

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

Date: 2/26/21

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 <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 2/26/21 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**

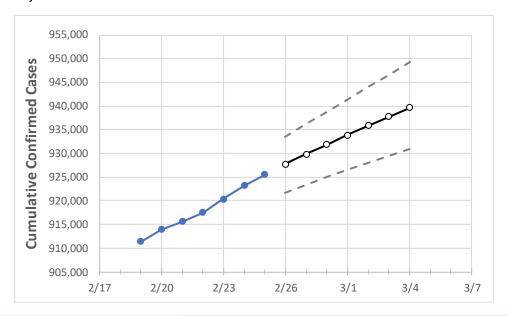
Dr. Prasith "Sid" Baccam is a **Computational Epidemiologist expert** at IEM with more than **20 years of experience in medical consequence modeling and simulation of disease outbreaks** and medical consequences following hypothetical attacks with biological agents or emerging infectious diseases. He 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.



# Pennsylvania State Projections



	Actual Confirmed Cases On:				Projected Cases For:						
	2/22	2/23	2/24	2/25	2/26	2/27	2/28	3/1	3/2	3/3	3/4
Pennsylvania	917.565	920,385	923.174	925,563	927.707	929.809	931.873	933.908	935.873	937.780	939.653

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.

# **Pennsylvania Counties**

	Actual Confirmed Cases On:				Projected Cases For:						
	2/22	2/23	2/24	2/25	2/26	2/27	2/28	3/1	3/2	3/3	3/4
Allegheny	74,976	75,250	75,500	75,724	75,937	76,151	76,359	76,566	76,774	76,974	77,178
Berks	35,105	35,180	35,302	35,370	35,437	35,501	35,561	35,620	35,676	35,732	35,785
Bucks	44,105	44,251	44,413	44,554	44,679	44,800	44,917	45,034	45,146	45,256	45,359
Butler	13,705	13,741	13,789	13,815	13,843	13,871	13,899	13,925	13,951	13,976	14,000
Chester	27,544	27,636	27,732	27,851	27,927	28,002	28,077	28,149	28,220	28,289	28,361
Delaware	40,132	40,241	40,383	40,512	40,609	40,704	40,799	40,888	40,981	41,066	41,153
Lackawanna	13,629	13,670	13,725	13,772	13,817	13,862	13,908	13,952	13,995	14,037	14,080
Lancaster	42,843	42,945	43,120	43,240	43,360	43,473	43,581	43,687	43,787	43,887	43,981
Lehigh	30,230	30,315	30,391	30,481	30,547	30,608	30,671	30,732	30,792	30,849	30,905
Luzerne	24,543	24,593	24,666	24,737	24,789	24,841	24,891	24,938	24,986	25,031	25,075
Monroe	9,435	9,488	9,520	9,543	9,573	9,603	9,631	9,661	9,690	9,718	9,745
Montgomery	52,898	53,049	53,231	53,371	53,506	53,638	53,768	53,896	54,020	54,140	54,257
Northampton	26,208	26,356	26,453	26,549	26,648	26,744	26,837	26,928	27,021	27,110	27,196
Philadelphia	116,726	117,022	117,318	117,642	117,865	118,086	118,307	118,526	118,743	118,950	119,156
Westmoreland	26,351	26,429	26,497	26,550	26,607	26,663	26,719	26,774	26,829	26,880	26,933
York	35,231	35,332	35,447	35,528	35,612	35,694	35,776	35,852	35,925	35,992	36,060



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.

### Pennsylvania Medical Demands by County

	Actual Confirmed Cases On:			On:	Projected Cases (Hospitalized) [ICU] {Ventilator} For:					
	2/22	2/23	2/24	2/25	2/27	3/1	3/3			
Allegheny	74,976	75,250	75,500	75,724	76,151 (15,230) [3,655] {1,828}	76,566 (15,313) [3,675] {1,838}	76,974 (15,395) [3,695] {1,847}			
Berks	35,105	35,180	35,302	35,370	35,501 (7,100) [1,704] {852}	35,620 (7,124) [1,710] {855}	35,732 (7,146) [1,715] {858}			
Bucks	44,105	44,251	44,413	44,554	44,800 (8,960) [2,150] {1,075}	45,034 (9,007) [2,162] {1,081}	45,256 (9,051) [2,172] {1,086}			
Butler	13,705	13,741	13,789	13,815	13,871 (2,774) [666] {333}	13,925 (2,785) [668] {334}	13,976 (2,795) [671] {335}			
Chester	27,544	27,636	27,732	27,851	28,002 (5,600) [1,344] {672}	28,149 (5,630) [1,351] {676}	28,289 (5,658) [1,358] {679}			
Delaware	40,132	40,241	40,383	40,512	40,704 (8,141) [1,954] {977}	40,888 (8,178) [1,963] {981}	41,066 (8,213) [1,971] {986}			
Lackawanna	13,629	13,670	13,725	13,772	13,862 (2,772) [665] {333}	13,952 (2,790) [670] {335}	14,037 (2,807) [674] {337}			
Lancaster	42,843	42,945	43,120	43,240	43,473 (8,695) [2,087] {1,043}	43,687 (8,737) [2,097] {1,048}	43,887 (8,777) [2,107] {1,053}			
Lehigh	30,230	30,315	30,391	30,481	30,608 (6,122) [1,469] {735}	30,732 (6,146) [1,475] {738}	30,849 (6,170) [1,481] {740}			
Luzerne	24,543	24,593	24,666	24,737	24,841 (4,968) [1,192] {596}	24,938 (4,988) [1,197] {599}	25,031 (5,006) [1,201] {601}			
Monroe	9,435	9,488	9,520	9,543	9,603 (1,921) [461] {230}	9,661 (1,932) [464] {232}	9,718 (1,944) [466] {233}			
Montgomery	52,898	53,049	53,231	53,371	53,638 (10,728) [2,575] {1,287}	53,896 (10,779) [2,587] {1,293}	54,140 (10,828) [2,599] {1,299}			
Northampton	26,208	26,356	26,453	26,549	26,744 (5,349) [1,284] {642}	26,928 (5,386) [1,293] {646}	27,110 (5,422) [1,301] {651}			
Philadelphia	116,726	117,022	117,318	117,642	118,086 (23,617) [5,668] {2,834}	118,526 (23,705) [5,689] {2,845}	118,950 (23,790) [5,710] {2,855}			
Westmoreland	26,351	26,429	26,497	26,550	26,663 (5,333) [1,280] {640}	26,774 (5,355) [1,285] {643}	26,880 (5,376) [1,290] {645}			
York	35,231	35,332	35,447	35,528	35,694 (7,139) [1,713] {857}	35,852 (7,170) [1,721] {860}	35,992 (7,198) [1,728] {864}			

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

