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

Date: 2/22/21

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 not 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 2/22/21 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.

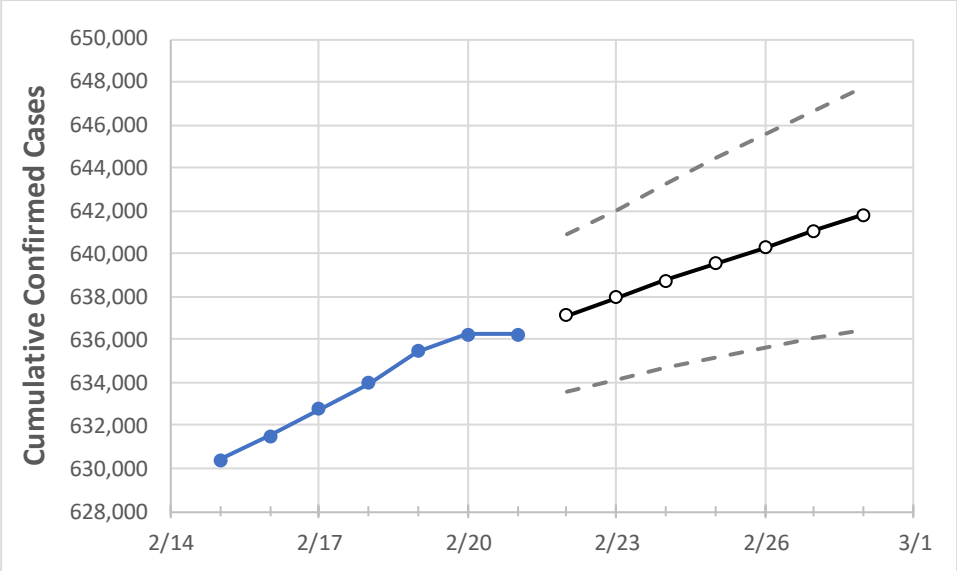
IEM's Modeling Lead

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 Iowa 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.

Michigan State Projections



	Actual Confirmed Cases On:				Projected Cases For:						
	2/18	2/19	2/20	2/21	2/22	2/23	2/24	2/25	2/26	2/27	2/28
Michigan	633,973	635,446	636,269	636,269	637,115	637,950	638,742	639,551	640,303	641,064	641,808

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 10%, and are often within 5%, of actual confirmed cases.

Michigan Counties

	Actual Confirmed Cases On:				Projected Cases For:						
	2/18	2/19	2/20	2/21	2/22	2/23	2/24	2/25	2/26	2/27	2/28
Genesee	25,055	25,109	25,129	25,129	25,158	25,185	25,212	25,238	25,264	25,289	25,313
Ingham	16,037	16,080	16,090	16,090	16,122	16,155	16,186	16,217	16,246	16,274	16,301
Kent	50,983	51,092	51,149	51,149	51,222	51,291	51,364	51,431	51,497	51,561	51,625
Livingston	10,068	10,093	10,113	10,113	10,127	10,141	10,155	10,168	10,181	10,192	10,204
Macomb	57,785	57,907	58,002	58,002	58,076	58,147	58,216	58,288	58,358	58,423	58,486
Monroe	9,567	9,600	9,614	9,614	9,628	9,640	9,653	9,664	9,676	9,688	9,699
Oakland	73,470	73,653	73,744	73,744	73,855	73,964	74,065	74,169	74,275	74,368	74,464
Washtenaw	18,140	18,233	18,279	18,279	18,334	18,390	18,442	18,493	18,545	18,595	18,644
Wayne	100,033	100,239	100,372	100,372	100,503	100,638	100,763	100,886	101,005	101,123	101,239

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.*

Michigan Medical Demands by County

	Actual Confirmed Cases On:				Projected Cases (Hospitalized) [ICU] {Ventilator} For:		
	2/18	2/19	2/20	2/21	2/23	2/25	2/27
Genesee	25,055	25,109	25,129	25,129	25,185 (5,037) [1,209] {604}	25,238 (5,048) [1,211] {606}	25,289 (5,058) [1,214] {607}
Ingham	16,037	16,080	16,090	16,090	16,155 (3,231) [775] {388}	16,217 (3,243) [778] {389}	16,274 (3,255) [781] {391}
Kent	50,983	51,092	51,149	51,149	51,291 (10,258) [2,462] {1,231}	51,431 (10,286) [2,469] {1,234}	51,561 (10,312) [2,475] {1,237}
Livingston	10,068	10,093	10,113	10,113	10,141 (2,028) [487] {243}	10,168 (2,034) [488] {244}	10,192 (2,038) [489] {245}
Macomb	57,785	57,907	58,002	58,002	58,147 (11,629) [2,791] {1,396}	58,288 (11,658) [2,798] {1,399}	58,423 (11,685) [2,804] {1,402}
Monroe	9,567	9,600	9,614	9,614	9,640 (1,928) [463] {231}	9,664 (1,933) [464] {232}	9,688 (1,938) [465] {233}
Oakland	73,470	73,653	73,744	73,744	73,964 (14,793) [3,550] {1,775}	74,169 (14,834) [3,560] {1,780}	74,368 (14,874) [3,570] {1,785}
Washtenaw	18,140	18,233	18,279	18,279	18,390 (3,678) [883] {441}	18,493 (3,699) [888] {444}	18,595 (3,719) [893] {446}
Wayne	100,033	100,239	100,372	100,372	100,638 (20,128) [4,831] {2,415}	100,886 (20,177) [4,843] {2,421}	101,123 (20,225) [4,854] {2,427}

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.