

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

Date: 9/27/21

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 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 9/27/21 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.

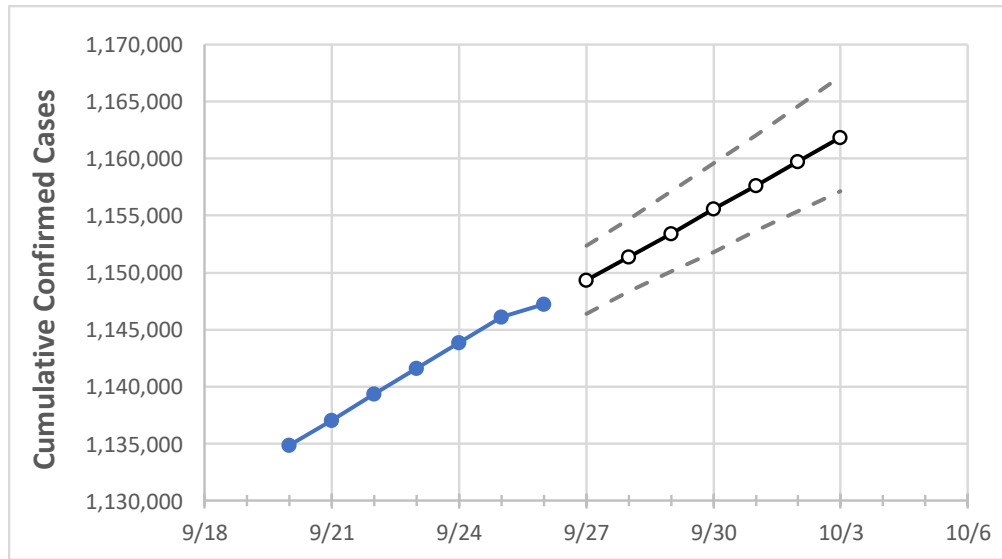
IEM's Modeling Lead

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.

New Jersey State Projections



	Actual Confirmed Cases On:				Projected Cases For:						
	9/23	9/24	9/25	9/26	9/27	9/28	9/29	9/30	10/1	10/2	10/3
New Jersey	1,141,619	1,143,855	1,146,089	1,147,199	1,149,303	1,151,405	1,153,431	1,155,594	1,157,630	1,159,732	1,161,817

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.

New Jersey Counties

	Actual Confirmed Cases On:				Projected Cases For:						
	9/23	9/24	9/25	9/26	9/27	9/28	9/29	9/30	10/1	10/2	10/3
Bergen	115,270	115,505	115,691	115,835	116,021	116,205	116,388	116,568	116,757	116,941	117,130
Burlington	51,265	51,395	51,550	51,617	51,739	51,863	51,982	52,104	52,229	52,353	52,476
Camden	63,921	64,081	64,266	64,356	64,533	64,703	64,876	65,053	65,228	65,403	65,587
Essex	103,488	103,653	103,808	103,888	104,034	104,178	104,321	104,464	104,611	104,754	104,903
Gloucester	35,694	35,786	35,894	35,931	36,037	36,148	36,254	36,362	36,473	36,582	36,698
Hudson	95,139	95,240	95,342	95,397	95,498	95,592	95,691	95,787	95,885	95,982	96,080
Hunterdon	11,258	11,278	11,303	11,313	11,336	11,358	11,380	11,402	11,424	11,447	11,469
Mercer	37,755	37,812	37,888	37,917	37,983	38,049	38,118	38,187	38,256	38,323	38,392
Middlesex	102,436	102,595	102,743	102,798	102,962	103,123	103,280	103,444	103,600	103,765	103,926
Monmouth	87,806	87,989	88,125	88,227	88,387	88,544	88,700	88,860	89,015	89,172	89,325
Morris	55,553	55,645	55,724	55,783	55,865	55,943	56,021	56,101	56,176	56,254	56,335
Ocean	88,282	88,552	88,811	88,935	89,181	89,436	89,681	89,934	90,182	90,439	90,701
Passaic	79,194	79,324	79,392	79,436	79,547	79,654	79,764	79,872	79,985	80,099	80,212
Somerset	33,602	33,657	33,722	33,745	33,803	33,861	33,918	33,978	34,038	34,096	34,156
Sussex	15,846	15,904	15,948	15,983	16,031	16,080	16,129	16,180	16,230	16,282	16,335
Union	77,932	78,019	78,195	78,212	78,324	78,429	78,540	78,645	78,757	78,866	78,978
Warren	11,304	11,333	11,355	11,372	11,395	11,418	11,442	11,464	11,486	11,509	11,530

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.

New Jersey Medical Demands by County

	Actual Confirmed Cases On:				Projected Cases (Hospitalized) [ICU] {Ventilator} For:											
	9/23	9/24	9/25	9/26	9/28			9/30			10/2					
Bergen	115,270	115,505	115,691	115,835	116,205	(23,241)	[5,578]	{2,789}	116,568	(23,314)	[5,595]	{2,798}	116,941	(23,388)	[5,613]	{2,807}
Burlington	51,265	51,395	51,550	51,617	51,863	(10,373)	[2,489]	{1,245}	52,104	(10,421)	[2,501]	{1,250}	52,353	(10,471)	[2,513]	{1,256}
Camden	63,921	64,081	64,266	64,356	64,703	(12,941)	[3,106]	{1,553}	65,053	(13,011)	[3,123]	{1,561}	65,403	(13,081)	[3,139]	{1,570}
Essex	103,488	103,653	103,808	103,888	104,178	(20,836)	[5,001]	{2,500}	104,464	(20,893)	[5,014]	{2,507}	104,754	(20,951)	[5,028]	{2,514}
Gloucester	35,694	35,786	35,894	35,931	36,148	(7,230)	[1,735]	{868}	36,362	(7,272)	[1,745]	{873}	36,582	(7,316)	[1,756]	{878}
Hudson	95,139	95,240	95,342	95,397	95,592	(19,118)	[4,588]	{2,294}	95,787	(19,157)	[4,598]	{2,299}	95,982	(19,196)	[4,607]	{2,304}
Hunterdon	11,258	11,278	11,303	11,313	11,358	(2,272)	[545]	{273}	11,402	(2,280)	[547]	{274}	11,447	(2,289)	[549]	{275}
Mercer	37,755	37,812	37,888	37,917	38,049	(7,610)	[1,826]	{913}	38,187	(7,637)	[1,833]	{916}	38,323	(7,665)	[1,840]	{920}
Middlesex	102,436	102,595	102,743	102,798	103,123	(20,625)	[4,950]	{2,475}	103,444	(20,689)	[4,965]	{2,483}	103,765	(20,753)	[4,981]	{2,490}
Monmouth	87,806	87,989	88,125	88,227	88,544	(17,709)	[4,250]	{2,125}	88,860	(17,772)	[4,265]	{2,133}	89,172	(17,834)	[4,280]	{2,140}
Morris	55,553	55,645	55,724	55,783	55,943	(11,189)	[2,685]	{1,343}	56,101	(11,220)	[2,693]	{1,346}	56,254	(11,251)	[2,700]	{1,350}
Ocean	88,282	88,552	88,811	88,935	89,436	(17,887)	[4,293]	{2,146}	89,934	(17,987)	[4,317]	{2,158}	90,439	(18,088)	[4,341]	{2,171}
Passaic	79,194	79,324	79,392	79,436	79,654	(15,931)	[3,823]	{1,912}	79,872	(15,974)	[3,834]	{1,917}	80,099	(16,020)	[3,845]	{1,922}
Somerset	33,602	33,657	33,722	33,745	33,861	(6,772)	[1,625]	{813}	33,978	(6,796)	[1,631]	{815}	34,096	(6,819)	[1,637]	{818}
Sussex	15,846	15,904	15,948	15,983	16,080	(3,216)	[772]	{386}	16,180	(3,236)	[777]	{388}	16,282	(3,256)	[782]	{391}
Union	77,932	78,019	78,195	78,212	78,429	(15,686)	[3,765]	{1,882}	78,645	(15,729)	[3,775]	{1,887}	78,866	(15,773)	[3,786]	{1,893}
Warren	11,304	11,333	11,355	11,372	11,418	(2,284)	[548]	{274}	11,464	(2,293)	[550]	{275}	11,509	(2,302)	[552]	{276}

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.