

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

Date: 8/27/21

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 8/27/21 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

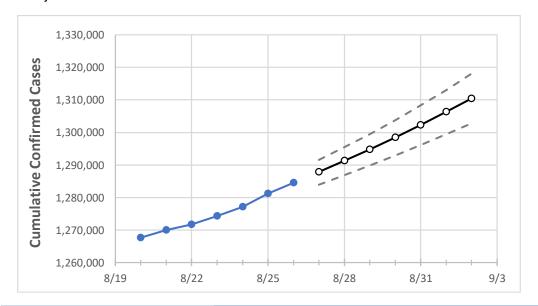
Dr. Prasith "Sid" Baccam is a **Computational Epidemiologist expert** at IEM with more than **20 years of experience in medical consequence modeling and simulation of disease outbreaks** and medical consequences following hypothetical attacks with biological agents or emerging infectious diseases. He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

 8/23
 8/24
 8/25
 8/26
 8/27
 8/28
 8/29
 8/30
 8/31
 9/1
 9/2

Pennsylvania

 $1,274,337 \ 1,277,105 \ 1,281,199 \ 1,284,532 \ 1,287,850 \ 1,291,281 \ 1,294,779 \ 1,298,497 \ 1,302,315 \ 1,306,326 \ 1,310,395 \ 1,274,337 \ 1,27$

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:						
	8/23	8/24	8/25	8/26	8/27	8/28	8/29	8/30	8/31	9/1	9/2
Allegheny	107,471	107,734	108,052	108,318	108,609	108,909	109,224	109,542	109,866	110,202	110,554
Berks	50,155	50,244	50,365	50,443	50,535	50,635	50,732	50,837	50,943	51,055	51,167
Bucks	63,680	63,794	63,926	64,111	64,255	64,403	64,554	64,708	64,873	65,037	65,206
Butler	18,537	18,597	18,664	18,728	18,794	18,861	18,932	19,007	19,085	19,168	19,252
Chester	42,941	43,010	43,111	43,250	43,347	43,443	43,544	43,645	43,748	43,855	43,961
Delaware	54,734	54,833	54,969	55,128	55,253	55,381	55,515	55,652	55,793	55,942	56,096
Lackawanna	19,209	19,242	19,254	19,303	19,336	19,369	19,404	19,439	19,476	19,514	19,554
Lancaster	58,128	58,240	58,447	58,611	58,768	58,930	59,095	59,268	59,447	59,632	59,821
Lehigh	41,803	41,923	42,090	42,178	42,296	42,417	42,546	42,678	42,813	42,956	43,102
Luzerne	33,431	33,496	33,576	33,643	33,712	33,781	33,854	33,930	34,007	34,090	34,172
Monroe	15,793	15,836	15,880	15,919	15,959	16,000	16,041	16,082	16,125	16,169	16,211
Montgomery	74,052	74,191	74,466	74,699	74,869	75,035	75,206	75,388	75,562	75,757	75,941
Northampton	38,017	38,122	38,255	38,323	38,421	38,517	38,617	38,720	38,825	38,930	39,038
Philadelphia	163,018	163,322	164,044	164,447	164,930	165,413	165,928	166,437	166,977	167,548	168,116
Westmoreland	35,926	36,018	36,154	36,252	36,367	36,484	36,608	36,737	36,877	37,022	37,176
York	49,273	49,361	49,535	49,670	49,807	49,947	50,092	50,240	50,399	50,559	50,725



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:			Projected Cases (Hospitalized) [ICU] {Ventilator} For:							
	8/23	8/24	8/25	8/26	8/28		8/30	9/1			
Allegheny	107,471	107,734	108,052	108,318	108,909 (21,782) [5,228]	{2,614}	109,542 (21,908) [5,258] {2	2,629} 110,202 (22,040) [5,290] {2,645}			
Berks	50,155	50,244	50,365	50,443	50,635 (10,127) [2,431]	{1,215}	50,837 (10,167) [2,440] {1,	1,220} 51,055 (10,211) [2,451] {1,225}			
Bucks	63,680	63,794	63,926	64,111	64,403 (12,881) [3,091]	{1,546}	64,708 (12,942) [3,106] {1,	1,553} 65,037 (13,007) [3,122] {1,561}			
Butler	18,537	18,597	18,664	18,728	18,861 (3,772) [905]	{453}	19,007 (3,801) [912] {45	56} 19,168 (3,834) [920] {460}			
Chester	42,941	43,010	43,111	43,250	43,443 (8,689) [2,085]	{1,043}	43,645 (8,729) [2,095] {1,	,047} 43,855 (8,771) [2,105] {1,053}			
Delaware	54,734	54,833	54,969	55,128	55,381 (11,076) [2,658]	{1,329}	55,652 (11,130) [2,671] {1,	1,336} 55,942 (11,188) [2,685] {1,343}			
Lackawanna	19,209	19,242	19,254	19,303	19,369 (3,874) [930]	{465}	19,439 (3,888) [933] {46	67} 19,514 (3,903) [937] {468}			
Lancaster	58,128	58,240	58,447	58,611	58,930 (11,786) [2,829]	{1,414}	59,268 (11,854) [2,845] {1,	1,422} 59,632 (11,926) [2,862] {1,431}			
Lehigh	41,803	41,923	42,090	42,178	42,417 (8,483) [2,036]	{1,018}	42,678 (8,536) [2,049] {1,	,024} 42,956 (8,591) [2,062] {1,031}			
Luzerne	33,431	33,496	33,576	33,643	33,781 (6,756) [1,622]	{811}	33,930 (6,786) [1,629] {8	814} 34,090 (6,818) [1,636] {818}			
Monroe	15,793	15,836	15,880	15,919	16,000 (3,200) [768]	{384}	16,082 (3,216) [772] {38	86} 16,169 (3,234) [776] {388}			
Montgomery	74,052	74,191	74,466	74,699	75,035 (15,007) [3,602]	{1,801}	75,388 (15,078) [3,619] {1,	1,809} 75,757 (15,151) [3,636] {1,818}			
Northampton	38,017	38,122	38,255	38,323	38,517 (7,703) [1,849]	{924}	38,720 (7,744) [1,859] {9	929} 38,930 (7,786) [1,869] {934}			
Philadelphia	163,018	163,322	164,044	164,447	165,413 (33,083) [7,940]	{3,970}	166,437 (33,287) [7,989] {3	3,994} 167,548 (33,510) [8,042] {4,021}			
Westmoreland	35,926	36,018	36,154	36,252	36,484 (7,297) [1,751]	{876}	36,737 (7,347) [1,763] {8	882} 37,022 (7,404) [1,777] {889}			
York	49,273	49,361	49,535	49,670	49,947 (9,989) [2,397]	{1,199}	50,240 (10,048) [2,412] {1,	1,206} 50,559 (10,112) [2,427] {1,213}			

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.

