

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

Date: 8/10/20

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 8/10/20 12 p.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**

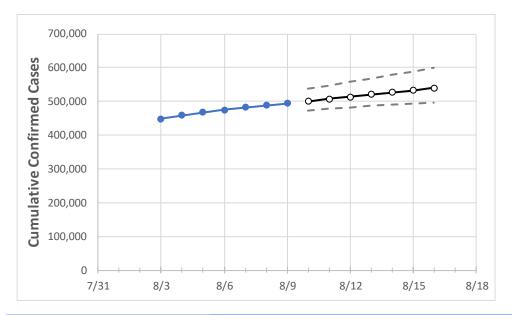
Dr. Prasith "Sid" Baccam is a **Computational Epidemiologist expert** at IEM with more than **20 years of experience in medical consequence modeling and simulation of disease outbreaks** and medical consequences following hypothetical attacks with biological agents or emerging infectious diseases. He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

 8/6
 8/7
 8/8
 8/9
 8/10
 8/11
 8/12
 8/13
 8/14
 8/15
 8/16

Texas 474,882 482,066 489,099 494,108 500,681 507,229 513,754 520,256 526,734 533,189 539,620

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.

### **Texas Counties**

	Actual Confirmed Cases On:			Projected Cases For:							
	8/6	8/7	8/8	8/9	8/10	8/11	8/12	8/13	8/14	8/15	8/16
Bexar	41,939	42,299	42,531	42,783	42,983	43,175	43,358	43,534	43,702	43,863	44,017
Brazoria	6,988	7,090	7,215	7,357	7,476	7,596	7,717	7,839	7,962	8,086	8,211
Brazos	3,973	3,997	4,024	4,040	4,057	4,074	4,090	4,106	4,122	4,136	4,151
Collin	6,857	7,074	7,268	7,439	7,521	7,604	7,689	7,774	7,861	7,949	8,038
Dallas	52,639	52,869	53,291	53,831	54,223	54,604	54,974	55,334	55,683	56,023	56,353
Denton	7,257	7,374	7,519	7,586	7,682	7,777	7,872	7,967	8,061	8,155	8,248
El Paso	15,596	15,908	16,040	16,308	16,502	16,696	16,889	17,081	17,274	17,465	17,657
Ellis	2,739	2,808	2,855	2,855	2,892	2,929	2,966	3,003	3,041	3,079	3,117
Fort Bend	8,559	8,878	9,151	9,533	9,747	9,976	10,219	10,479	10,756	11,051	11,365
Galveston	9,168	9,230	9,291	9,376	9,438	9,498	9,555	9,611	9,665	9,717	9,767
Harris	80,914	81,919	83,183	84,600	86,057	87,528	89,013	90,511	92,024	93,550	95,090
Hidalgo	18,699	19,103	19,534	19,534	19,837	20,141	20,447	20,755	21,064	21,375	21,688
Johnson	1,760	1,810	1,861	1,861	1,907	1,955	2,004	2,054	2,105	2,158	2,213
Lubbock	5,811	5,959	6,018	6,018	6,080	6,142	6,204	6,265	6,326	6,386	6,446
McLennan	4,748	4,846	4,889	4,946	5,004	5,061	5,119	5,177	5,235	5,293	5,351
Montgomery	6,459	6,510	6,577	6,577	6,626	6,674	6,721	6,766	6,811	6,855	6,897
Tarrant	30,227	30,650	30,922	31,687	32,027	32,365	32,700	33,033	33,363	33,690	34,014
Travis	22,024	22,256	22,480	22,602	22,781	22,959	23,133	23,306	23,476	23,644	23,809
Williamson	5,949	6,058	6,245	6,245	6,298	6,349	6,401	6,451	6,501	6,551	6,599



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:			s On:	Projected Cases (Hospitalized) [ICU] {Ventilator} For:					
	8/6	8/7	8/8	8/9	8/11	8/13	8/15			
Bexar	41,939	42,299	42,531	42,783	43,175 (8,635) [2,072] {1,036}	43,534 (8,707) [2,090] {1,045}	43,863 (8,773) [2,105] {1,053}			
Brazoria	6,988	7,090	7,215	7,357	7,596 (1,519) [365] {182}	7,839 (1,568) [376] {188}	8,086 (1,617) [388] {194}			
Brazos	3,973	3,997	4,024	4,040	4,074 (815) [196] {98}	4,106 (821) [197] {99}	4,136 (827) [199] {99}			
Collin	6,857	7,074	7,268	7,439	7,604 (1,521) [365] {183}	7,774 (1,555) [373] {187}	7,949 (1,590) [382] {191}			
Dallas	52,639	52,869	53,291	53,831	54,604 (10,921) [2,621] {1,310}	55,334 (11,067) [2,656] {1,328}	56,023 (11,205) [2,689] {1,345}			
Denton	7,257	7,374	7,519	7,586	7,777 (1,555) [373] {187}	7,967 (1,593) [382] {191}	8,155 (1,631) [391] {196}			
El Paso	15,596	15,908	16,040	16,308	16,696 (3,339) [801] {401}	17,081 (3,416) [820] {410}	17,465 (3,493) [838] {419}			
Ellis	2,739	2,808	2,855	2,855	2,929 (586) [141] {70}	3,003 (601) [144] {72}	3,079 (616) [148] {74}			
Fort Bend	8,559	8,878	9,151	9,533	9,976 (1,995) [479] {239}	10,479 (2,096) [503] {251}	11,051 (2,210) [530] {265}			
Galveston	9,168	9,230	9,291	9,376	9,498 (1,900) [456] {228}	9,611 (1,922) [461] {231}	9,717 (1,943) [466] {233}			
Harris	80,914	81,919	83,183	84,600	87,528 (17,506) [4,201] {2,101}	90,511 (18,102) [4,345] {2,172}	93,550 (18,710) [4,490] {2,245}			
Hidalgo	18,699	19,103	19,534	19,534	20,141 (4,028) [967] {483}	20,755 (4,151) [996] {498}	21,375 (4,275) [1,026] {513}			
Johnson	1,760	1,810	1,861	1,861	1,955 (391) [94] {47}	2,054 (411) [99] {49}	2,158 (432) [104] {52}			
Lubbock	5,811	5,959	6,018	6,018	6,142 (1,228) [295] {147}	6,265 (1,253) [301] {150}	6,386 (1,277) [307] {153}			
McLennan	4,748	4,846	4,889	4,946	5,061 (1,012) [243] {121}	5,177 (1,035) [249] {124}	5,293 (1,059) [254] {127}			
Montgomery	6,459	6,510	6,577	6,577	6,674 (1,335) [320] {160}	6,766 (1,353) [325] {162}	6,855 (1,371) [329] {165}			
Tarrant	30,227	30,650	30,922	31,687	32,365 (6,473) [1,554] {777}	33,033 (6,607) [1,586] {793}	33,690 (6,738) [1,617] {809}			
Travis	22,024	22,256	22,480	22,602	22,959 (4,592) [1,102] {551}	23,306 (4,661) [1,119] {559}	23,644 (4,729) [1,135] {567}			
Williamson	5,949	6,058	6,245	6,245	6,349 (1,270) [305] {152}	6,451 (1,290) [310] {155}	6,551 (1,310) [314] {157}			

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.

