Montana 2025-2026 COVID-19, Influenza, and RSV Surveillance

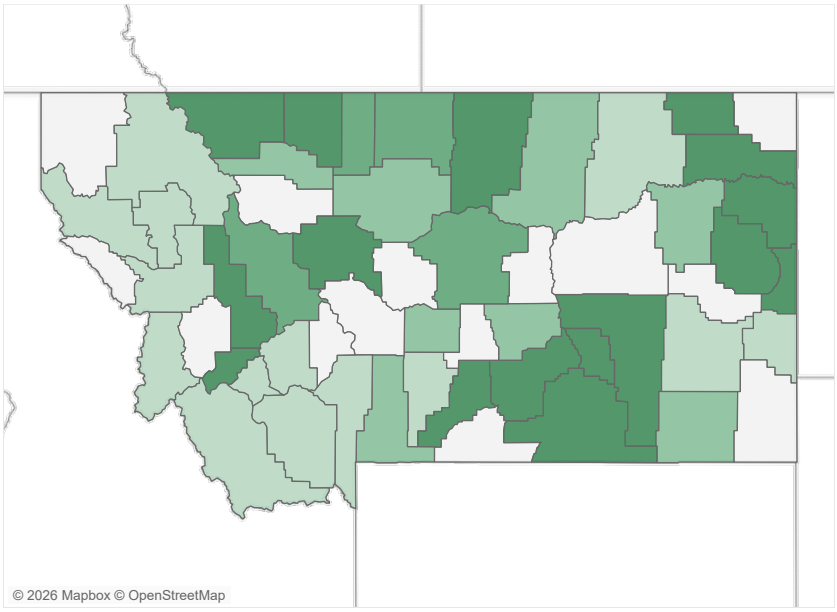
Updated 1/9/2026

COVID-19 and Influenza Activity by County

Updated 1/9/2026

Respiratory activity for COVID-19 and Influenza (Flu) are tracked at the county-level in Montana. It is important to keep in mind that surveillance activities for these conditions are very different and data on this page may not represent the complete picture for respiratory activity in Montana. Data on this page may be used as a tool or guide to help inform health decisions.

COVID-19 and Influenza Weekly Case Rate per 10,000 Persons by County, Montana 12/28/25-1/3/2026



Weekly Rate per 10,000

0.00 — 20.00 +

Census Population Source: https://www.census.gov/data/tables/time-series/demo/popest/2020s-counties-total.html

Filter By Condition

- (●) COVID-19 and Influenza
- ( ) COVID-19
- ( ) Influenza

Weekly State Summary: 12/28/25-1/3/2026

	COVID-19	Influenza
Weekly Reported Cases	316	1,018
Weekly Case Rate per 10,000 Persons	2.79	8.99
Season to Date Cases (9/28/25-1/3/2026)	2,713	4,285

Weekly COVID-19 and Influenza Cases by County (12/28/25-1/3/2026)

County	COVID-19	Influenza
Beaverhead	0	6
Big Horn	4	45
Blaine	4	22
Broadwater	2	1
Carbon	1	0
Carter	0	0
Cascade	55	128
Chouteau	2	3
Custer	3	2
Daniels	1	2
Dawson	5	10
Deer Lodge	2	23
Fallon	0	2
Fergus	5	10
Flathead	0	86

Montana 2025-2026 COVID-19, Influenza, and RSV Surveillance

Updated 1/9/2026

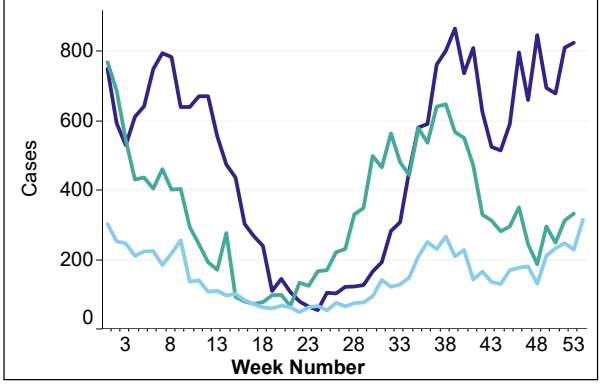
COVID-19 Summary

Updated 1/9/2026

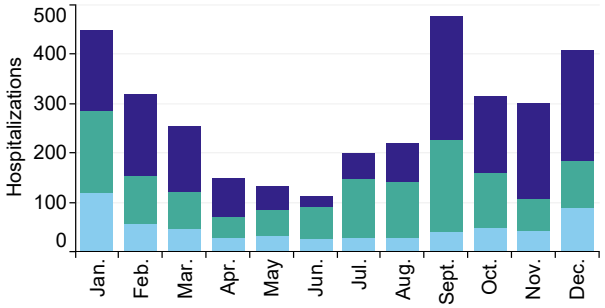
COVID-19 Cases, Hospitalizations, and Deaths by Year- Montana, 2020-2025

	COVID-19 Cases	COVID-19 Hosps.	COVID-19 Deaths
2020	79,194	3,764	1,311
2021	117,171	6,656	1,742
2022	128,509	3,531	621
2023	25,675	1,554	178
2024	17,735	1,199	80
2025	7,997	563	40

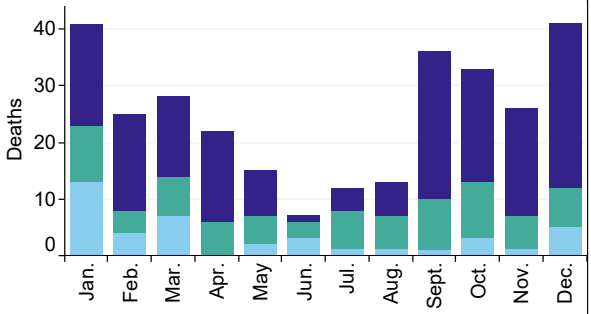
Comparison of COVID-19 Cases by Week and Year, Montana 2023-2025



Comparison of COVID-19 Hospitalizations by Month and Year, Montana 2023-2025



Comparison of COVID-19 Deaths by Month and Year, Montana 2023-2025



Page Tools

Year

- 2026
- 2025
- 2024
- 2023

Filter by Year

- ☑ 2023
- ☑ 2024
- ☑ 2025
- ☑ 2026

Note: COVID-19 data from 2020-2022 are excluded from visualizations on this page due to differences in case, hospitalization, and death surveillance definitions.

Montana 2025-2026 COVID-19, Influenza, and RSV Surveillance

Updated 1/9/2026

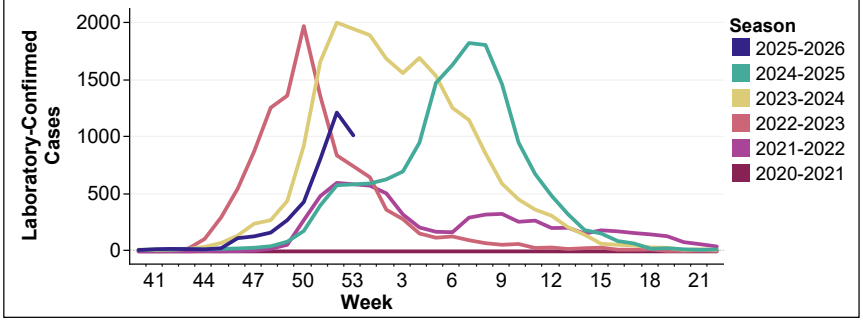
Influenza (Flu) Summary

Updated 1/9/2026

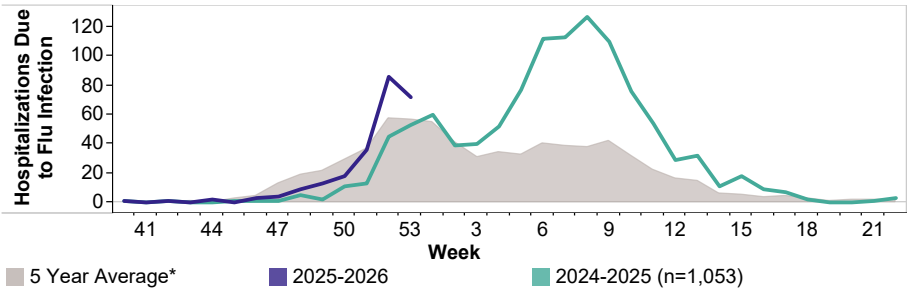
Influenza Cases, Hospitalizations, and Deaths by Season- Montana, 2020-2025

Season	Flu Cases	Flu Hosps.	Flu Deaths
2020-2021	0	0	0
2021-2022	7,042	259	10
2022-2023	11,671	612	23
2023-2024	21,861	1,031	51
2024-2025	16,197	1,106	72
2025-2026	4,285	245	8

Comparison of Influenza Cases by Week and Season, Montana 2020-2025

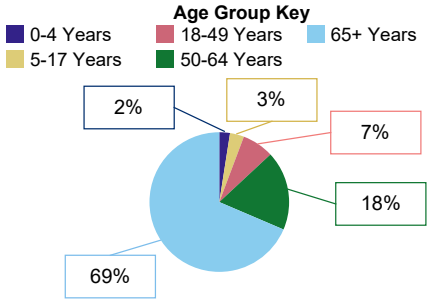


Comparison of Influenza Hospitalizations by Week of Hospital Admission Date, Montana 2019-2025



*5 Year Average includes seasons 2019-2020 through 2024-2025, excluding 2020-2021 due to no influenza cases, hospitalizations, or deaths being reported during that time.

Total Hospitalizations by Age Group for the 2025-2026 Influenza Season



There were no cases, hospitalizations, or deaths due to influenza reported in Montana during the 2020-2021 respiratory virus season (September 27, 2020-June 5, 2021). It is likely that COVID-19 pandemic response and mitigation measures, such as wearing face masks, physical distancing, reduced travel, improved hand and respiratory hygiene, and school closures contributed to the decline in influenza activity observed during the 2020-2021 season.

Montana 2025-2026 COVID-19, Influenza, and RSV Surveillance

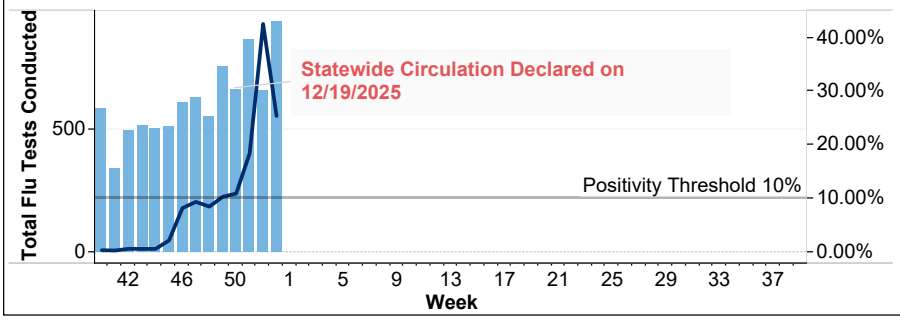
Updated 1/9/2026

Influenza Laboratory Testing

Updated 1/9/2026

Laboratory surveillance for influenza in Montana is compiled from voluntary sentinel laboratories, which report testing information weekly. These laboratories include: Barrett Hospital and Healthcare, Big Sandy Medical Center, Bighorn County Hospital, Billings Clinic Hospital, Bozeman Deaconess Hospital, Cabinet Peaks Medical Center, Community Medical Center, Deer Lodge Medical Center, Great Falls Clinic, Holy Rosary Health Care, Liberty County Hospital, Livingston Health, Logan Health, Phillips County Hospital, Poplar Community Hospital, Madison Valley Medical Center, North Valley Hospital, St. Peter's Hospital, St. Vincent Hospital, Trinity Hospital, and VA Ft. Harrison.

Total Number of Flu Tests Performed and Percentge of Tests Positive for Influenza by Week for the 2025-2026 Season -- Montana



Legend
- Flu Tests Performed
- FluPP

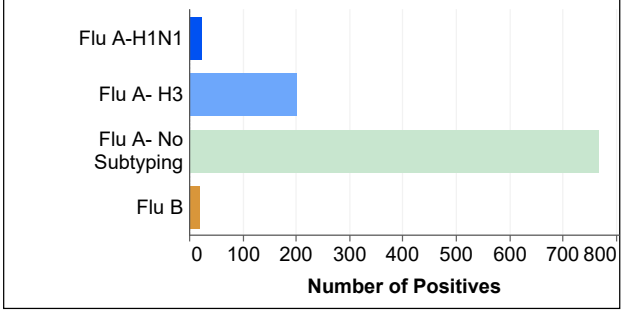
MTDPHHS declares **statewide circulation** of influenza when the percentage of tests positive for flu through sentinel surveillance is >10% for two consecutive weeks.

Page Tools

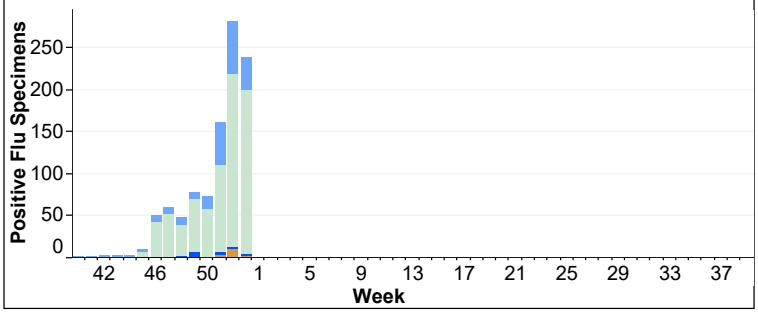
Flu Type and Subtype
- Flu A- H3
- Flu A- No Subtyping
- Flu A-H1N1
- Flu B

Week Ending
10/4/2025 to 10/3/2026

Flu Type and Subtype Distribution for the 2025-2026 Season -- Montana



Weekly Positive Flu Specimens by Type and Subtype for the 2025-2026 Season -- Montana



Montana 2025-2026 COVID-19, Influenza, and RSV Surveillance

Updated 1/9/2026

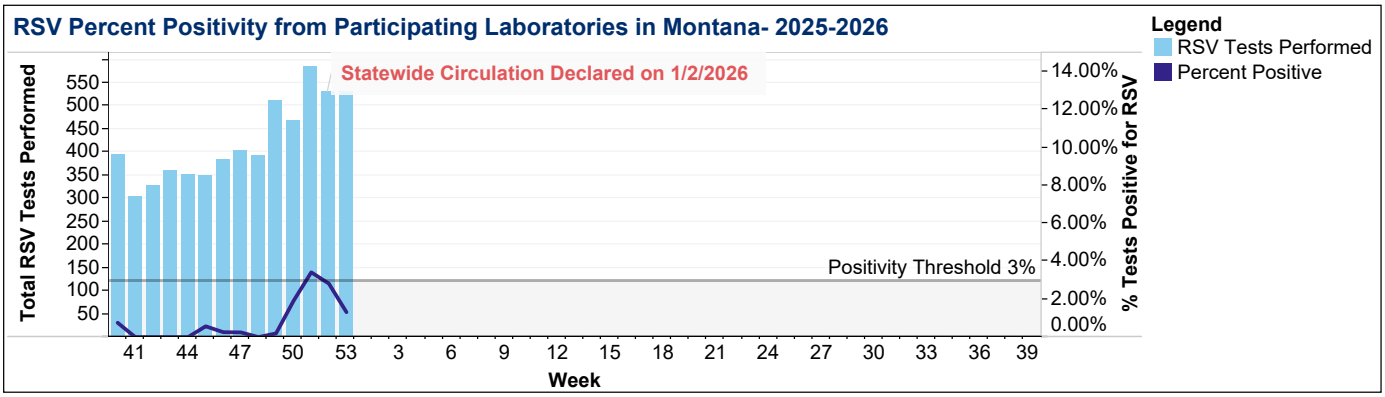
RSV Summary

Updated 1/9/2026

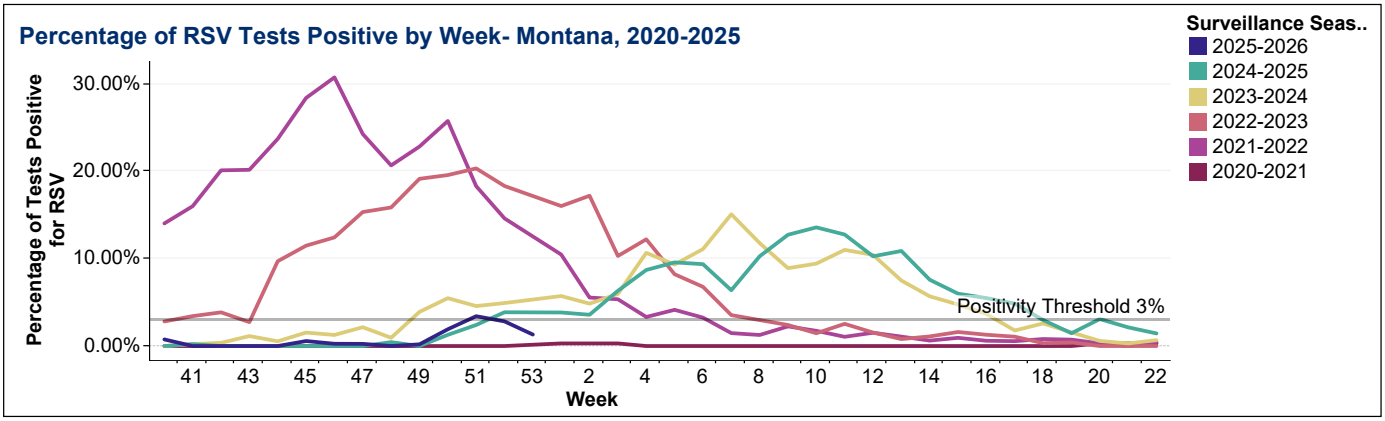
Individual cases of RSV are not reportable in Montana. Surveillance for RSV in Montana is compiled from voluntary sentinel laboratories, which report testing information weekly. Percent positivity for RSV is determined by the number of positive RSV tests resulting from the total number of RSV tests run.

RSV season onset is defined as the first of two consecutive weeks when the RSV test percentage positivity is >3%.

RSV Percent Positivity from Participating Laboratories in Montana- 2025-2026



Percentage of RSV Tests Positive by Week- Montana, 2020-2025



Montana 2025-2026 COVID-19, Influenza, and RSV Surveillance

Updated 1/9/2026

Respiratory Outbreaks

Updated 1/9/2026

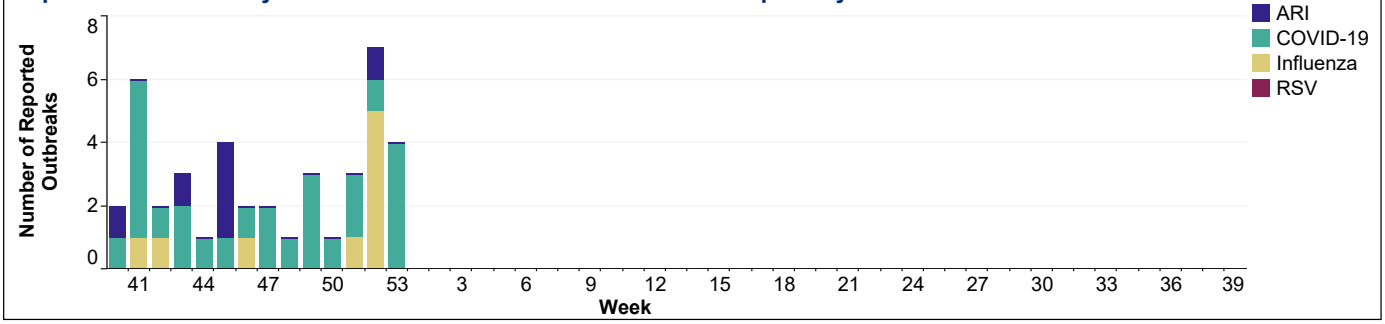
The **MTDPHHS Communicable Disease Epidemiology (CDEpi)** section and the **Infection Control and Prevention and Healthcare Associated Infections (ICP/HAI)** section work closely with jurisdictions and facilities in Montana to identify, mitigate, and prevent outbreaks of communicable disease in congregate facilities. Outbreaks of viral respiratory illness (e.g., COVID-19, influenza, RSV, and acute respiratory illnesses/ARIs) are tracked year-round in Montana.

For the purpose of tracking outbreaks, a respiratory virus season spans from MMWR week 40 of one year through MMWR week 39 of the next year. For example, the 2025-2026 respiratory virus season will begin on September 28, 2025 (MMWR week 40, 2025) and go through October 3, 2026 (MMWR week 39, 2026).

Reported Outbreaks of Respiratory Illness by Season, Etiology, and Setting -- Montana, 2023-2025

Surveillance Season	Condition	Healthcare	Non-healthcare	Grand Total
2023-2024 (10/1/23-9/28/24)	ARI	5	24	**29**
	COVID-19	385	13	**398**
	Influenza	30	12	**42**
	RSV	7	6	**13**
	Total	**427**	**55**	**482**
2024-2025 (9/29/24-9/27/25)	ARI	5	9	**14**
	COVID-19	133	2	**135**
	Influenza	30	11	**41**
	RSV	6	4	**10**
	Total	**174**	**26**	**200**
2025-2026 (9/28/25-10/3/26)	ARI	1	5	**6**
	COVID-19	22	4	**26**
	Influenza	7	2	**9**
	RSV	0	0	**0**
	Total	**30**	**11**	**41**
Grand Total		**631**	**92**	**723**

Reported Outbreaks by Week and Condition for the 2025-2026 Respiratory Virus Season -- Montana



Montana 2025-2026 COVID-19, Influenza, and RSV Surveillance

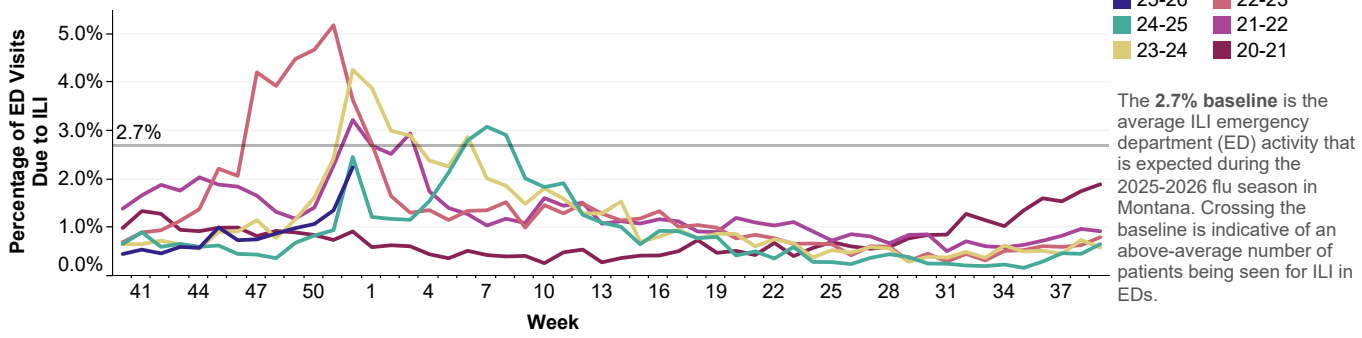
Updated 1/9/2026

Emergency Department Data

Updated 1/9/2026

Montana collects real-time emergency department (ED) data from facilities throughout Montana for multiple conditions, including COVID-19, influenza, RSV, and influenza-like illness (ILI). ILI has a standardized definition including fever (100°F or higher), cough, and/or sore throat.

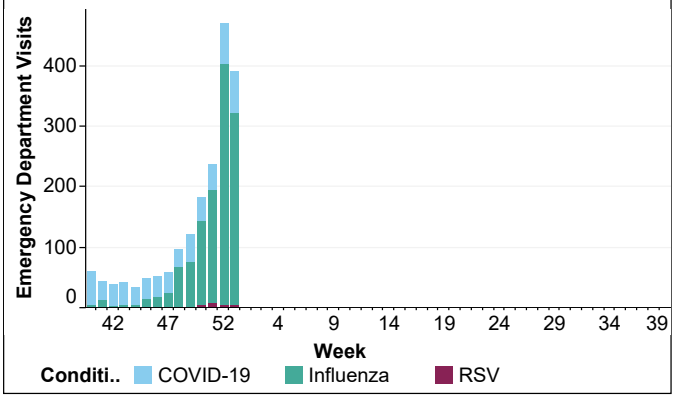
Percentage of ED Visits Due to Influenza-Like Illness, Montana



Emergency Department Visits Due to Respiratory-Related Conditions -- Montana, 2025-2026

Week	Week Ending Date	All ED Visits	COVID, Flu, and RSV ED Visits	% Total Visits Due to COVID, Flu, and RSV
53	01/03/2026	7,329	387	5.28%
52	12/27/2025	7,150	466	6.52%
51	12/20/2025	6,974	236	3.38%
50	12/13/2025	6,664	178	2.67%
49	12/06/2025	6,838	121	1.77%
48	11/29/2025	6,459	95	1.47%
47	11/22/2025	6,950	58	0.83%
46	11/15/2025	6,437	51	0.79%
45	11/08/2025	6,526	47	0.72%
44	11/01/2025	6,295	33	0.52%

Total ED Visits by Respiratory Condition -- Montana, 2025-2026



Montana 2025-2026 COVID-19, Influenza, and RSV Surveillance

Updated 1/9/2026

About COVID-19, Influenza, and RSV

COVID-19, influenza (flu), and respiratory syncytial virus (RSV) are common circulating respiratory conditions in Montana. They are caused by different viruses and are different diseases: SARS-CoV-2 (COVID-19), influenza viruses (flu), and respiratory syncytial virus (RSV). These viruses spread between people when someone who is sick coughs, sneezes, or does other things to cause droplets containing the virus to be expelled.

Symptoms of COVID-19, flu, RSV, and other respiratory illnesses can often be similar and may include a fever, cough, sore throat, runny or stuffy nose, headache, body aches, and low energy. If you are experiencing any of these symptoms, consult with your medical provider. Your provider may recommend that you get tested to confirm a diagnosis.

These viruses spread year-round, but activity tends to peak in the fall, winter, and spring months (e.g., October-May).

About This Dashboard

Public health surveillance is the ongoing systematic collection, analysis, and interpretation of data. Surveillance data is a valuable tool that can help inform decision making and guide interventions to help prevent the spread of disease. Epidemiologists count cases by MMWR weeks and years in an effort to standardize data collection. MMWR week is the week of the epidemiologic year for which the National Notifiable Diseases Surveillance System disease report is assigned by the reporting health department. State health departments use the same rules over time to assign MMWR week; therefore reporting patterns are assumed to be similar from year to year. Active surveillance for influenza occurs between MMWR (calendar) weeks 40-22 annually.

This dashboard presents data for COVID-19 activity in Montana year-round as well as data for influenza and RSV Montana for the 2025-2026 respiratory virus season (September 28, 2025-June 6, 2026). The intended purpose of this dashboard is to provide Montanans access to communicable disease data and metrics to help inform and guide protective actions against these conditions.

Data for this dashboard are obtained from the Montana Infectious Disease Information System (MIDIS) and the Electronic Surveillance System for the Early Notification of Community-Based Epidemics (ESSENCE).

MTDPHHS will provide weekly updates on this dashboard throughout the respiratory season that compile data from a variety of sources to give the most complete and up-to-date view of respiratory activity in the state of Montana. **All data are preliminary and may change as more complete information is received.**

COVID-19 and influenza are reportable events in Montana as established in Administrative Rule of Montana 37.114.203. Outbreaks of COVID-19, influenza, RSV, and other acute respiratory illnesses are also reportable under this Administrative Rule.

DEPARTMENT OF PUBLIC HEALTH & HUMAN SERVICES

Serving Montanans in their communities to improve health, safety, well-being, and empower independence.

For questions related to this dashboard, please contact Communicable Disease Epidemiology at (406) 444-0273.

PublicHealth IN THE 406

MONTANA COMMUNICABLE DISEASE EPIDEMIOLOGY

Montana 2025-2026 COVID-19, Influenza, and RSV Surveillance

Updated 1/9/2026

Data Dictionary

What is an MMWR Week?

MMWR weeks are standardized ways to count weeks. MMWR weeks are used by the Centers for Disease Control and Prevention (CDC) and other public health organizations to track public health data. Utilizing MMWR weeks allows for consistent and comparable data collection among years.

What is a Case Rate per 10,000 Persons?

A case rate is a valuable tool that we use at CDEpi to compare respiratory illness activity between counties with different population sizes. To calculate the case rate per 10,000 persons for each county, we divide the total number of cases by the total population estimate, then multiply by 10,000.

For example, 100 cases of COVID-19 in a county with a population of 2,000 people would result in a case rate of 500 cases per 10,000 people. If there are 100 cases of COVID-19 in a county with a population of 100,000 people, the case rate would be 10 cases per 10,000 people. The difference between the case rates indicates that the smaller county is experiencing much more COVID-19 activity compared to the larger county even though they have the same number of cases.

The scale on the **Respiratory Activity by County** tab was updated to "0-20 cases per 10,000" on November 21, 2025, in order to better visualize activity occurring throughout the season.

Changes to COVID-19 Surveillance Practices

COVID-19 is a reportable condition in Montana as established in Administrative Rule 37.114.203. For disease surveillance purposes, Montana counts COVID-19 cases following the guidelines set by the Centers for Disease Control and Prevention (CDC).

From 2020-2022, during the U.S. COVID-19 Public Health Emergency, any person testing positive for COVID-19 by any method, including home testing, were included in state case counts. Beginning in 2023, after the U.S. COVID-19 Public Health Emergency ended, any person testing positive for COVID-19 with a test performed at a laboratory or testing performed by a clinician, pharmacy, school nurse, or emergency department or other healthcare settings (*i.e.*, not a home test) were included in state case counts.

COVID-19 and Influenza Death Classification

COVID-19 and influenza deaths are defined as deaths when COVID-19 or influenza is listed as a cause of death on an individual's death certificate and/or a public health case investigation determines a death to be related to COVID-19 or influenza infection.

Emergency Department Data

This season, Montana has over 50 emergency departments participating in reporting ED visits to ESSENCE, with 27 of those facilities reporting ILI data to CDC's ILI-Net. https://gis.cdc.gov/grasp/fluview/fluportaldashboard.html