip code is used. Out of bounds dates for specimen collection pre-January 1, 2020 and post report date are recoded as blank.

For the ELR Lab data file, the following cleaning procedures were used; out of state data was removed, residency is determined based on zip code of residence, followed by provider zip code if residence zip code is unavailable. If both provider and residence zip codes are unavailable, ordering facility zip code is used. Records are deduplicated by testing lab accession number, specimen collection date, ordered test code and reporting facility CLIA.

Appendix 3: MMWR Weeks

For a full list of MMWR Week dates please visit:

<https://ndc.services.cdc.gov/wp-content/uploads/MMWR-Week-Log-2022-2023.pdf>