# RUPRI Center for Rural Health Policy Analysis *Rural Data Brief*

Brief No. 2020-2

JANUARY 2022

http://www.public-health.uiowa.edu/rupri/

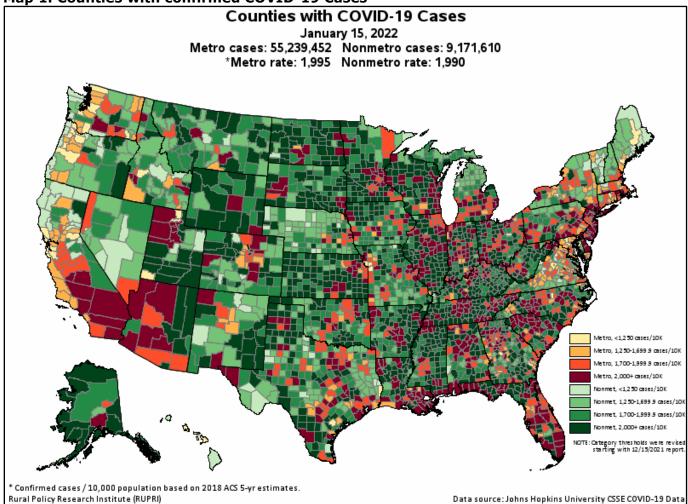
### **Confirmed COVID-19 Cases, Metropolitan and Nonmetropolitan Counties**

Fred Ullrich, BA; and Keith Mueller, PhD

#### Report

Early COVID-19 focus was on major metropolitan areas, but rural areas of the United States have also been hit hard by the pandemic. As of January 15, 2022, there were a total of 64,411,062 cases and 836,839 deaths identified in counties, with 9,171,610 cases and 149,461 deaths (about 14.2 percent of cases and 17.9 percent of deaths) reported in nonmetropolitan counties (data obtained from the Johns Hopkins University COVID-19 Data Repository\*).

#### Map 1. Counties with confirmed COVID-19 Cases



University of Iowa, College of Public Health

Data source: Johns Hopkins University CSSE COVID-19 Data https://github.com/CSSEGISandData/COVID-19



This project was supported by the Federal Office of Rural Health Policy (FORHP), Health Resources and Services Administration (HRSA), U.S. Department of Health and Human Services

(HHS) under cooperative agreement/grant #1U1GRH07633 and #U1C RH20419. The information, conclusions and

#101GRH07633 and #01C RH20419. The information, conclusions and opinions expressed in this policy brief are those of the authors and no endorsement by FORHP, HRSA, HHS is intended or should be inferred.



RUPRI Center for Rural Health Policy Analysis, University of Iowa College of Public Health, Department of Health iverside Dr. Jowa City, IA

Management and Policy, 145 Riverside Dr., Iowa City, IA 52242-2007, (319) 384-3830 http://www.public-health.uiowa.edu/rupri E-mail: cph-rupri-inquiries@uiowa.edu But as many experts have pointed out, the rate of growth in cases is very different depending on location. Further, the stress on the health care delivery system is proportionate – a small number of cases creates stress for low-capacity systems just as a large volume of cases creates stress for larger capacity systems.

Note that this document reports on <u>confirmed</u> COVID-19 cases and those numbers will be affected by the availability and utilization of testing resources. Recent and **updated maps**, and the "progression" of cases throughout the country, can be seen on the animated map on the RUPRI Health web site:

http://ruprihealth.org/publications/policybriefs/2020/COVID History/

Map 1 (above) displays the rates of confirmed COVID-19 cases in metropolitan and nonmetropolitan counties. Table 1 shows metropolitan and nonmetropolitan county confirmed case and death counts. It also depicts the rate of cases and deaths per 10,000 population (based on the 2018 American Community Survey 5-year estimates). Finally, it shows the number and proportion of metropolitan and nonmetropolitan counties exceeding various case and death rate levels. Map 2 displays the rates of COVID-19 deaths in metropolitan and nonmetropolitan counties.

	Metropolitan	Nonmetropolitan
Counties (total)	1,166	1,976
Population (2010 census)	276,820,000	46,082,565
Counties w/ confirmed cases	1,165 (99.9%)	1,972 (99.8%)
Counties w/ deaths	1,165 (99.9%)	1,950 (98.7%)
Confirmed cases	55,239,452 (20.0%)	9,171,610 (19.9%)
Deaths	687,378 (0.2%)	149,461 (0.3%)
Cases/10K population	1,995	1,990
Deaths/10K population	24.83	32.43
Counties w/ 1000+ cases/10K	1,154 (99.0%)	1,938 (98.1%)
Counties w/ 1500+ cases/10K	1,031 (88.4%)	1,716 (86.8%)
Counties w/ 2000+ cases/10K	591 (50.7%)	947 (47.9%)
Counties w/ 5+ deaths/10K	1,164 (99.8%)	1,925 (97.4%)
Counties w/ 10+ deaths/10K	1,106 (94.9%)	1,863 (94.3%)
Counties w/ 25+ deaths/10K	644 (55.2%)	1,440 (72.9%)
Counties w/ 50+ deaths/10K	36 (3.1%)	255 (12.9%)

## Table 1. Metropolitan and Nonmetropolitan Counties. Confirmed cases, deaths, and rates

Data sources: COVID-19 case and death data from the <u>COVID-19 Data Repository by the Center for Systems</u> <u>Science and Engineering (CSSE) at Johns Hopkins University</u>. Population data from the 2018 American Community Survey 5-yr estimates.

\*COVID-19 case and death data for this ongoing report were previously obtained from <u>USAFacts.org.</u> Reports after 8/15/2020 use data from the <u>COVID-19 Data Repository by the Center for Systems Science and Engineering</u> (<u>CSSE</u>) at Johns Hopkins University</u>. Similarly, previous reports had used population data from the U.S. 2010 decennial Census. Current reports utilize data from the Census Bureau's 2018 American Community Survey 5year population estimates.

Additional changes were made to the report starting 4/26/2021 to better account for the Utah practice of providing aggregated incidence and mortality data for less populous counties.

All data in this brief are based on county-level counts to facilitate metropolitan/nonmetropolitan reporting. Cases and deaths that could not be attributed to a county are excluded, meaning that national figures are undercounts. Nebraska stopped reporting county-level mortality on 5/25/2021. This means that total metropolitan and nonmetropolitan counts are undercounts.

#### Map 2. Counties with COVID-19 Deaths

