

March 3, 2022

Dear Disease Reporter,

The Vectorborne Diseases Unit at the Minnesota Department of Health (MDH) would like to thank you for all your work, past and present, on vectorborne disease reporting. We truly appreciate the time that you have put into reporting all the variables that we request in order to classify cases for annual CDC and state reporting purposes. We are contacting your facility because you have been determined to be a primary reporting facility for residents of one or more high incidence counties.

We are happy to announce that beginning in 2022, case reporting for Lyme disease is now limited to residents of counties determined to have low incidence of the disease. In general, reporting for residents of high incidence counties will require only laboratory results and demographics be sent to MDH; however, we will continue to reach out for additional information for select cases that require more attention. All cases from low incidence counties will continue to require full reporting of all variables on the tickborne disease case report form.

What does this mean for you and your facility?

- Please review the attached list of counties and determine how you will report cases in patients who are residents of low incidence counties.
- Continue to report as usual for all other vectorborne diseases, including but not limited to anaplasmosis, babesiosis, spotted fever, malaria, dengue, and all arboviruses.
- Continue to assist us as we collect final data to close out our 2021 cases of Lyme disease for all Minnesota residents.

We know that this change may be confusing, especially if you report cases for residents of both high and low incidence counties. Despite this, we are excited about this change and are hopeful that this will ease the overall burden of reporting vectorborne diseases. As always, we value your partnership, so please don't hesitate to reach out with any questions or concerns!

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