

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

Date: 2/16/22

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 2/16/22 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.

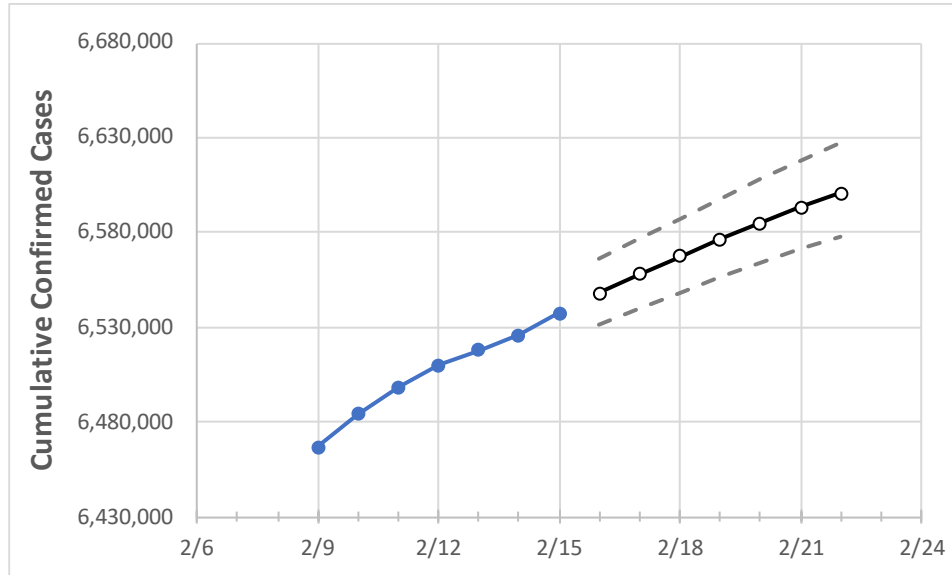
IEM's Modeling Lead

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.

Texas State Projections



	Actual Confirmed Cases On:				Projected Cases For:						
	2/12	2/13	2/14	2/15	2/16	2/17	2/18	2/19	2/20	2/21	2/22
Texas	6,509,857	6,517,733	6,525,631	6,537,378	6,548,090	6,557,942	6,567,537	6,576,419	6,585,088	6,593,291	6,600,852

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.

Texas Counties

	Actual Confirmed Cases On:				Projected Cases For:						
	2/12	2/13	2/14	2/15	2/16	2/17	2/18	2/19	2/20	2/21	2/22
Bexar	534,398	535,320	535,779	537,137	538,128	539,043	539,932	540,745	541,544	542,275	542,995
Brazoria	91,583	91,700	91,805	91,890	92,026	92,164	92,288	92,416	92,531	92,648	92,751
Brazos	59,047	59,092	59,140	59,171	59,267	59,349	59,430	59,504	59,587	59,660	59,731
Collin	199,991	200,208	200,365	200,796	201,164	201,505	201,819	202,151	202,449	202,733	203,013
Dallas	559,449	560,219	560,583	561,344	562,071	562,730	563,363	563,920	564,507	565,049	565,601
Denton	172,742	172,936	173,131	173,542	174,043	174,525	175,002	175,425	175,906	176,336	176,768
El Paso	201,027	201,229	201,409	201,668	201,953	202,210	202,455	202,702	202,923	203,134	203,333
Ellis	47,573	47,624	47,650	47,698	47,752	47,804	47,850	47,894	47,936	47,976	48,014
Fort Bend	171,645	171,931	172,124	172,463	172,800	173,129	173,430	173,743	174,031	174,323	174,588
Galveston	93,568	93,691	93,785	93,870	94,036	94,199	94,348	94,497	94,642	94,785	94,915
Harris	978,751	979,981	980,940	981,878	983,061	984,170	985,213	986,238	987,221	988,147	989,050
Hidalgo	184,443	185,582	186,418	187,453	188,155	188,796	189,421	190,072	190,692	191,319	191,883
Johnson	41,168	41,211	41,232	41,296	41,355	41,413	41,465	41,514	41,563	41,606	41,654
Lubbock	92,466	92,511	92,533	92,600	92,680	92,754	92,825	92,890	92,951	93,006	93,059
McLennan	54,785	54,838	54,869	55,393	55,481	55,569	55,648	55,722	55,797	55,879	55,944
Montgomery	133,207	133,377	133,527	133,693	133,888	134,062	134,239	134,401	134,557	134,706	134,848
Tarrant	550,325	550,588	550,850	551,557	552,713	553,829	554,930	555,884	556,892	557,919	558,747
Travis	216,360	216,611	216,882	217,131	217,415	217,682	217,933	218,167	218,396	218,607	218,815
Williamson	129,136	129,302	129,469	129,714	130,021	130,305	130,541	130,819	131,076	131,336	131,538

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.

Texas Medical Demands by County

	Actual Confirmed Cases On:				Projected Cases (Hospitalized) [ICU] {Ventilator} For:											
	2/12	2/13	2/14	2/15	2/17		2/19		2/21							
Bexar	534,398	535,320	535,779	537,137	539,043	(107,809)	[25,874]	{12,937}	540,745	(108,149)	[25,956]	{12,978}	542,275	(108,455)	[26,029]	{13,015}
Brazoria	91,583	91,700	91,805	91,890	92,164	(18,433)	[4,424]	{2,212}	92,416	(18,483)	[4,436]	{2,218}	92,648	(18,530)	[4,447]	{2,224}
Brazos	59,047	59,092	59,140	59,171	59,349	(11,870)	[2,849]	{1,424}	59,504	(11,901)	[2,856]	{1,428}	59,660	(11,932)	[2,864]	{1,432}
Collin	199,991	200,208	200,365	200,796	201,505	(40,301)	[9,672]	{4,836}	202,151	(40,430)	[9,703]	{4,852}	202,733	(40,547)	[9,731]	{4,866}
Dallas	559,449	560,219	560,583	561,344	562,730	(112,546)	[27,011]	{13,506}	563,920	(112,784)	[27,068]	{13,534}	565,049	(113,010)	[27,122]	{13,561}
Denton	172,742	172,936	173,131	173,542	174,525	(34,905)	[8,377]	{4,189}	175,425	(35,085)	[8,420]	{4,210}	176,336	(35,267)	[8,464]	{4,232}
El Paso	201,027	201,229	201,409	201,668	202,210	(40,442)	[9,706]	{4,853}	202,702	(40,540)	[9,730]	{4,865}	203,134	(40,627)	[9,750]	{4,875}
Ellis	47,573	47,624	47,650	47,698	47,804	(9,561)	[2,295]	{1,147}	47,894	(9,579)	[2,299]	{1,149}	47,976	(9,595)	[2,303]	{1,151}
Fort Bend	171,645	171,931	172,124	172,463	173,129	(34,626)	[8,310]	{4,155}	173,743	(34,749)	[8,340]	{4,170}	174,323	(34,865)	[8,367]	{4,184}
Galveston	93,568	93,691	93,785	93,870	94,199	(18,840)	[4,522]	{2,261}	94,497	(18,899)	[4,536]	{2,268}	94,785	(18,957)	[4,550]	{2,275}
Harris	978,751	979,981	980,940	981,878	984,170	(196,834)	[47,240]	{23,620}	986,238	(197,248)	[47,339]	{23,670}	988,147	(197,629)	[47,431]	{23,716}
Hidalgo	184,443	185,582	186,418	187,453	188,796	(37,759)	[9,062]	{4,531}	190,072	(38,014)	[9,123]	{4,562}	191,319	(38,264)	[9,183]	{4,592}
Johnson	41,168	41,211	41,232	41,296	41,413	(8,283)	[1,988]	{994}	41,514	(8,303)	[1,993]	{996}	41,606	(8,321)	[1,997]	{999}
Lubbock	92,466	92,511	92,533	92,600	92,754	(18,551)	[4,452]	{2,226}	92,890	(18,578)	[4,459]	{2,229}	93,006	(18,601)	[4,464]	{2,232}
McLennan	54,785	54,838	54,869	55,393	55,569	(11,114)	[2,667]	{1,334}	55,722	(11,144)	[2,675]	{1,337}	55,879	(11,176)	[2,682]	{1,341}
Montgomery	133,207	133,377	133,527	133,693	134,062	(26,812)	[6,435]	{3,217}	134,401	(26,880)	[6,451]	{3,226}	134,706	(26,941)	[6,466]	{3,233}
Tarrant	550,325	550,588	550,850	551,557	553,829	(110,766)	[26,584]	{13,292}	555,884	(111,177)	[26,682]	{13,341}	557,919	(111,584)	[26,780]	{13,390}
Travis	216,360	216,611	216,882	217,131	217,682	(43,536)	[10,449]	{5,224}	218,167	(43,633)	[10,472]	{5,236}	218,607	(43,721)	[10,493]	{5,247}
Williamson	129,136	129,302	129,469	129,714	130,305	(26,061)	[6,255]	{3,127}	130,819	(26,164)	[6,279]	{3,140}	131,336	(26,267)	[6,304]	{3,152}

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.