



# State of Missouri regional COVID-19 hospitalized cases model

June 17<sup>th</sup>, 2020

## Multiple data points inform Missouri's COVID-19 response

- Syndromic surveillance
- Healthcare system capacity (bed, PPE, and staff availability)
- Testing
- COVID-19 cases and deaths
- Economic and social impact
- Insights from U.S. states, nationally, and other countries
- Evidence from scientific literature
- Mathematical disease modelling



## Our model estimates possible outcomes based on currently available information

What does the model tell us	What does it not tell us
Range of plausible outcomes based on our current knowledge of COVID-19 in Missouri	What will happen in the future
Approximate date and magnitude of peak/s based on current understanding of policy interventions and human behavior and assumptions about future interventions	Date and magnitude of peak/s if there are major changes in planned policy interventions and human behavior
Approximate estimate of effective transmission rate across a region	Exact transmission rate in all parts of a region – there may be areas of higher and lower transmission within the region
Projected hospitalizations for regions in MO with sufficient data, i.e. Kansas City Area, Central, St. Louis Area, Southeast and Southwest	Projected hospitalizations in regions where daily COVID-19 hospitalizations are fewer than 15 because insufficient cases

The ability to forecast depends on the quality and availability of data. For a new disease such as COVID-19, much remains uncertain.



### **Greater Kansas City area (Region A)**

#### **Overview**

Population: 1,395,314 COVID-19 cases: 3,705 COVID-19 deaths: 76 ICU Bed Availability\*: 241 Medical / Surgical Bed Availability\*: 1,051

#### **Reproductive rate**

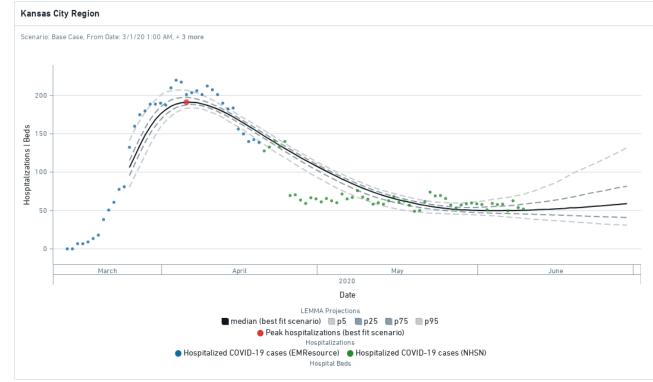
**Pre-intervention: 2.77** ± 0.14

**Today**: **1.07** ± 0.10

Change from last week: ↑0.04



### **Projected COVID-19 hospitalizations**





### **Greater St. Louis area (Region C)**

#### **Overview**

Population: 2,229,518 COVID-19 cases: 9,061 COVID-19 deaths: 739 ICU Bed Availability\*: 212 Medical / Surgical Bed Availability\*: 1,062

### **Reproductive rate**

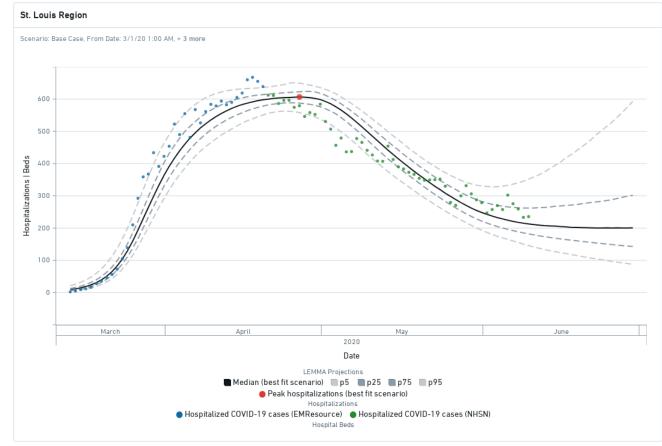
**Pre-intervention: 3.38**  $\pm$  0.15

**Today: 1.05** ± 0.11

Change from last week: ↑0.18



### **Projected COVID-19 hospitalizations**





AS OF 6/16/2020

### Southwest / Springfield (Regions D,G, I)

#### **Overview**

Population: 1,221,847 COVID-19 cases: 830 COVID-19 deaths: 14 ICU Bed Availability\*: 113 Medical / Surgical Bed

Availability\*: 430

#### **Reproductive rate**

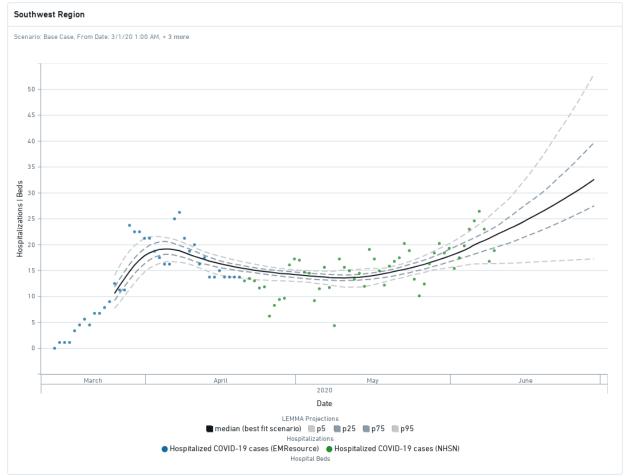
**Pre-intervention: 2.33**  $\pm$  0.17

**Today**: **1.14** ± 0.06

Change from last week:  $\sqrt{0.01}$ 



### **Projected COVID-19 hospitalizations**



(\*) Daily average during week of 5/26-6/1

Note: Due to low levels of hospitalized COVID-19 cases, modelling projections are highly sensitive to slight shifts in observed data and must be interpreted with extra caution.



AS OF 6/16/2020

### Southeast / Cape Girardeau (Region E)

#### **Overview**

Population: 363,478 COVID-19 cases: 816 COVID-19 deaths: 31 ICU Bed Availability\*: 48 Medical / Surgical Bed Availability\*: 252

### **Reproductive rate**

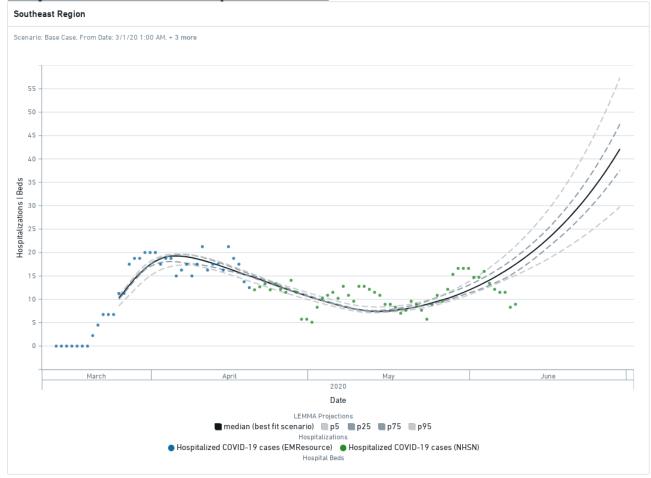
**Pre-intervention: 2.61** ± 0.15

**Today**: **1.40** ± 0.07

Change from last week: ↑0.50



**Projected COVID-19 hospitalizations** 



(\*) Daily average during week of 5/26-6/1

Note: Due to low levels of hospitalized COVID-19 cases, modelling projections are highly sensitive to slight shifts in observed data and must be interpreted with extra caution.



### **Central (Region F)**

#### **Overview**

Population: 736,847 COVID-19 cases: 569 COVID-19 deaths: 7

ICU Bed Availability\*: 74 Medical / Surgical Bed

Availability\*: 252

### Reproductive rate

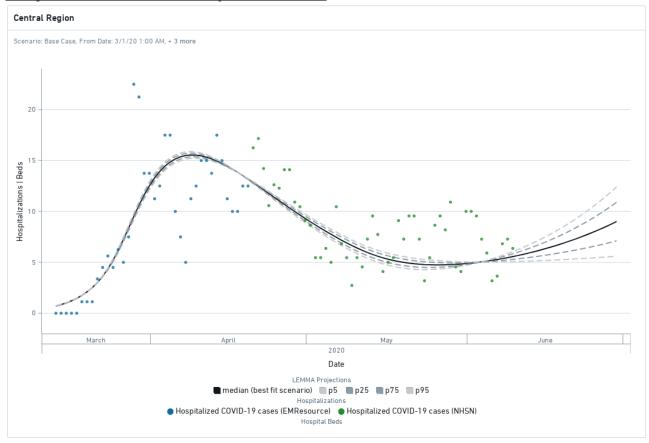
**Pre-intervention**:  $2.26 \pm 0.08$ 

**Today**: **1.09** ± 0.13

Change from last week: ↑0.20

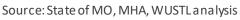


### **Projected COVID-19 hospitalizations**



(\*) Daily average during week of 5/26-6/1

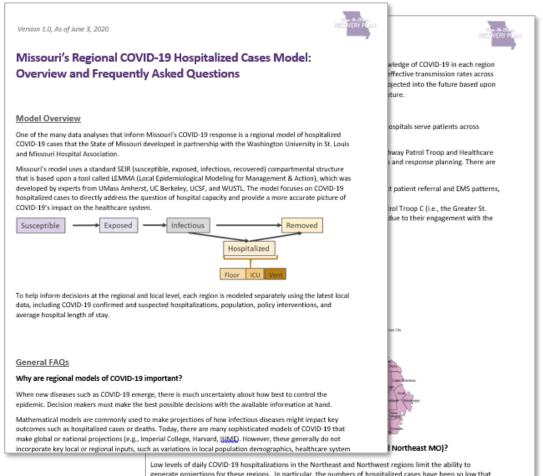
Note: Due to low levels of hospitalized COVID-19 cases, modelling projections are highly sensitive to slight shifts in observed data and must be interpreted with extra caution.





### See FAQs for additional details

Link here: <a href="https://health.mo.gov/living/healthcondiseases/communicable/novel-">https://health.mo.gov/living/healthcondiseases/communicable/novel-</a> coronavirus/pdf/modeling-faqs060320.pdf





### **Appendix**



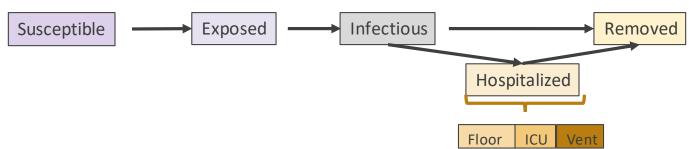
## Regional COVID-19 transmission models help inform local policy, public health, and business decisions

- Mathematical models are commonly used to make projections of infectious disease epidemics (e.g., tuberculosis, HIV)
- Many sophisticated models on COVID-19 make global or national projections (e.g., Imperial College, Harvard, IHME)
- However, these generally do not incorporate critical local or regional inputs, such as:
  - Variations in local population size and age structure
  - Date and nature of social distancing and other policies
- Regional projections are important because:
  - Regional epidemics may differ markedly from the national average
  - Policy response occurs at state, county, and municipal levels

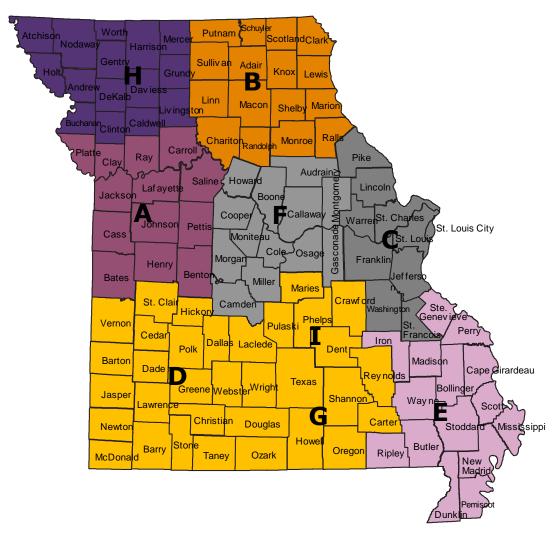
## State of MO, WUSTL, and MHA have developed a regional model of hospitalized COVID-19 cases

- Standard SEIR model that combines universal characteristics of COVID-19 infection (e.g., transmission parameters) with local inputs to support regional decision making
  - Mathematical model developed by experts from UMass Amherst, UC Berkeley, UCSF, and WUSTL
  - Uses a statistical approach that adjusts underlying parameters as new data are observed
- Customized using the latest local data from Missouri's emergency response regions, including:
  - COVID-19 positives and PUIs
  - Population and age structure
  - Policy interventions
  - Avg. hospital length of stay
- Projects COVID-19 hospitalized cases to directly address the question of hospital capacity and provide a more accurate picture on COVID-19's impact on the healthcare system

### **Model Structure (SEIR)**



## Projections are made for each Emergency Response region with sufficient data



- Low levels of daily COVID-19
  hospitalizations in the Northeast
  and Northwest regions limit the
  ability to generate projections for
  these regions
  - Northeast: Average of 4 daily confirmed or suspected COVID hospitalizations from 3/26 to 6/1
  - Northwest: Average of 17 daily confirmed or suspected COVID hospitalizations from 3/26 to 6/1
- Projections are available for all other regions