

IEM's AI Modeling: Short-term COVID-19 Projections

Date: 12/3/20

Leveraging over 15 years of support to HHS for medical consequence modeling and our proprietary artificial intelligence (AI) models, IEM believes that our Coronavirus model outputs can be used to assist localities and their medical facilities to better prepare for an increase in hospitalizations, to better plan for and locate drive-through testing facilities, and to determine where increased levels of transmission may be occurring.

We have been refining our AI model over the past month and are confident in its ability to provide accurate 7-day projections that can be used for operational and logistical planning.

AI-based Model Background

IEM is currently using an AI model to fit data from various sources and project new cases of COVID-19. We do <u>not</u> assume the average number of secondary infections (R-value) stays the same over time. IEM's AI model finds the best R-value over time to evaluate how it changes over the course of the outbreak. The IEM modeling team is running ~11 million simulations to fit each state's data and using the best fit for the R-value to project new cases over the next 7 days. The AI models are executed on a daily basis to evaluate the changing dynamics of the COVID-19 pandemic. Our projections have typically been within 10%, and are often within 5%, of actual confirmed cases.

The projections shown in this document are based on data pulled in as of 12/3/20 9 a.m.

Please provide any feedback or send any questions that you might have to us. We are continually updating and improving the model, so your feedback is critical.

Also, if you have more current or refined data for your State, Commonwealth or Territory that you would like IEM to factor in, please let us know.

IEM's Modeling Lead

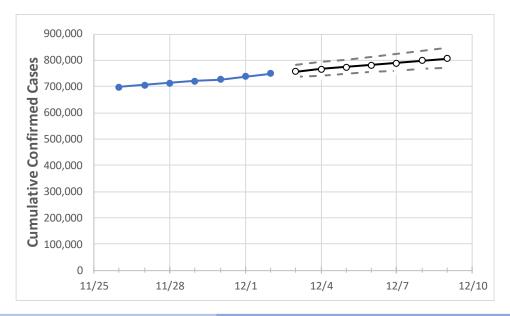
Dr. Prasith "Sid" Baccam is a **Computational Epidemiologist expert** at IEM with more than **20 years of experience in medical consequence modeling and simulation of disease outbreaks** and medical consequences following hypothetical attacks with biological agents or emerging infectious diseases. He develops key simulation models and decision support tools at IEM, specializing in public health, disaster response, and medical countermeasures (MCM) to enhance data-driven decision making and improve modeling assumptions.

Upon receiving his **Ph.D. in Applied Mathematics and Immunobiology** at lowa State University, Dr. Baccam worked as a Postdoctoral Research Associate at Los Alamos National Laboratory where he focused on researching viral and immunological modeling. After his stint at Los Alamos, Dr. Baccam has served as Task Lead in multiple public health projects have allowed him to develop expertise as a mathematical biologist and a leader on high-performance modeling and simulation teams.

He has worked with state and local public health officials as well as Federal agencies, including **HHS**, the Centers for Disease Control and Prevention (**CDC**), and the Department of Homeland Security (**DHS**). Dr. Baccam has published numerous papers on public health response models and implications on policy and has been invited to participate in workshops and symposiums held by the Institute of Medicine (now the National Academy of Health). His modeling results have been briefed to the **Executive Office of the President** and informed two presidential policy actions.



Illinois State Projections



Ac	tual Confirr	ned Cases (On:	Projected Cases For:										
11/29	11/30	12/1	12/2	12/3	12/4	12/5	12/6	12/7	12/8	12/9				
720,114	726,304	738,846	748,603	757,185	765,630	773,942	782,123	790,175	798,100	805,899				

Note: The State's projection shows a "best estimate" curve (the solid line with circles) and the dotted lines are the upper and lower estimates around that best estimate. Our projections have typically been within 20%, and are often within 10%, of actual confirmed cases.

Illinois Counties

Illinois

	Actua	l Confirn	ned Case	s On:	Projected Cases For:								
	11/29	11/30	12/1	12/2	12/3	12/4	12/5	12/6	12/7	12/8	12/9		
Cook	304,220	306,369	310,722	314,134	317,136	320,084	322,980	325,823	328,616	331,359	334,053		
DuPage	45,087	45,446	47,179	47,742	48,346	48,943	49,534	50,118	50,697	51,268	51,834		
Kane	31,767	31,955	32,533	32,910	33,247	33,578	33,904	34,224	34,539	34,848	35,152		
Lake	37,299	37,596	38,073	38,638	39,046	39,449	39,849	40,245	40,636	41,024	41,408		
McHenry	14,269	14,350	14,655	14,817	14,955	15,089	15,219	15,346	15,469	15,589	15,705		
Will	38,684	39,020	40,092	40,611	41,123	41,626	42,120	42,605	43,082	43,551	44,011		



Some recipients of our daily COVID-19 short-term (7 day) projections have requested projections of demand for: hospital bed, intensive care unit (ICU) beds, and mechanical ventilation. We realize that different states and localities will have different characteristics for hospital demand of COVID-19 cases, and we are presenting the best assumptions we could find for those medical demands based on scientific literature and health data reporting. Specifically:

- Beds: For hospitalization, we use a range of 10% and 20% of cases require hospitalization based on CDC's report (MMWR, March 18, 2020) and state reports of COVID-19 cases.
- ICU: The CDC report found that 24% of hospitalized cases require ICU care.
- Ventilators: Based on clinical data from China and state reports, we assume that 50% of ICU cases require a ventilator.

If you have other estimates for these assumptions, please share them with us as we work to refine our modeling, assumptions, and data on a daily basis.

The medical demands shown in the table assume 20% of **cumulative** confirmed cases require hospitalization. To get the medical demand for the assumption that 10% of confirmed cases require hospitalization, simply divide the demand by 2.

Illinois Medical Demands by County

	Actua	al Confirm	ned Case	s On:	Projected Cases (Hospitalized) [ICU] {Ventilator} For:											
	11/29	11/30	12/1	12/2	12/4					12/8						
Cook	304,220	306,369	310,722	314,134	320,084	(64,017)	[15,364]	[7,682]	325,823	(65,165)	[15,640]	{7,820}	331,359	(66,272)	[15,905]	[7,953]
DuPage	45,087	45,446	47,179	47,742	48,943	(9,789)	[2,349]	{1,175}	50,118	(10,024)	[2,406]	{1,203}	51,268	(10,254)	[2,461]	{1,230}
Kane	31,767	31,955	32,533	32,910	33,578	(6,716)	[1,612]	{806}	34,224	(6,845)	[1,643]	{821}	34,848	(6,970)	[1,673]	{836}
Lake	37,299	37,596	38,073	38,638	39,449	(7,890)	[1,894]	{947}	40,245	(8,049)	[1,932]	{966}	41,024	(8,205)	[1,969]	{985}
McHenry	14,269	14,350	14,655	14,817	15,08	9 (3,018) [724]	{362}	15,34	6 (3,069	737]	{368}	15,58	9 (3,118	[748]	{374}
Will	38,684	39,020	40,092	40,611	41,626	(8,325)	[1,998]	{999}	42,605	(8,521)	[2,045]	{1,023}	43,551	(8,710)	[2,090]	{1,045}

For additional information from IEM, please contact Bryan Koon, Vice President of Emergency Management and Homeland Security at bryan.koon@iem.com or 850-519-7966 or Stephanie Tennyson at stephanie.tennyson@iem.com or 202-309-4257.

