

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

Date: 8/14/20

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 8/14/20 1 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**

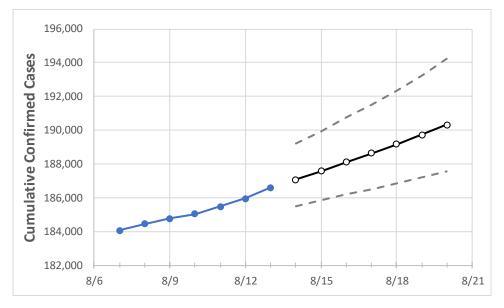
Dr. Prasith "Sid" Baccam is a **Computational Epidemiologist expert** at IEM with more than **20 years of experience in medical consequence modeling and simulation of disease outbreaks** and medical consequences following hypothetical attacks with biological agents or emerging infectious diseases. He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



# **New Jersey State Projections**



 Actual Confirmed Cases On:
 Projected Cases For:

 8/10
 8/11
 8/12
 8/13
 8/14
 8/15
 8/16
 8/17
 8/18
 8/19
 8/20

**New Jersey** 

185,031 185,475 185,938 186,594 187,081 187,583 188,100 188,632 189,180 189,744 190,324

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.

## **New Jersey Counties**

	Actual Confirmed Cases On:				Projected Cases For:						
	8/10	8/11	8/12	8/13	8/14	8/15	8/16	8/17	8/18	8/19	8/20
Bergen	20,825	20,864	20,899	20,940	20,983	21,026	21,071	21,118	21,165	21,214	21,263
Burlington	6,025	6,042	6,069	6,094	6,123	6,154	6,184	6,216	6,249	6,283	6,317
Camden	8,580	8,614	8,645	8,689	8,722	8,755	8,789	8,823	8,857	8,892	8,927
Essex	19,747	19,776	19,813	19,840	19,869	19,899	19,929	19,960	19,992	20,025	20,058
Gloucester	3,258	3,283	3,310	3,339	3,362	3,386	3,411	3,436	3,462	3,488	3,516
Hudson	19,683	19,717	19,749	19,792	19,818	19,845	19,872	19,901	19,931	19,961	19,993
Hunterdon	1,149	1,150	1,150	1,151	1,152	1,153	1,154	1,155	1,156	1,157	1,158
Mercer	8,127	8,139	8,143	8,164	8,174	8,185	8,196	8,206	8,217	8,228	8,239
Middlesex	17,932	17,959	17,988	18,015	18,040	18,065	18,091	18,116	18,142	18,167	18,193
Monmouth	10,326	10,348	10,368	10,407	10,435	10,462	10,490	10,519	10,547	10,576	10,605
Morris	7,261	7,273	7,286	7,304	7,318	7,332	7,346	7,361	7,376	7,391	7,406
Ocean	10,603	10,640	10,652	10,668	10,685	10,703	10,720	10,737	10,755	10,772	10,789
Passaic	17,665	17,705	17,748	17,801	17,833	17,866	17,900	17,935	17,971	18,009	18,048
Somerset	5,253	5,265	5,275	5,282	5,290	5,297	5,305	5,313	5,321	5,329	5,337
Sussex	1,333	1,336	1,341	1,343	1,346	1,350	1,353	1,357	1,360	1,364	1,367
Union	16,725	16,749	16,780	16,812	16,840	16,877	16,914	16,949	16,980	17,016	17,052
Warren	1,346	1,347	1,350	1,352	1,353	1,355	1,356	1,358	1,359	1,361	1,362



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:			s On:	Projected Cases (Hospitalized) [ICU] {Ventilator} For:					
	8/10	8/11	8/12	8/13	8/15	8/17	8/19			
Bergen	20,825	20,864	20,899	20,940	21,026 (4,205) [1,009] {505}	21,118 (4,224) [1,014] {507}	21,214 (4,243) [1,018] {509}			
Burlington	6,025	6,042	6,069	6,094	6,154 (1,231) [295] {148}	6,216 (1,243) [298] {149}	6,283 (1,257) [302] {151}			
Camden	8,580	8,614	8,645	8,689	8,755 (1,751) [420] {210}	8,823 (1,765) [423] {212}	8,892 (1,778) [427] {213}			
Essex	19,747	19,776	19,813	19,840	19,899 (3,980) [955] {478}	19,960 (3,992) [958] {479}	20,025 (4,005) [961] {481}			
Gloucester	3,258	3,283	3,310	3,339	3,386 (677) [163] {81}	3,436 (687) [165] {82}	3,488 (698) [167] {84}			
Hudson	19,683	19,717	19,749	19,792	19,845 (3,969) [953] {476}	19,901 (3,980) [955] {478}	19,961 (3,992) [958] {479}			
Hunterdon	1,149	1,150	1,150	1,151	1,153 (231) [55] {28}	1,155 (231) [55] {28}	1,157 (231) [56] {28}			
Mercer	8,127	8,139	8,143	8,164	8,185 (1,637) [393] {196}	8,206 (1,641) [394] {197}	8,228 (1,646) [395] {197}			
Middlesex	17,932	17,959	17,988	18,015	18,065 (3,613) [867] {434}	18,116 (3,623) [870] {435}	18,167 (3,633) [872] {436}			
Monmouth	10,326	10,348	10,368	10,407	10,462 (2,092) [502] {251}	10,519 (2,104) [505] {252}	10,576 (2,115) [508] {254}			
Morris	7,261	7,273	7,286	7,304	7,332 (1,466) [352] {176}	7,361 (1,472) [353] {177}	7,391 (1,478) [355] {177}			
Ocean	10,603	10,640	10,652	10,668	10,703 (2,141) [514] {257}	10,737 (2,147) [515] {258}	10,772 (2,154) [517] {259}			
Passaic	17,665	17,705	17,748	17,801	17,866 (3,573) [858] {429}	17,935 (3,587) [861] {430}	18,009 (3,602) [864] {432}			
Somerset	5,253	5,265	5,275	5,282	5,297 (1,059) [254] {127}	5,313 (1,063) [255] {128}	5,329 (1,066) [256] {128}			
Sussex	1,333	1,336	1,341	1,343	1,350 (270) [65] {32}	1,357 (271) [65] {33}	1,364 (273) [65] {33}			
Union	16,725	16,749	16,780	16,812	16,877 (3,375) [810] {405}	16,949 (3,390) [814] {407}	17,016 (3,403) [817] {408}			
Warren	1,346	1,347	1,350	1,352	1,355 (271) [65] {33}	1,358 (272) [65] {33}	1,361 (272) [65] {33}			

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.

