

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

Date: 7/21/20

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 20%, and are often within 10%, of actual confirmed cases.

The projections shown in this document are based on data pulled in as of 7/21/20 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

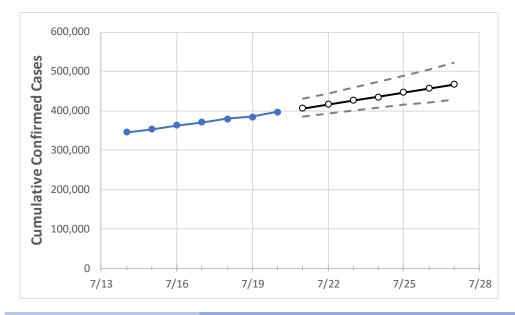
Dr. Prasith "Sid" Baccam is a **Computational Epidemiologist expert** at IEM with more than **20 years of experience in medical consequence modeling and simulation of disease outbreaks** and medical consequences following hypothetical attacks with biological agents or emerging infectious diseases. He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



California State Projections



 Actual Confirmed Cases On:
 Projected Cases For:

 7/17
 7/18
 7/19
 7/20
 7/21
 7/22
 7/23
 7/24
 7/25
 7/26
 7/27

California

370,115 379,114 384,978 396,577 406,072 415,745 425,599 435,642 445,879 456,315 466,956

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 20%, and are often within 10%, of actual confirmed cases.



California Counties

	Actual Confirmed Cases On:				Projected Cases For:						
	7/17	7/18	7/19	7/20	7/21	7/22	7/23	7/24	7/25	7/26	7/27
Alameda	8,858	9,110	9,237	9,256	9,373	9,488	9,601	9,711	9,819	9,925	10,028
Contra Costa	5,378	5,538	5,606	5,731	5,848	5,965	6,081	6,197	6,311	6,425	6,538
Fresno	9,565	9,954	10,297	10,639	10,907	11,174	11,441	11,708	11,975	12,243	12,511
Kern	7,233	7,728	8,447	9,234	9,630	10,058	10,518	11,016	11,553	12,134	12,762
Los Angeles	150,319	153,041	155,887	159,045	162,239	165,466	168,726	172,025	175,362	178,741	182,161
Marin	3,216	3,226	3,236	3,246	3,267	3,287	3,307	3,325	3,343	3,360	3,376
Monterey	3,059	3,157	3,255	3,353	3,451	3,550	3,651	3,754	3,858	3,965	4,073
Orange	28,309	29,011	29,426	29,986	30,601	31,199	31,781	32,346	32,894	33,427	33,944
Placer	1,235	1,280	1,363	1,403	1,442	1,482	1,523	1,564	1,606	1,649	1,692
Riverside	28,695	29,124	29,554	29,983	30,523	31,059	31,590	32,118	32,642	33,162	33,679
Sacramento	6,511	6,693	6,935	7,326	7,553	7,783	8,016	8,251	8,488	8,728	8,971
San Bernardino	22,867	23,566	23,772	24,099	24,657	25,217	25,779	26,344	26,913	27,485	28,061
San Diego	22,489	23,114	23,682	24,135	24,659	25,185	25,713	26,244	26,778	27,315	27,855
San Francisco	4,975	5,116	5,202	5,305	5,432	5,564	5,701	5,844	5,994	6,150	6,313
San Joaquin	7,819	7,986	8,154	8,321	8,503	8,682	8,856	9,027	9,194	9,358	9,519
San Luis Obispo	1,213	1,244	1,275	1,306	1,348	1,390	1,433	1,477	1,522	1,567	1,614
San Mateo	4,403	4,465	4,508	4,551	4,613	4,675	4,738	4,799	4,861	4,923	4,985
Santa Barbara	4,697	4,759	4,875	4,991	5,103	5,216	5,332	5,450	5,571	5,694	5,819
Santa Clara	7,131	7,300	7,456	7,795	7,999	8,208	8,424	8,647	8,876	9,111	9,355
Santa Cruz	736	772	772	772	796	823	850	880	912	947	983
Solano	2,554	2,622	2,691	2,759	2,837	2,916	2,996	3,077	3,158	3,241	3,325
Sonoma	2,027	2,068	2,121	2,169	2,226	2,283	2,342	2,402	2,463	2,524	2,587
Ventura	5,024	5,080	5,136	5,192	5,267	5,340	5,411	5,480	5,546	5,610	5,672



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.

California Medical Demand by County

	Actua	Actual Confirmed Cases On:			Projected Cases (Hospitalized) [ICU] {Ventilator} For:						
	7/17	7/18	7/19	7/20	7/2	22	7/24		7/2	6	
Alameda	8,858	9,110	9,237	9,256	9,488 (1,898)	[455] {228}	9,711 (1,942) [4	66] {233}	9,925 (1,985)	[476] {238}	
Contra Costa	5,378	5,538	5,606	5,731	5,965 (1,193)	[286] {143}	6,197 (1,239) [29	97] {149}	6,425 (1,285)	[308] {154}	
Fresno	9,565	9,954	10,297	10,639	11,174 (2,235)	[536] {268}	11,708 (2,342) [5	662] {281}	12,243 (2,449)	[588] {294}	
Kern	7,233	7,728	8,447	9,234	10,058 (2,012)	[483] {241}	11,016 (2,203) [5	529] {264}	12,134 (2,427)	[582] {291}	
Los Angeles	150,319	153,041	155,887	159,045	165,466 (33,093)	[7,942] {3,971}	172,025 (34,405) [8,	,257] {4,129}	178,741 (35,748)	[8,580] {4,290}	
Marin	3,216	3,226	3,236	3,246	3,287 (657)	[158] {79}	3,325 (665) [16	50] {80}	3,360 (672)	[161] {81}	
Monterey	3,059	3,157	3,255	3,353	3,550 (710)	[170] {85}	3,754 (751) [18	30] {90}	3,965 (793)	[190] {95}	
Orange	28,309	29,011	29,426	29,986	31,199 (6,240)	[1,498] {749}	32,346 (6,469) [1,	553] {776}	33,427 (6,685)	[1,604] {802}	
Placer	1,235	1,280	1,363	1,403	1,482 (296)	[71] {36}	1,564 (313) [7	[5] {38}	1,649 (330)	[79] {40}	
Riverside	28,695	29,124	29,554	29,983	31,059 (6,212)	[1,491] {745}	32,118 (6,424) [1,	542] {771}	33,162 (6,632)	[1,592] {796}	
Sacramento	6,511	6,693	6,935	7,326	7,783 (1,557)	[374] {187}	8,251 (1,650) [39	96] {198}	8,728 (1,746)	[419] {209}	
San Bernardino	22,867	23,566	23,772	24,099	25,217 (5,043)	[1,210] {605}	26,344 (5,269) [1,	265] {632}	27,485 (5,497)	[1,319] {660}	
San Diego	22,489	23,114	23,682	24,135	25,185 (5,037)	[1,209] {604}	26,244 (5,249) [1,	260] {630}	27,315 (5,463)	[1,311] {656}	
San Francisco	4,975	5,116	5,202	5,305	5,564 (1,113)	[267] {134}	5,844 (1,169) [28	81] {140}	6,150 (1,230)	[295] {148}	
San Joaquin	7,819	7,986	8,154	8,321	8,682 (1,736)	[417] {208}	9,027 (1,805) [43	33] {217}	9,358 (1,872)	[449] {225}	
San Luis Obispo	1,213	1,244	1,275	1,306	1,390 (278)	[67] {33}	1,477 (295) [7	1] {35}	1,567 (313)	[75] {38}	
San Mateo	4,403	4,465	4,508	4,551	4,675 (935)	[224] {112}	4,799 (960) [23	0] {115}	4,923 (985)	[236] {118}	
Santa Barbara	4,697	4,759	4,875	4,991	5,216 (1,043)	[250] {125}	5,450 (1,090) [20	62] {131}	5,694 (1,139)	[273] {137}	
Santa Clara	7,131	7,300	7,456	7,795	8,208 (1,642)	[394] {197}	8,647 (1,729) [4:	15] {208}	9,111 (1,822)	[437] {219}	
Santa Cruz	736	772	772	772	823 (165)	[39] {20}	880 (176) [42	2] {21}	947 (189)	[45] {23}	
Solano	2,554	2,622	2,691	2,759	2,916 (583)	[140] {70}	3,077 (615) [14	18] {74}	3,241 (648)	[156] {78}	
Sonoma	2,027	2,068	2,121	2,169	2,283 (457)	[110] {55}	2,402 (480) [11	15] {58}	2,524 (505)	[121] {61}	
Ventura	5,024	5,080	5,136	5,192	5,340 (1,068)	[256] {128}	5,480 (1,096) [20	63] {132}	5,610 (1,122)	[269] {135}	

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.

