

Miami County Commissioners Meeting November 23, 2020 COVID Statistics

HB 2016 gives local officials legal authority to adopt, reject, or modify Governor Kelly's statewide mask order. Your decision requires examining all of the relevant information, not just the case increase.

COVID County Statistics as of November 20						
County	Deaths	Cases	Survival Rate	% Infected	Cases Per 10k Pop.	Case Rank
Miami	2	866	99.8%	2.5%	253	94
Anderson	0	343	100.0%	4.4%	436	57
Douglas*	20	4004	99.5%	3.3%	514	82
Franklin*	14	942	98.5%	3.7%	369	72
Johnson*	266	23891	98.9%	4.0%	397	67
Linn	1	248	99.6%	2.6%	256	93

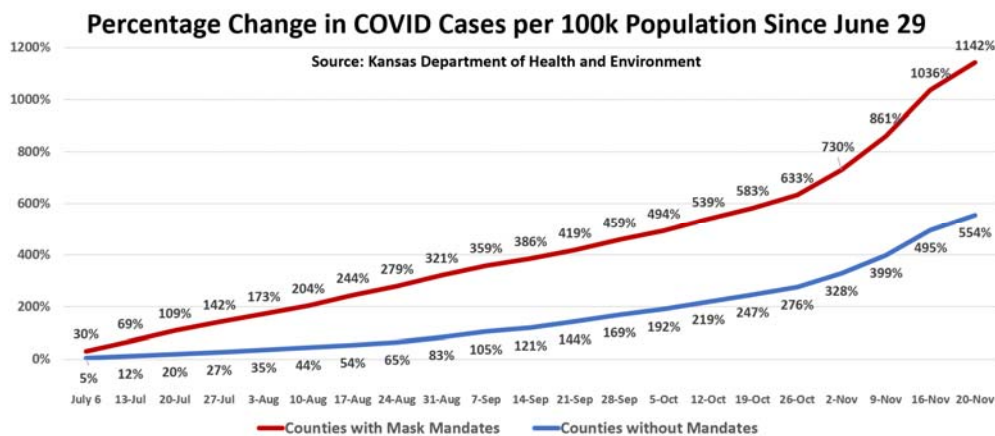
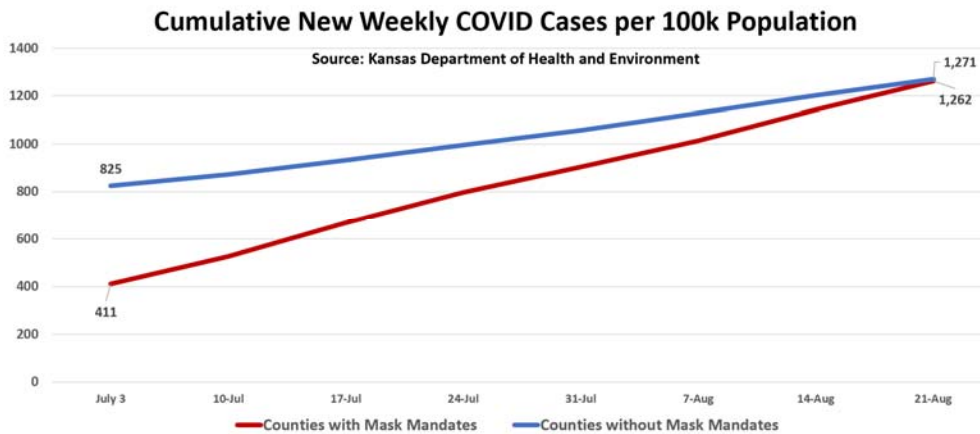
*Source: KSDE (cases), Wikipedia, New York Times (deaths), Census (population).
Counties with mask mandate

- Miami County has the lowest case rate (cases per 10,000 population) in the region
- Only 11 counties have lower case rates
- Miami County survival rate is 99.8%, compared to 99.0% statewide

Kansas COVID Demographics - as of November 20, 2020							
Age	Cases		Hospitalizations		Deaths		Survival Rate
	Number	% Total	Number	% Cases	Number	% Cases	
0-9	4,211	3.1%	50	1.2%	0	0.0%	100.0%
10-17	9,499	7.1%	34	0.4%	0	0.0%	100.0%
18-24	22,624	16.9%	128	0.6%	4	0.0%	99.98%
25-34	23,070	17.2%	287	1.2%	11	0.0%	99.95%
35-44	20,792	15.5%	391	1.9%	18	0.1%	99.9%
45-54	19,082	14.2%	596	3.1%	48	0.3%	99.7%
55-64	16,594	12.4%	843	5.1%	140	0.8%	99.2%
65-74	9,623	7.2%	984	10.2%	272	2.8%	97.2%
75-84	5,207	3.9%	856	16.4%	402	7.7%	92.3%
85+	3,552	2.6%	510	14.4%	513	14.4%	85.6%
totals	134,254		4,679	3.5%	1,408	1.0%	99.0%

Source: KDHE; excludes unknown ages

- Less than 2% of cases for ages 0-44 required hospitalization statewide
- Survival rate exceeds 99% for all age groups below age 64



- The first chart above debunks false media claims from last week. The Kansas City Star headline deliberately and falsely read “CDC report: COVID-19 cases dropped in Kansas counties with mask orders, rose in others.”
- As documented in our attached report, cases per 100k of population jumped 207% in the counties with mandates, going from 411 to 1,262; cases in the other counties increased by 54%, going from 825 to 1,271.
- This is the third time we caught KDHE misrepresenting information, trying to convince Kansans that mask mandates work. To be clear, this isn’t about whether masks are beneficial; it is strictly about whether government mandates work.
- Even the Wall Street Journal said KDHE “fudged data.”
- Kansans unfortunately cannot trust Governor Kelly, KDHE, or media to honestly report all the information so you can make your own informed opinions and decisions. Examine the data yourselves.

An unknown number of positive results are extremely unlikely to be contagious, and KDHE has no interest in getting and sharing the information. *Excepts from the attached article – “KDHE shows no interest in obtaining cycle threshold data”*

“If you get a cycle threshold of 35 or more, the chances of it being replication-competent are minuscule,” Fauci said at roughly the **four-minute mark of this video**. ‘Replication competent’ means particles capable of infecting cells and replicating to produce additional infectious particles.

The cycle threshold is — **roughly** — the number of times a bit of genetic matter must be copied by the testing equipment to determine how infectious a given individual is. The higher the cycle threshold needed to identify COVID, the less infectious a person is; some virologists say results above 35 cycles are ‘false positives.’ KDHE says the cycle threshold on its **most commonly used test is 42** and many private labs have thresholds set far above 35 — including **Quest Diagnostics at 40** and **LabCorp at 38**.

- KDHE and Governor Kelly have been asked to obtain and publish cycle threshold data on every positive result, but they ignored our request.
- It is impossible to say how many contagious cases there have been in Kansas absent this information, but the governor and KDHE are pressuring local officials to enact mandates and keep kids out of school based on incomplete information.

Understand and acknowledge the severe consequences of mandates and other restrictions in order to make balanced, informed decisions

- Miami County unemployment rate was 2.7% last September but jumped to 4.7% this year (BLS, not seasonally adjusted).
- Miami County had 700 fewer jobs in September compared to a year ago. That’s a 4.2% job loss
- School gating criteria causing teen suicide and a huge increase in mental health referrals across the state. Student achievement, already not good, is declining. Kids who depend on school for meals aren’t being fed. Some are stuck at home with physical abusers.

KDHE, media collaborate on more mask mandate deception

sentinelksmo.org/kdhe-media-collaborate-on-more-mask-mandate-deception/

November 21, 2020

Once again, the Kansas Department of Health and Environment and media are collaborating to deceive Kansans about the effectiveness of mask mandates. To be clear, this isn't about whether masks are beneficial; it is strictly about whether government mandates work. After two previous efforts were debunked, KDHE and their media friends tried it a third time yesterday, with a Kansas City Star headline **falsely proclaiming** "CDC report: COVID-19 cases dropped in Kansas counties with mask orders, rose in others."

KDHE data shows there were 411 cases per 100,000 of population on July 3 in the 24 counties that CDC researchers say adopted the governor's order. By August 24 those counties experienced a 207% increase to 1,262 cases per 100,000. (The CDC report ends on August 23 but KDHE hasn't published data for that day.) The other 81 counties went from 825 cases per 100,000 to 1,271 cases, for an increase of just 54%.

COVID Cases per 100,000 Population			
County Cohort	July 3	August 21	% Change
Mandate counties	411	1,262	207%
Non-mandate counties	825	1,271	54%

Source: Kansas Dept. of Health and Environment

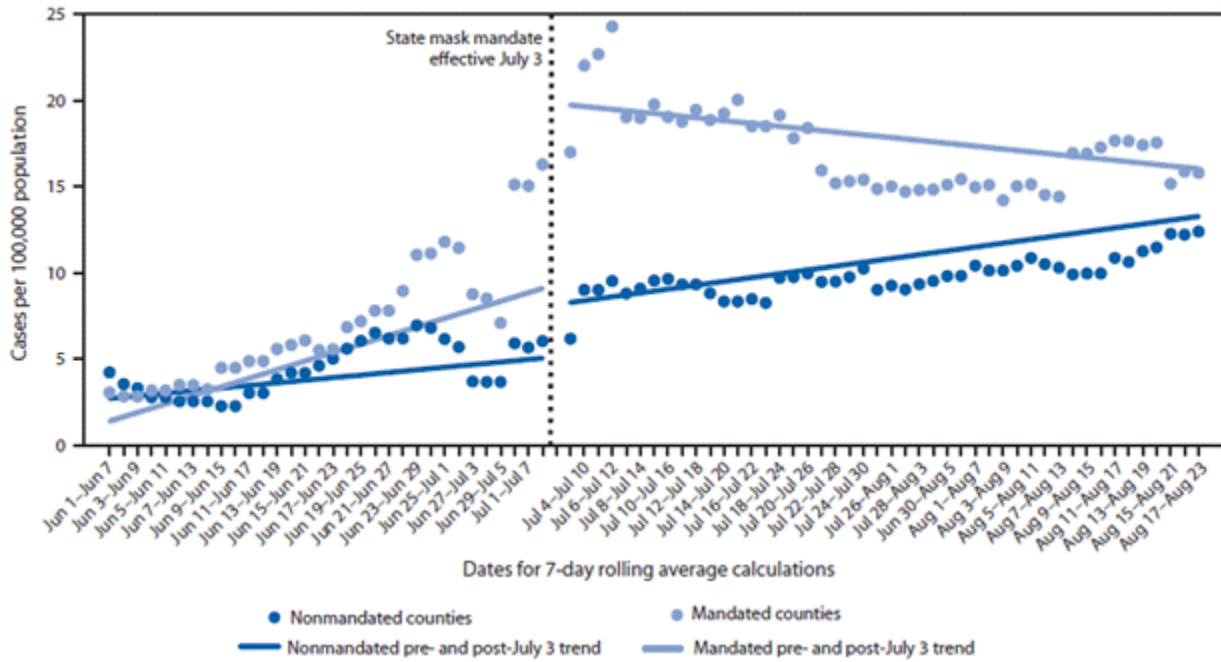
So how do KDHE and media justify their false claim that "cases dropped" in the counties that followed the governor's order?

Dr. Russ McCullough, founder and director of the **Gwartney Institute at Ottawa University**, explains the deception.

"Cases per 100,000 is not what is being measured in this study that shows a downward trend. They are showing the rate of change of 7-day average cases, which does not fully reflect the story in Kansas. The evidence provided by this graph does not conclusively show that the mask mandate worked, there are many other factors needing to be considered."

Only people intent on deceiving readers would claim cases dropped in counties with mandates when cases increased 207%.

Here's a chart from the CDC report, which makes it appear that cases went down in the mandate counties but increased elsewhere.

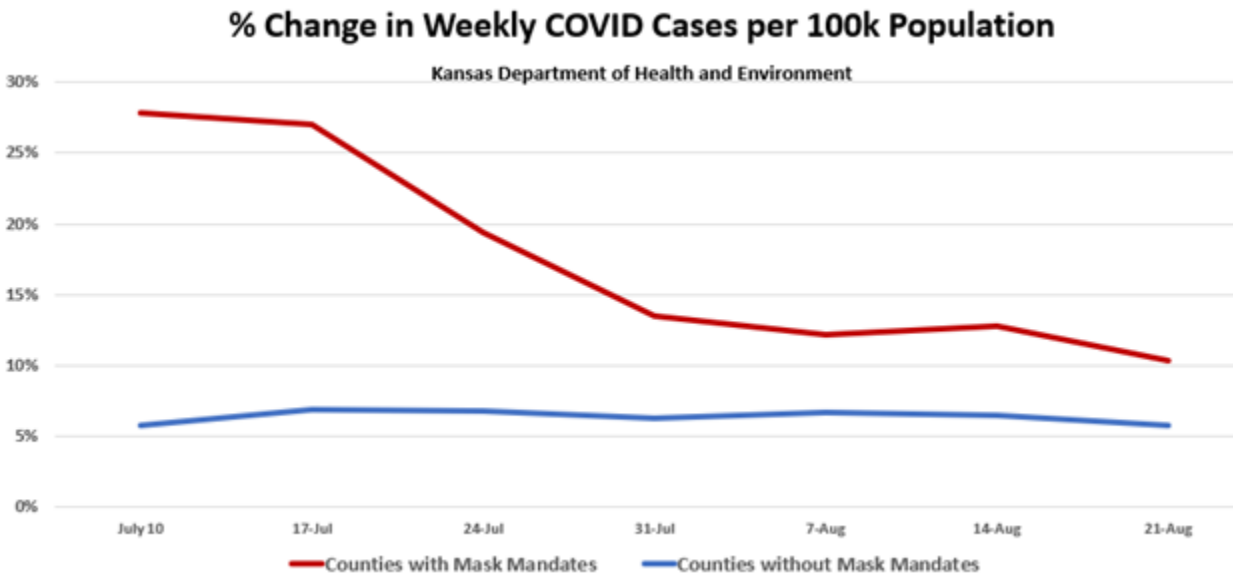


KDHE doesn't publish daily case statistics so we can't replicate their 7-day rolling average numbers, but we can get close by tracking the change from one week to the next.

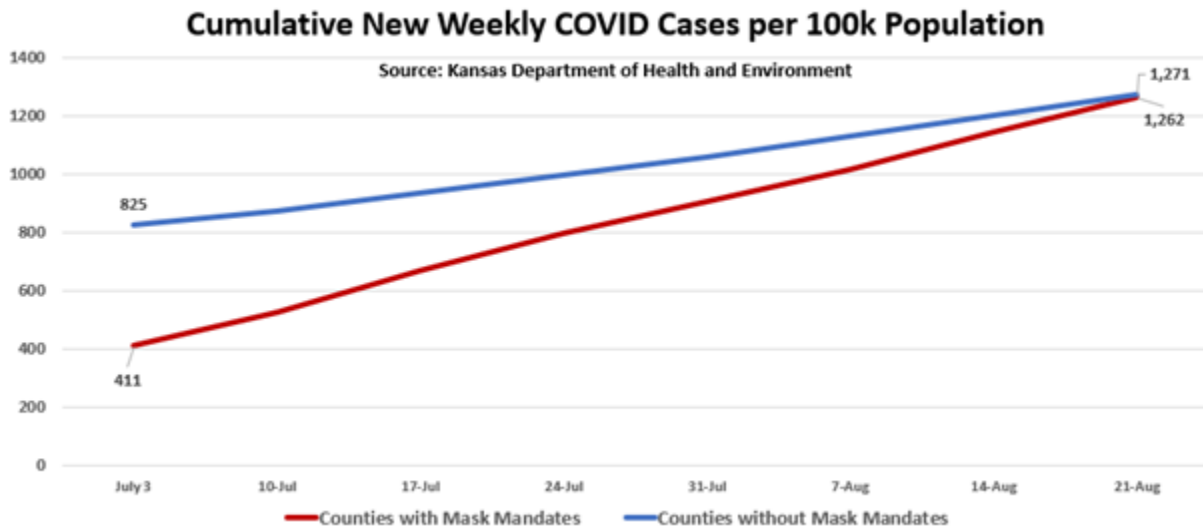
The table on the left below shows the total cases per 100,000 of population for both county cohorts. The middle section shows the weekly change in cases; for example, the mandate counties went from 411 cases on July 3 to 526 on July 10, for an increase of 114 cases. An increase of 114 cases for the week ending July 10 represents a 28% increase over the 411 case total in the previous week as shown in the table on the right.

Total Cases Per 100k			New Cases Per 100k			% Change in New Cases Per 100k		
Date	Mandate	No mandate	Date	Mandate	No mandate	Date	Mandate	No mandate
3-Jul	411	825	3-Jul			3-Jul		
10-Jul	526	872	10-Jul	114	47	10-Jul	28%	6%
17-Jul	667	932	17-Jul	142	60	17-Jul	27%	7%
24-Jul	797	996	24-Jul	129	64	24-Jul	19%	7%
31-Jul	904	1,058	31-Jul	108	62	31-Jul	13%	6%
7-Aug	1,014	1,129	7-Aug	110	71	7-Aug	12%	7%
14-Aug	1,144	1,202	14-Aug	130	73	14-Aug	13%	7%
21-Aug	1,262	1,271	21-Aug	118	69	21-Aug	10%	6%

The percentages in the right-hand table are charted below, starting with the 28% increase for the mandate counties, followed by a 27% increase (over the previous week's total), then 19%, 13%, and so on. KDHE and media only show this type of chart because it gives the appearance that cases declined in the counties with mandates.



Now look what happens when you chart the cumulative number of cases per 100,000 of population. It's a completely different picture, which makes it crystal clear that the mandate counties had much faster growth.



On July 3, the counties without mandates had more than twice as many cases per 100,000 of population than the counties with mask mandates, but because they only grew by 54% while the mandate counties' cases jumped 207%, both groups had almost the same number of cases on August 21.

Factors not considered in CDC report

CDC seems to have only considered one variable – whether counties had a mask mandate. But even though cases were adjusted for population differences (roughly 1.96 million in the mandate counties and about 953,000 in the other group), there were other factors at play.

The virus didn't spread uniformly across counties, but initially hit the more densely populated urban areas and gradually spread to rural counties. On July 3, there were nine counties with no cases among those that didn't adopt the mandate and six more counties had just one case; but every county that adopted the mandate had at least two cases.

Mask usage is another variable. Just because a county didn't impose a mandate doesn't mean that no one in the county wore a mask; by the same token, having a mandate doesn't mean that everyone wore a mask.

As my colleague Michael Austin notes, "Many national polls revealed Americans like masks, and two independent surveys say over 90% of Kansans, in both mandated and non-mandated counties, wear masks at some frequency."

Without adjusting for these and other variables, one cannot reasonably conclude that mandates work.

Third time that mandate claims are debunked

This isn't the first time that media and government officials collaborated to mislead Kansans about the efficacy of mandates. (Remember, this isn't about whether masks are beneficial; it's about badgering you to do whatever the hell the governor and other officials order you to do.)

The **Wall Street Journal** and the ***Sentinel*** caught KDHE Secretary Dr. Lee Norman fudging data in August to justify Governor Kelly's mask mandate.

Then, one day after Governor Kelly announced she wanted another statewide mandate, friendly researchers at the University of Kansas just happened to release a report claiming that mandates work. But the ***Sentinel*** also **shot that one down**; we caught them doing something similar to the CDC report, hiding the much larger cumulative case growth in counties with mandates.

We wrote to management at the Kansas City Star, the Wichita Eagle, Lawrence Journal-World, and the Kansas Reflector to let them know they'd been duped by Norman, Kelly, and the KU researchers. We shared the real data with them and offered to help them inform their readers what really happened but to date, each is allowing the deception to stand.

COVID is a serious situation but that's no excuse to abandon the truth. The job of media and elected officials is to provide all the information and allow citizens to make their own informed decisions. Media and some elected officials may prefer a socialist society so they can order people what to think, but thank goodness freedom of speech and thought still exist in our constitutional republic.

KDHE shows no interest in obtaining cycle threshold data

 sentinelksmo.org/kdhe-shows-no-interest-in-obtaining-cycle-threshold-data/

November 9, 2020

Despite it being clear the State of Kansas is using overly-sensitive COVID tests that, according to officials, will return positive results for non-contagious dead genetic material, the Kansas Department of Health and Environment is apparently unwilling to request cycle threshold data from labs to eliminate ‘false positives’ from the case count.

Director of the National Institute of Allergy and Infectious Diseases Dr. Anthony Fauci has stated that “cycle threshold” should be 34 or below.

“If you get a cycle threshold of 35 or more, the chances of it being replication-competent are minuscule,” Fauci said at roughly the **four-minute mark of this video**. ‘Replication competent’ means particles capable of infecting cells and replicating to produce additional infectious particles.

Later in the interview, Fauci says labs initially only report ‘positive’ or ‘negative’ but they will provide the cycle threshold level upon request.

The cycle threshold is — **roughly** — the number of times a bit of genetic matter must be copied by the testing equipment to determine how infectious a given individual is. The higher the cycle threshold needed to identify COVID, the less infectious a person is; some virologists say results above 35 cycles are ‘false positives.’

KDHE says the cycle threshold on its **most commonly used test is 42** and many private labs have thresholds set far above 35 — including **Quest Diagnostics at 40** and **LabCorp at 38**.

Recently, **Kansas Policy Institute** (parent company of the *Sentinel*) CEO Dave Trabert sent a Kansas Open Records ACT (KORA) request, asking for cycle threshold data.

“The KDHE KORA officer responded to our request for cycle threshold data, saying the labs do not provide that information to the state,” Trabert wrote in an email to KDHE Secretary Dr. Lee Norman on Nov. 2, 2020. “So we’re writing to ask if you will obtain the data from them and share it with the public.

“It is critical to know how many of the reported positive results may not be contagious or ‘replication-competent’ but contributing to the extraordinary emotional and economic consequences, including suicides and attempted suicides, related to COVID-induced isolation and economic consequences.”

A week later, despite a return receipt indicating that the email had been received, neither Norman nor any KDHE spokesperson has responded; the governor’s office was copied and also failed to respond.

Trabert says Dr. Norman and the Kelly administration seem more focused on closing schools and businesses and issuing mandates than on being honest with Kansans.

“We caught Norman fabricating data to justify a mask mandate. Twice we caught Governor Kelly making false statements about COVID deaths. The governor’s office and KDHE even **refused a legislative request** to see how PPE (Personal Protective Equipment) was being distributed after concern was raised that nursing homes weren’t being properly served. They just don’t seem to care about the truth and transparency.”

The Kelly administration has routinely rejected transparency requests, as shown **here** and **here**.

Proper Cycle Threshold

As the *Sentinel* **recently reported**, Dr. Michael Mina, an assistant professor of epidemiology at both Harvard Medical School and the Harvard T.H. Chan School of Public Health, told **Harvard Magazine** that reporting people positive on tests with a high cycle threshold are “false positives.”

“Tests with thresholds so high may detect not just live virus but also genetic fragments, leftovers from infection that pose no particular risk,” Mina said. “Akin to finding a hair in a room long after a person has left.”

One maker of the COVID PCR test, Bioningentech, **offers guidance** quite similar to those in a **New York Times article**, which points to oversensitive tests nationwide. Cycle thresholds between 12 and 36 are considered positive; results between 36 and 40 cycles are considered marginally positive, and anything over 40 cycles is considered negative.

“A more reasonable cutoff would be 30 to 35, she added.

Dr. Mina said he would set the figure at 30, or even less.

“Those changes would mean the amount of genetic material in a patient’s sample would have to be 100-fold to 1,000-fold that of the current standard for the test to return a positive result — at least, one worth acting on.”

Interpretation of the test

1) Qualitative analysis:

Ct (Threshold cycle) value of each sample can be read as follows.

Table 5. Ct value result

Ct value	Result
0 - 11	Negative
12 - 36	Positive
36 - 40	Marginal Positive
> 40	Negative