COVID-19 Nevada Statistical Data
For additional statistics visit: Nevada Health Response

Total Tests (molecular)
727,283
+ 9,977

Confirmed Cases
58,650
+ 602

Deaths
1,030
+34

Tests per 1,000 per week*
14.6

Daily Positivity Rate*
14.2%

Cumulative Positivity Rate*
10.5%

Current Hospitalizations

<table>
<thead>
<tr>
<th>Confirmed</th>
<th>Suspected</th>
</tr>
</thead>
<tbody>
<tr>
<td>763</td>
<td>219</td>
</tr>
<tr>
<td>-30</td>
<td>+14</td>
</tr>
</tbody>
</table>

Intensive Care Unit (ICU)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>260</td>
<td></td>
</tr>
<tr>
<td>-8</td>
<td></td>
</tr>
</tbody>
</table>

County | Population | Tests | People Tested | Cumulative Positivity Rate | Total Cases | Case Rate per 100,000 | Deaths | Death Rate per 100,000 |
<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Carson City</td>
<td>56,546</td>
<td>14,196</td>
<td>11,759</td>
<td>3.6%</td>
<td>371</td>
<td>656.1</td>
<td>8</td>
<td>14.1</td>
</tr>
<tr>
<td>Churchill</td>
<td>25,676</td>
<td>4,870</td>
<td>4,061</td>
<td>2.4%</td>
<td>82</td>
<td>316.9</td>
<td>1</td>
<td>3.9</td>
</tr>
<tr>
<td>Clark</td>
<td>2,318,174</td>
<td>561,479</td>
<td>402,811</td>
<td>11.7%</td>
<td>50,569</td>
<td>2,181.4</td>
<td>869</td>
<td>37.5</td>
</tr>
<tr>
<td>Douglas</td>
<td>49,695</td>
<td>4,605</td>
<td>3,990</td>
<td>3.8%</td>
<td>209</td>
<td>420.6</td>
<td>1</td>
<td>0.2</td>
</tr>
<tr>
<td>Ely</td>
<td>54,985</td>
<td>8,714</td>
<td>7,672</td>
<td>6.9%</td>
<td>579</td>
<td>1,053.0</td>
<td>3</td>
<td>5.5</td>
</tr>
<tr>
<td>Esmeralda</td>
<td>974</td>
<td>99</td>
<td>73</td>
<td>0.0%</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>Eureka</td>
<td>1,566</td>
<td>181</td>
<td>104</td>
<td>2.2%</td>
<td>4</td>
<td>202.5</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>Humboldt</td>
<td>17,062</td>
<td>2,461</td>
<td>2,069</td>
<td>9.4%</td>
<td>104</td>
<td>609.5</td>
<td>4</td>
<td>23.4</td>
</tr>
<tr>
<td>Lander</td>
<td>5,596</td>
<td>1,223</td>
<td>1,027</td>
<td>7.6%</td>
<td>52</td>
<td>867.2</td>
<td>1</td>
<td>16.7</td>
</tr>
<tr>
<td>Lincoln</td>
<td>5,200</td>
<td>343</td>
<td>289</td>
<td>2.6%</td>
<td>5</td>
<td>96.2</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>Lyon</td>
<td>57,987</td>
<td>4,938</td>
<td>3,636</td>
<td>4.3%</td>
<td>250</td>
<td>431.1</td>
<td>6</td>
<td>10.3</td>
</tr>
<tr>
<td>Mineral</td>
<td>4,551</td>
<td>1,315</td>
<td>909</td>
<td>1.4%</td>
<td>11</td>
<td>241.2</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>Nye</td>
<td>48,864</td>
<td>5,722</td>
<td>4,074</td>
<td>10.7%</td>
<td>416</td>
<td>851.3</td>
<td>12</td>
<td>24.6</td>
</tr>
<tr>
<td>Pershing</td>
<td>6,962</td>
<td>3,237</td>
<td>2,693</td>
<td>0.9%</td>
<td>14</td>
<td>203.1</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>Storey</td>
<td>4,465</td>
<td>107</td>
<td>98</td>
<td>0.9%</td>
<td>6</td>
<td>134.4</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>Washoe</td>
<td>478,155</td>
<td>98,337</td>
<td>77,973</td>
<td>7.3%</td>
<td>5,962</td>
<td>1,244.8</td>
<td>124</td>
<td>25.9</td>
</tr>
<tr>
<td>White Pine</td>
<td>10,586</td>
<td>4,432</td>
<td>2,793</td>
<td>0.8%</td>
<td>16</td>
<td>151.1</td>
<td>1</td>
<td>9.4</td>
</tr>
</tbody>
</table>

Test Positivity Rate (cumulative), 7-Day Moving Average and WHO Goal by Specimen Collection Date

Percent Change

<table>
<thead>
<tr>
<th>Date</th>
<th>Test Positivity Rate (cumulative)</th>
<th>Test Positivity Percent Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>08/11</td>
<td>10.5%</td>
<td>0.5%</td>
</tr>
<tr>
<td>08/10</td>
<td>10.5%</td>
<td>0.4%</td>
</tr>
<tr>
<td>08/09</td>
<td>10.5%</td>
<td>0.3%</td>
</tr>
<tr>
<td>08/08</td>
<td>10.5%</td>
<td>0.2%</td>
</tr>
<tr>
<td>08/07</td>
<td>10.5%</td>
<td>0.1%</td>
</tr>
<tr>
<td>08/06</td>
<td>10.5%</td>
<td>0.0%</td>
</tr>
<tr>
<td>08/05</td>
<td>10.5%</td>
<td>-0.1%</td>
</tr>
<tr>
<td>08/04</td>
<td>10.5%</td>
<td>-0.2%</td>
</tr>
<tr>
<td>08/03</td>
<td>10.5%</td>
<td>-0.3%</td>
</tr>
<tr>
<td>08/02</td>
<td>10.5%</td>
<td>-0.4%</td>
</tr>
<tr>
<td>08/01</td>
<td>10.5%</td>
<td>-0.5%</td>
</tr>
<tr>
<td>07/31</td>
<td>10.5%</td>
<td>-0.6%</td>
</tr>
<tr>
<td>07/30</td>
<td>10.5%</td>
<td>-0.7%</td>
</tr>
<tr>
<td>07/29</td>
<td>10.5%</td>
<td>-0.8%</td>
</tr>
<tr>
<td>07/28</td>
<td>10.5%</td>
<td>-0.9%</td>
</tr>
<tr>
<td>07/27</td>
<td>10.5%</td>
<td>-1.0%</td>
</tr>
<tr>
<td>07/26</td>
<td>10.5%</td>
<td>-1.1%</td>
</tr>
<tr>
<td>07/25</td>
<td>10.5%</td>
<td>-1.2%</td>
</tr>
<tr>
<td>07/24</td>
<td>10.5%</td>
<td>-1.3%</td>
</tr>
<tr>
<td>07/23</td>
<td>10.5%</td>
<td>-1.4%</td>
</tr>
<tr>
<td>07/22</td>
<td>10.5%</td>
<td>-1.5%</td>
</tr>
</tbody>
</table>

Confirmed and Suspected Hospitalizations by Date

Page 1
Governor’s Directives and Declarations

The guidance for businesses reopening was developed in consultation with Nevada’s Local Empowerment Advisory Panel (LEAP) created under the Nevada United Plan for reopening Nevada.

➢ Road to Recovery: Moving to a New Normal
➢ Declaration of Emergency Directive 029
➢ Declaration of Emergency Directive 028
➢ Declaration of Emergency Directive 027
  ✓ Guidance on Directive 027: Elevated Disease Transmission Criteria
  ✓ Nevada’s County COVID-19 Elevated Disease Transmission Tracker
  ✓ Food Establishments
  ✓ Bars
➢ Declaration of Emergency 026
➢ Declaration of Emergency Directive 025
  ✓ Guidance for Commercial Properties
  ✓ Guidance for Landlords and Tenants
➢ Declaration of Emergency Directive 024
  ✓ Guidance on Directive 024: Face Coverings
  ✓ Fact Sheet: What does the science say about face coverings?
  ❖ Hoja de hechos: ¿Qué es lo que dice la ciencia sobre las cubiertas faciales?
  ✓ Guidance on Improvised Facial Coverings
➢ Declaration of Emergency Directive 023
  ✓ Nevada Health Response releases guidance on youth sports
  ✓ Roadmap to Recovery for Nevada: Baseball and Softball Practice Only
  ✓ Roadmap to Recovery for Nevada: Soccer Practice Only
  ✓ Roadmap to Recovery for Nevada: Organized Youth Sports Practice Only
➢ Nevada COVID-19 Disease Outbreak Management Strategy and Concept of Operations
➢ Declaration of Emergency Directive 021
  ✓ Phase Two Reopening: General Guidance
  ✓ Phase Two Reopening: Industry-Specific Guidance
Criteria for Ongoing Assessment of Counties

1. **Average number of tests per day (per 100,000) < 150.** The average number of molecular tests resulted during the previous week in a county, divided by the number of people living in the county. This number is then multiplied by 100,000 to control for varying populations in counties. Due to reporting delay, this is reported over a 14-day period with a 7-day lag. Counties that average fewer than 150 tests per day will meet this criterion.

2. **Case rate (per 100,000) > 200.** The total number of cases diagnosed and reported over a 30-day period divided by the number of people living in the county. This number is then multiplied by 100,000 to control for varying populations in counties. Counties with a case rate greater than 200 per 100,000 will meet this criterion.

3. **Case rate (per 100,000) > 50 AND testing positivity > 7.0%**. This is reported over a 14-day period with a 7-day lag. The total number of confirmed cases (identified via positive molecular tests) divided by the total number of unique people tested (molecular only). This number is then multiplied by 100 to get a percentage. Due to reporting delay (which may be different between positive and negative tests), there is a 7-day lag. Counties with a test positivity > 7.0% paired with case rate greater than 50 per 100,000 will meet this criterion.
COVID-19 Task Force Assessment

The Nevada COVID-19 Task Force has been established to support a new county-specific approach to the state’s emergency response. The Task Force will ensure statewide adoption. At a minimum, it will be made up of heads of key state agencies, private sector representatives, and local representatives. This task force will be charged with ensuring accountability for state-level efforts, coordinating essential activities between departments, and providing a sustainable model for receiving and sharing data and vetting proposals and recommendations.

This new approach will ensure the state, in coordination with each county, can assess all available data, evaluate key metrics, and make timely decisions based on the disease burden and transmission risk in each region throughout Nevada. Reviewing this critical data and metrics such as status of hospitalizations, disease investigation reports, and more will allow the State to better understand the capacity of each county to respond and then take targeted actions to help mitigate the spread. The goal of this targeted approach is to address identified risk areas and take action, and to avoid broad-based closures or limitations that could harm businesses who may not be the cause of spread.

In the case that there is not enough data or information needed to take a targeted approach in a county, or if a county is not collaborating with the State in a productive manner, the Task Force and/or the Governor maintain the right to take action and implement mitigation measures in accepted high risk settings.

To ensure the success of this approach, the task force shall perform the following duties:

1. Meet on at least a weekly basis.
2. Provide a current situation report on COVID-19 in Nevada, including weekly case numbers and county-level analysis.
3. Provide an overview of the COVID-19 response effort in Nevada, including enforcement numbers from throughout the state and other findings.
4. Assess county status per these guidelines and make decisions for actions to be taken over the next week.
COVID-19 data and test results that include people who don’t show symptoms (“asymptomatic”) can provide a more accurate understanding of how the virus is spreading. Identifying asymptomatic cases will provide a better understanding of the virus’s impacts on the community. Expanding testing plays a major part in influencing the state's continuous adjustment of prevention and control measures. Additional testing can also lead to a larger number of Nevadans being made aware of their conditions, knowledge that could contribute to focused social distancing and further slowing community transmissions.

The testing location information is provided and maintained by Castlight: COVID-19 Resource Center. (Testing locations are not endorsed or vetted by the Nevada Department of Health and Human Services.) Testing sites can be searched by specific location or by county.

Individuals who need help accessing this content are encouraged to call Nevada 2-1-1 for more information. While testing criteria for coronavirus disease have been expanded in Nevada, each testing site has its own criteria. Please call the testing site or your health care provider before you go for testing. Report incorrect information about testing locations here.

Nevada Medicaid now covers COVID-19 testing and testing related services for most uninsured Nevadans, available under the Families First Coronavirus Relief Act (FFCRA). Most Nevadans, who are either uninsured or enrolled in a limited benefit Medicaid eligibility group, may be eligible for coverage. There is no resource or income test for this group.

In addition to being uninsured (enrolled in a limited benefit Medicaid eligibility category), individuals must be Nevada residents, a U.S. citizen, or have qualifying immigration status and provide a social security number to qualify for this coverage. To apply for benefits including Medicaid, go to accessnevada.dwss.nv.gov
Contact tracing gives us the information needed to draw a road map of how coronavirus is traveling throughout Nevada. But we can’t draw that map without help.

If you get a phone call from a contact tracer, they will identify themselves and ask you for specific information. Your information will not be shared. With your help, we can collect the information needed to get a handle on COVID-19 and stop the spread.

Contact tracing involves:
➢ Interviewing people with COVID-19 to identify everyone with whom they had close contact during the time they may have been infectious.
➢ Contact information is obtained for each case (discuss initial symptoms, when they were most infectious, what they did on those days, who they interacted with for at least 15 minutes within 6 feet of each other).
➢ Follow-up with identified contacts and advocate they follow CDC health guidance.
➢ Notifying contacts of their potential exposure.
➢ Referring contacts for testing.
➢ Monitoring contacts for signs and symptoms of COVID-19.
➢ Connecting contacts with services they might need during the self-quarantine period.
➢ Monitor smartphone usage to determine whether somebody has been in contact with an infected person.

To prevent the further spread of disease, COVID-19 contacts are encouraged to stay home and maintain social distance (at least 6 feet) from others until 14 days after their last exposure to a person with COVID-19. Contacts should monitor themselves by checking their temperature twice daily and watching for symptoms of COVID-19.

Four Key Steps to Contact Tracing

1. When someone tests positive for COVID-19, their doctor notifies the Health Department.
2. We call the person who tested positive for COVID-19 to see who else might have been exposed.
3. Once we know who else might have been exposed, we contact those people.
4. Everyone is asked to self-isolate for at least two weeks to stop the spread of COVID-19.
Experience ultimate social distancing! Vegas Balloon Rides provides journeys up to 12,000 feet in southern Nevada’s morning air. From before you start, while soaring, and when you stop to step again on solid ground – they’re working to keep you, employees, and crew safe and well-spaced. The office and vans to the launch site are disinfected. Masks are required, and temperature checks are taken for all pilots, crew and guests prior to the flight. With lofty goals, they also reduced onboard capacity in the baskets from 16 passengers and one pilot, to 9 passengers with a pilot. Up, up, and way above and beyond Vegas Balloon Rides!

Send nominations with a photo and description to: BattleBornBizNV@gmail.com.

Guilty of exceeding guidelines to stay safe and open! The Mob Museum in downtown Las Vegas reopened with advanced reservations and timed tickets so visitors can stay safely spaced to navigate the exhibits that tell the story of organized crime in our nation. Masks and non-contact temperature scans are required for employees, volunteers, vendors and quests. Contact surfaces are cleaned throughout the day, and over-night UV Light sterilization treatments keep interactive areas safe. You can also visit the Speakeasy to enjoy a handcrafted, Prohibition-era cocktail, while social distancing - if you know the password! Visiting really is an offer you don’t want to refuse!
COVID-19 affects people in different ways. That was certainly true for Sparks, Nevada resident Tara Jimenez. Five members of her family tested positive for COVID-19. Symptoms began in late March and lasted into June.

Tara said her brother, who has cerebral palsy, was hospitalized for two months. Her aunt, also hospitalized, spent two weeks in a medically-induced coma. Her mother-in-law spent three weeks in a hospital. Her mother suffered severe breathing issues, but avoided a hospital stay, while her father did not experience any symptoms.

Tara suffered mild symptoms at first, but they increased after four days.

“It didn't hit me that hard in the beginning,” she said. “I had a stuffy nose, sinus headache for the first three or four days, but then it hit me. I couldn't breath. I did not have body aches, or fever, but my mom had a fever. Everything was different for everybody. …I understand that many people think the virus is a joke, but it’s not.”

Tara isolated at home for five weeks as her four children stayed with her sister. “It was definitely strange being home alone in a house that usually has a lot going on,” she said. Her brother lives with his parents at the Pyramid Lake Paiute Reservation. Rarely separated from family, Tara said her brother’s hospital stay created anxiety issues that he is still fighting to overcome.

“He put up a fight. He put up a real big fight,” she said. “To see him suffer—it's awful.” Tara also suffers anxiety after getting the virus, especially in public spaces. She is more careful to take precautions and to protect her children. “When you go through what our family went through the past few months, it definitely gives you a new outlook on life.”
The Child Care Program assists low-income families, families receiving temporary public assistance and those transitioning from public assistance in obtaining child care so they can work. Funds are also used to improve the quality of child care by financially assisting child care providers in their professional development and maintaining healthy, safe, appropriate learning environments for children 0 to 12 years of age. Resource and Referral services are available to all Nevada families at no cost.

**Contact Information:**
Southern Nevada, Clark and Nye County
Las Vegas Urban League
2470 North Decatur Blvd Suite 150
702-473-9400  [Website](#)  [Email](#)

Northern Nevada, and all other counties
The Children's Cabinet
1090 S. Rock Blvd Reno
775-856-6200 or 800-753-5500
[Website](#)  [Email](#)

1. **Crisis Text Line:** Text HOME to 741741 from anywhere in the U.S., for 24/7/365 crisis services.

2. **Crisis Support Services:** Call 1-800-273-8255; text CARE to 839863 for 24/7/365 crisis services.

3. **Disaster Distress Hotline:** Call 1-800-985-5990 or text TalkWithUs to 66746. The helpline is available 24/7/365 and provides immediate crisis counseling for people who are experiencing emotional distress related to any natural or human-caused disaster. People with deafness or hearing loss can use their preferred relay service to call 1-800-985-5990.

4. **National Suicide Prevention Lifeline:** If you feel you or someone you know may need emotional support, please visit the Lifeline’s website at [suicidepreventionlifeline.org](http://suicidepreventionlifeline.org) for helpful resources or call 1-800-273-TALK (8255). The Lifeline is free, confidential, and available to everyone in the U.S. You do not have to be suicidal to call the Lifeline.

5. **Warmline for Health Care Workers:** Call 1-833-434-0385 This line serves as a confidential mental health resource for health care professionals to seek support before they have reached a crisis point. Monday - Friday from 8 a.m. to 8 p.m.

6. **SafeVoice:** Call 1-833-216-SAFE (7233) This program provides students a safe place to submit tips concerning their own safety or that of others and is available 24/7/365. Tips always stay anonymous.
In response to COVID-19, the Nevada Division of Employment, Training and Rehabilitation (DETR) has implemented and launched a NEW filing system for Nevada residents who have been affected by the pandemic to receive benefits. This is completely separate from filing for traditional unemployment insurance benefits. More information on Coronavirus Aid, Relief and Economic Security Act (CARES Act)

Pandemic Unemployment Assistance (PUA) is a temporary federal program that is part of the Coronavirus Aid, Relief, and Economic Security (CARES) Act. PUA is available to Nevada workers who are unemployed, partially unemployed, unable to work or unavailable for work due to the COVID-19 pandemic and who are not eligible for unemployment insurance benefits.

Pandemic Emergency Unemployment Compensation (PEUC) a temporary federal program that provides up to 13 weeks of regular unemployment insurance (UI) for eligible claimants whose claims have been exhausted.

Pandemic unemployment assistance:
Online:  www.employnv.gov
Phone:  800-603-9681
Monday - Friday 8 a.m. to 8p.m.
Saturday 8 a.m. to Noon

Individuals who believe that someone is fraudulently using their identity to apply for unemployment benefits should file a complaint through the FBI's Internet Crime Complaint Center (IC3) at www.ic3.gov and to DETR's Fraud Report. Nevada's COVID-19 Task Force is working with DETR to assess the problem. File an Unemployment Insurance Fraud Report here.

Unemployment Quick Links:
➢ DETR website
➢ Backdate Frequently Asked Questions for Claimants
➢ Claimants Frequently Asked Questions and COVID-19
➢ Unemployment Insurance Benefits Tutorials
➢ Rapid Response Resource Packet for Laid Off Workers
➢ Relief for Workers Affected by COVID 19 CARES Act
Unemployment insurance (UI) fraud is a crime in Nevada. You may even be prosecuted for felony theft. Collecting benefits based on false, misreported, or unreported information is fraud. If you are filing or reopening a claim, or certifying for benefits, you are legally responsible to follow the requirements set by State law.

UI fraud can include:

➢ Using a name and/or Social Security Number other than your own to file a claim.
➢ Not reporting wages during the week that the work was performed.
➢ Performing temporary work while collecting benefits, and not reporting the earnings.
➢ Withholding information or giving false information when filing a claim.
➢ Allowing another person to file a claim on your behalf while incarcerated.
➢ Filing an unemployment claim while incarcerated.
➢ Returning to work but continuing to collect benefits.
➢ Working a part-time job and not reporting your earnings.

Contact Tracers - Don’t pay, give out your social security number or financial info to a contact tracer. File a complaint.

Mortgage - It's illegal for companies to charge you before they help you with your mortgage. Talk with a legal services organization first.

PPE Supplies - Before your order from a supply company; research the company, know the terms of the sale, and pay by credit card. File a Complaint.

Government Grants - Scammers ask you to complete a grant application and request your bank account information to transfer funds. File a complaint.

Job Opportunities - Scammers pay for online ads, promising you ways to earn money online. But do your research before you sign up — and certainly before you pay. Avoid job scams.

Utility Imposter – Utility companies don’t make demands for cash. Legitimate reps will explain how to make a payment using their established payment options/programs.

Rate Schemes - It is illegal for a company to charge a fee before preforming a debt relief service. Report credit card interest schemes to: ftc.gov/complaint.

College Students - Don’t click on a link to get a message that needs to be opened through a portal link requiring your university login. It’s a phishing scam.
We All Play a Role
Keeping Nevada Safe.

Wearing is Caring!
Who do you wear your face covering for?

➢ Wear a face covering that covers your nose and mouth to help protect others in case you’re infected with COVID-19 but don’t have symptoms.

➢ Wear a face covering in public settings when around people who don’t live in your household, especially when it may be difficult for you to stay six feet apart.

➢ Wear a face covering correctly for maximum protection.

➢ Don’t put the face covering around your neck or up on your forehead.

➢ Don’t touch the face covering, and, if you do, wash your hands or use hand sanitizer to disinfect.

➢ Maintain 6 feet distance between you and other people.

➢ Stay home when sick

Do you know when & where it’s required to wear a face covering in public?

➢ Inside of, standing in line, any indoor space.

➢ While outside in a public space when 6 ft. of social distancing isn’t possible.

➢ Public or private transportation that others HAVE or WILL use.

➢ At work and when interacting in-person with members of the public.

➢ While working out indoors at a gym, fitness center, dance studio, or boutique fitness facility

➢ In any space where food is prepared.

➢ In any room or enclosed area where other people are present.
USA COVID-19 Data

Confirmed Cases: 4,823,229
Deaths: 158,225

U.S. State Department – Travel Advisory Worldwide Caution

<table>
<thead>
<tr>
<th>STEP</th>
<th>Enroll in STEP (Smart Traveler Enrollment Program)</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID-19 Travel</td>
<td>For COVID-19 Travel Information click here</td>
</tr>
<tr>
<td>COVID-19 Alert</td>
<td>Update on U.S. Passport Operations</td>
</tr>
</tbody>
</table>

Worldwide COVID-19 Data

Total Confirmed Cases 18,923,922
Total Deaths 710,916

*U.S. State Department
*Centers for Disease Control and Prevention