



In partnership with



COVID-19 Data Repository and County-level Death Count Prediction in the US

Bin Yu

UC Berkeley Statistics, EECS, CCB



github.com/Yu-Group/covid19-severity-prediction

Website: covidseverity.com

IAS Virtual Event Series
June 25, 2020

PI: Bin Yu



N. Altieri



R. Barter



J. Duncan



R. Dwivedi



K. Kumbier



X. Li



R. Netzorg



B. Park



C. Singh
(Student Lead)



Y. Tan



T. Tang



Y. Wang



A. Agarwal



M. Shen



C. Zhang

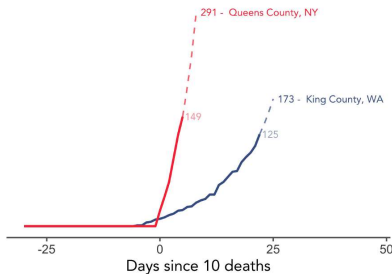
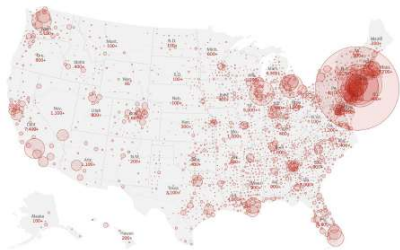
Many others at UC Berkeley, UCSF, Stanford, Northeastern, Univ. of Chicago, UW-Madison, ...

On March 22, we responded to a call for data science expertise by Response4Life...

Initial Goal: Help Aid Resource Allocation



Perspective
Critical Supply
Protective Equipment during the Covid-19 Pandemic



Data Curation

- Hospital data
- County data



Modeling

- County-level 7-day severity prediction
- hospital demand prediction



Evaluation / Visualization

- Identify hotspots and risk factors via news articles
- Visualization
- Validate forecasts



Overview: Current Data Repository & Prediction Pipeline (Open Source)



COVID-19 Data Repository
COVID-19 Cases/Deaths + County-level Data + Hospital-level Data



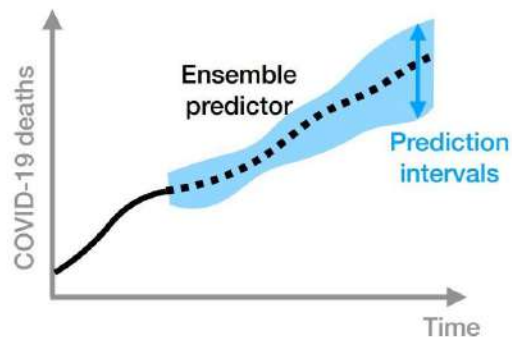
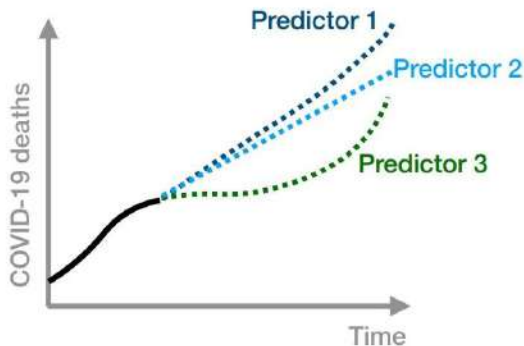
Multiple county-level predictors



CLEP Ensemble + MEPI intervals



Visualizations

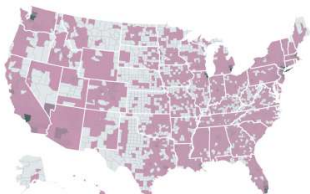


Curating a COVID-19 Data Repository

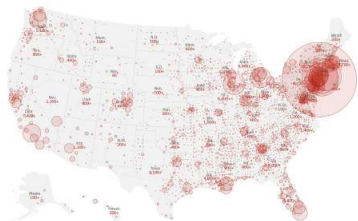
Data curation: scraped from a variety of sources

COVID-19 Cases/Deaths

USA FACTS



The New York Times



County-level Data

(Risk Factors, Demographics, Social Mobility)



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Apple Maps Mobility Trends Reports



COVID-19 Community Mobility Reports



Hospital-level Data

(e.g., #ICU beds, staff)



Samuel Scarpino



A bird's-eye view of the **hospital-level & county-level data**

- ~7000 hospitals in US
- ~200 features:
 - Geographical identifiers: address, lat/long, county
 - Type of facility (e.g., short term acute care, critical access)
 - Urban/rural
 - # total beds, # Med-Surg beds, # ICU beds
 - ICU Occupancy rate
 - #Employees, #RNs
 - Total discharges, average length of stay, average daily census
 - Hospital overall rating
- COVID-19 cases and deaths (NYT and USAFacts)
- Demographics
 - Population, population density, age structure
- Health risk factors
 - Heart disease, stroke, respiratory disease, smoking, diabetes, overall mortality
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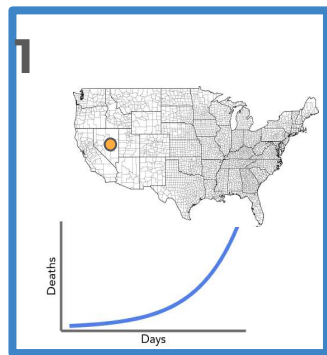
Forecasting county
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Curses and blessings

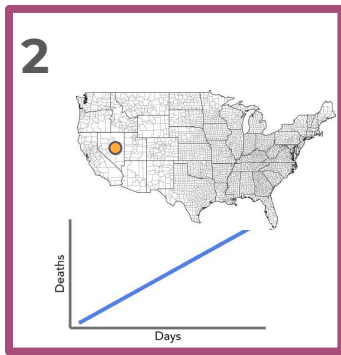
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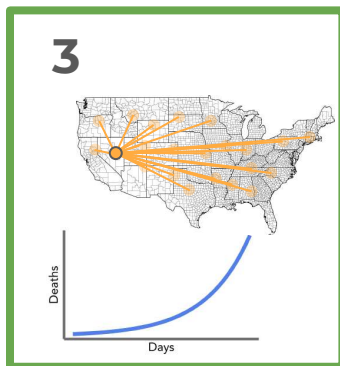
Combined Linear and Exponential Predictors (CLEP)



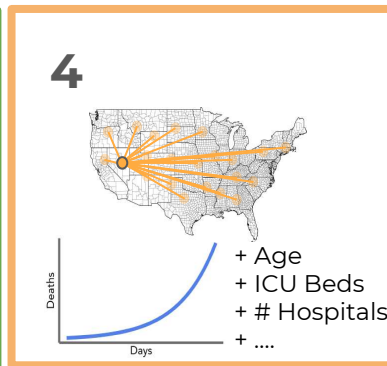
Separate-county exponential predictor



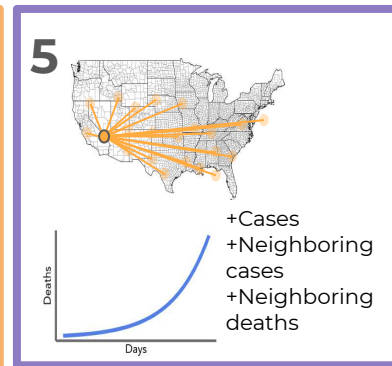
Separate-county linear predictor



Shared-county exponential predictor



Shared-county exponential predictor + demographics



Expanded Shared-county exponential predictor

Calculate a **weighted average of the predictions**: higher weight to the models with better (recent) historical performance^[1]

[1]. Schuller-Yu-Huang-Edler "Perceptual audio coding using adaptive pre-and post-filters and lossless compression." *IEEE Transactions on Speech and Audio Processing* 10.6 (2002): 379-390.

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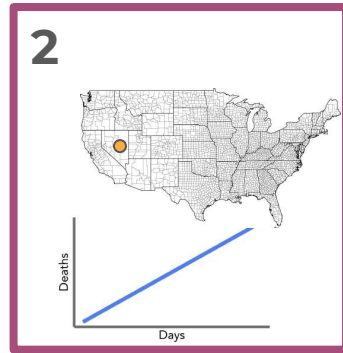
$$w_t^m \propto \exp \left(-c(1 - \mu) \sum_{i=t_0}^{t-1} \mu^{t-i} \ell(\hat{y}_i^m, y_i) \right)$$

Without μ , the weights are well motivated through Rissanen's predictive MDL (Minimum Description Length) principle, and μ in (0,1) allows adaptation to changing dynamics.

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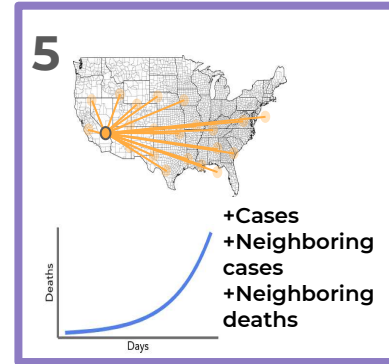
Combined Linear and Exponential **Predictor (CLEP)**

A combination of two predictors performs well



Separate-county
linear predictor

+



Expanded
Shared-county

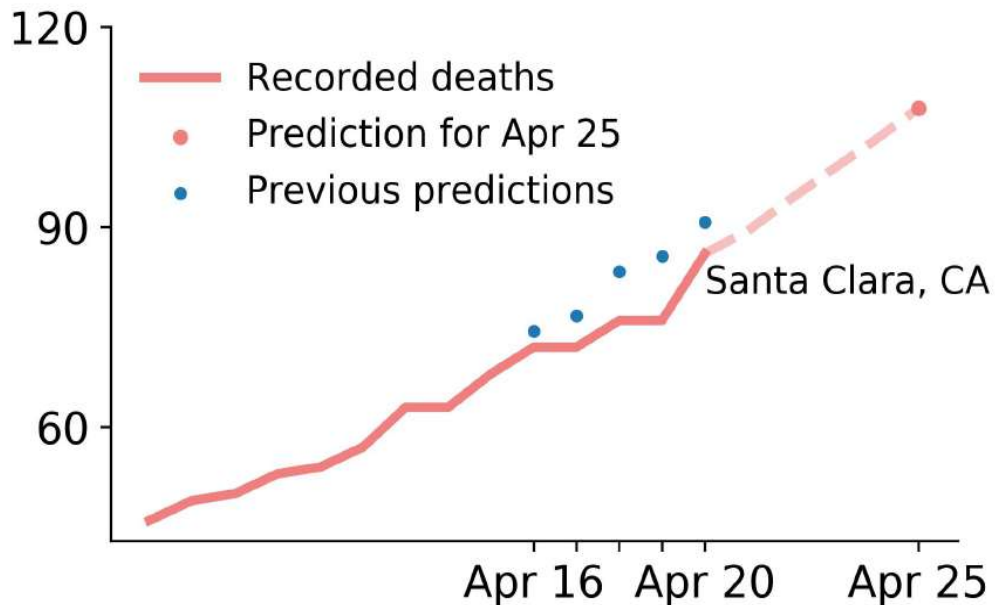
k=7 for 7-day prediction

$$E[\text{deaths}_t | t] = \exp \left(\beta_0 + \beta_1 \log(\text{deaths}_{t-1} + 1) + \beta_2 \log(\text{cases}_{t-k} + 1) \right. \\ \left. + \beta_3 \log(\text{neigh_deaths}_{t-k} + 1) + \beta_4 \log(\text{neigh_cases}_{t-k} + 1) \right)$$

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Prediction Intervals based on conformal prediction[2]

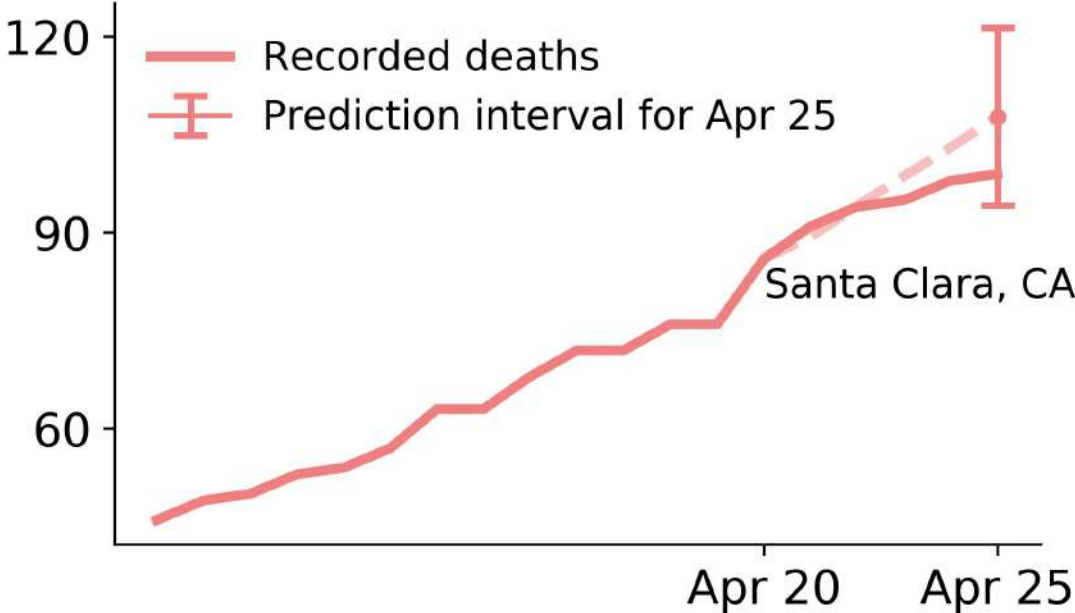


Previous 5-day-ahead rel. prediction errors (%)

Apr 16	3.3%	} Take the max
Apr 17	6.5%	
Apr 18	9.6%	
Apr 19	12.6%	
Apr 20	5.5%	
Apr 25	?	

[2]. G. Shafer and V. Vovk "A tutorial on conformal prediction." *JMLR* (2008): 371-421.

Prediction Intervals:



Predicted range of error
Apr 25 **[-12.6%, 12.6%]**

Actual error:
Apr 25 **8.8%**

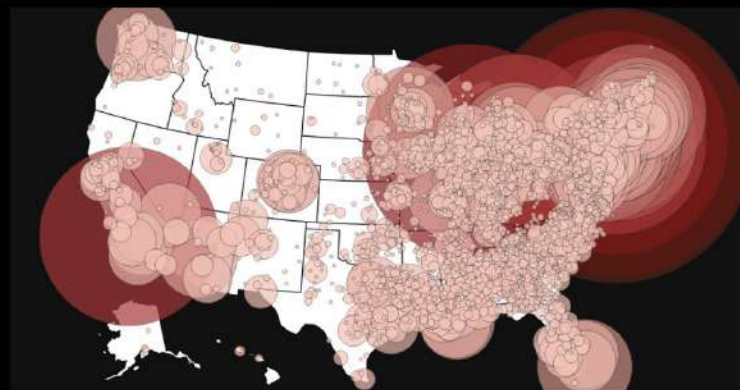
Data and code at covidseverity.com (searchable by county)

COVID-19 SEVERITY PREDICTION

Visualizations Data Models

Predicted Cumulative COVID-19 Deaths

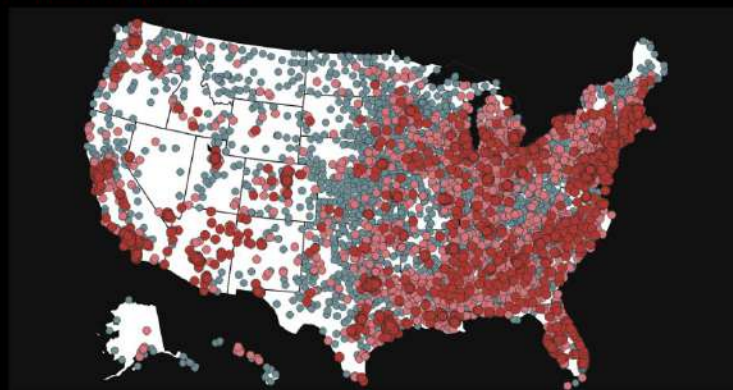
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[VIEW INTERACTIVE MAP IN FULLSCREEN](#)

Hospital-Level COVID-19 Pandemic Severity Index (CPSI)

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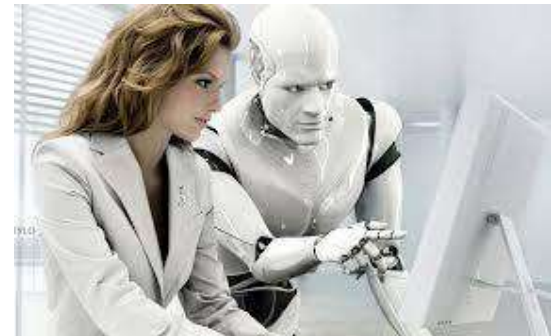
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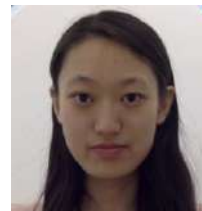
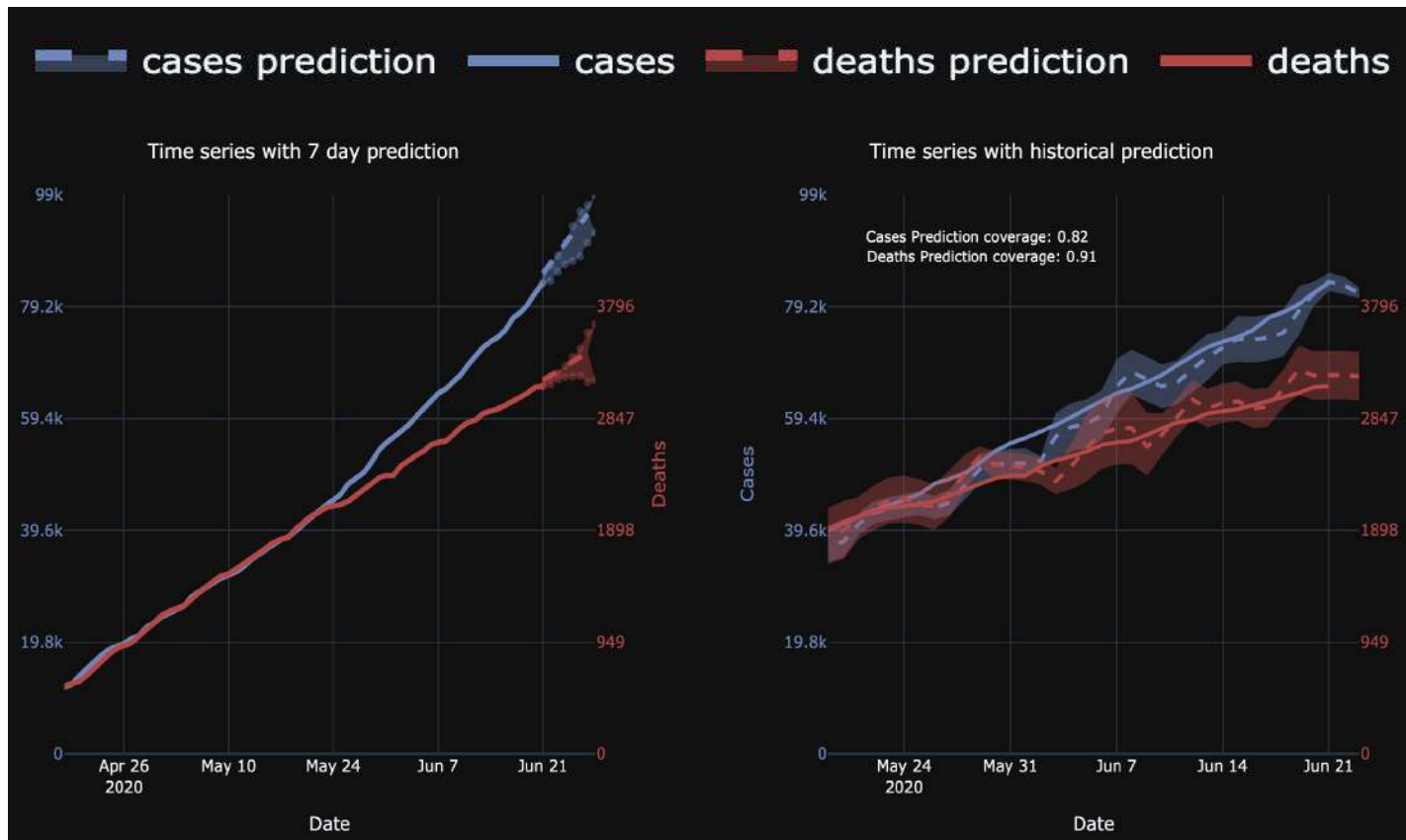
This AI system could not spot that “1525” on May 21 for King County, WA was an error. Humans in the loop would be better.

Future of AI should be human-machine collaboration

Image credit: trademed.com.



7-day prediction: LA county (new county search function)



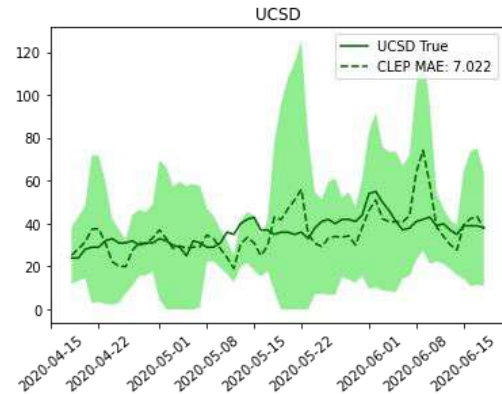
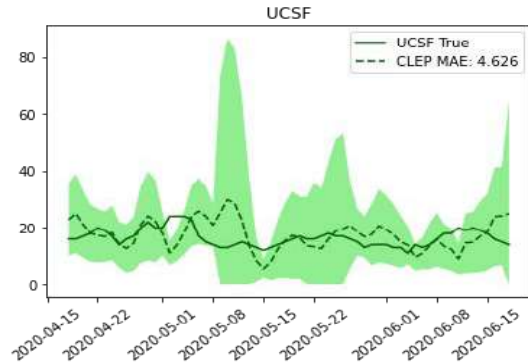
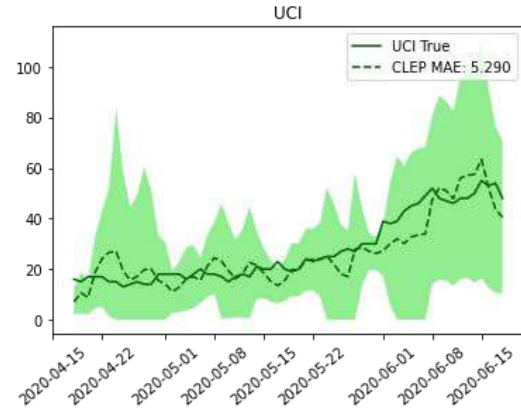
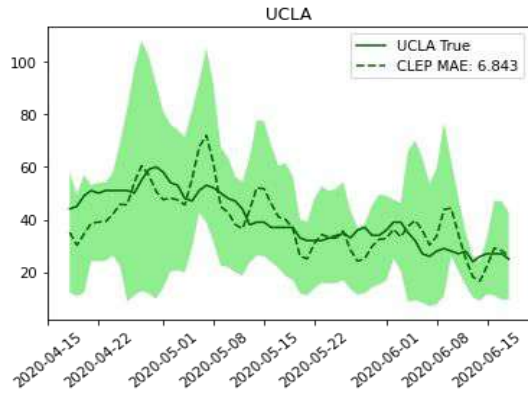
D. Wang



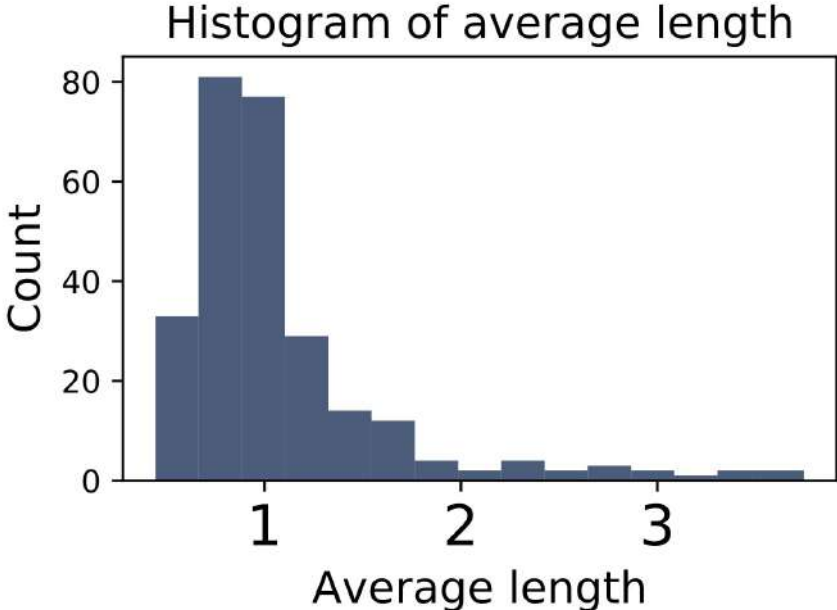
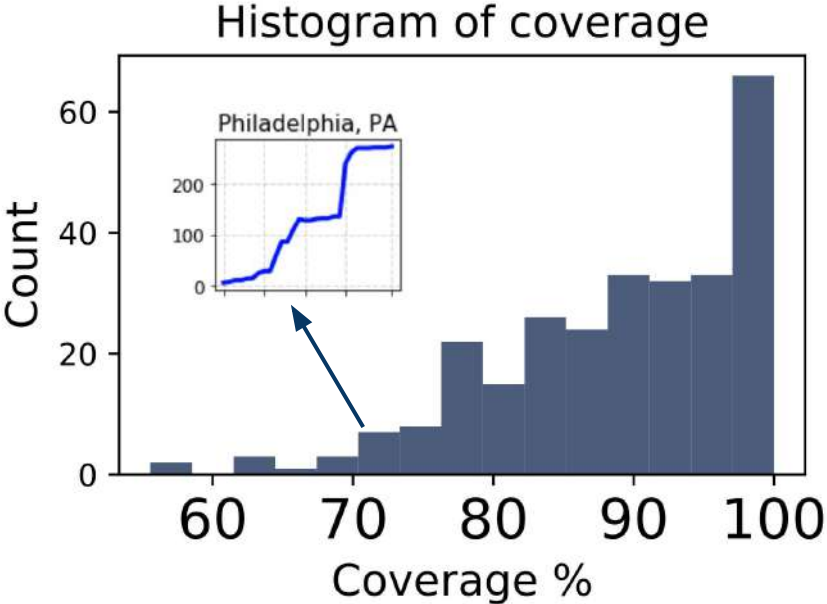
P. Norvig

Thanks to Google

CLEP works also for predicting hospitalization for UC hospitals

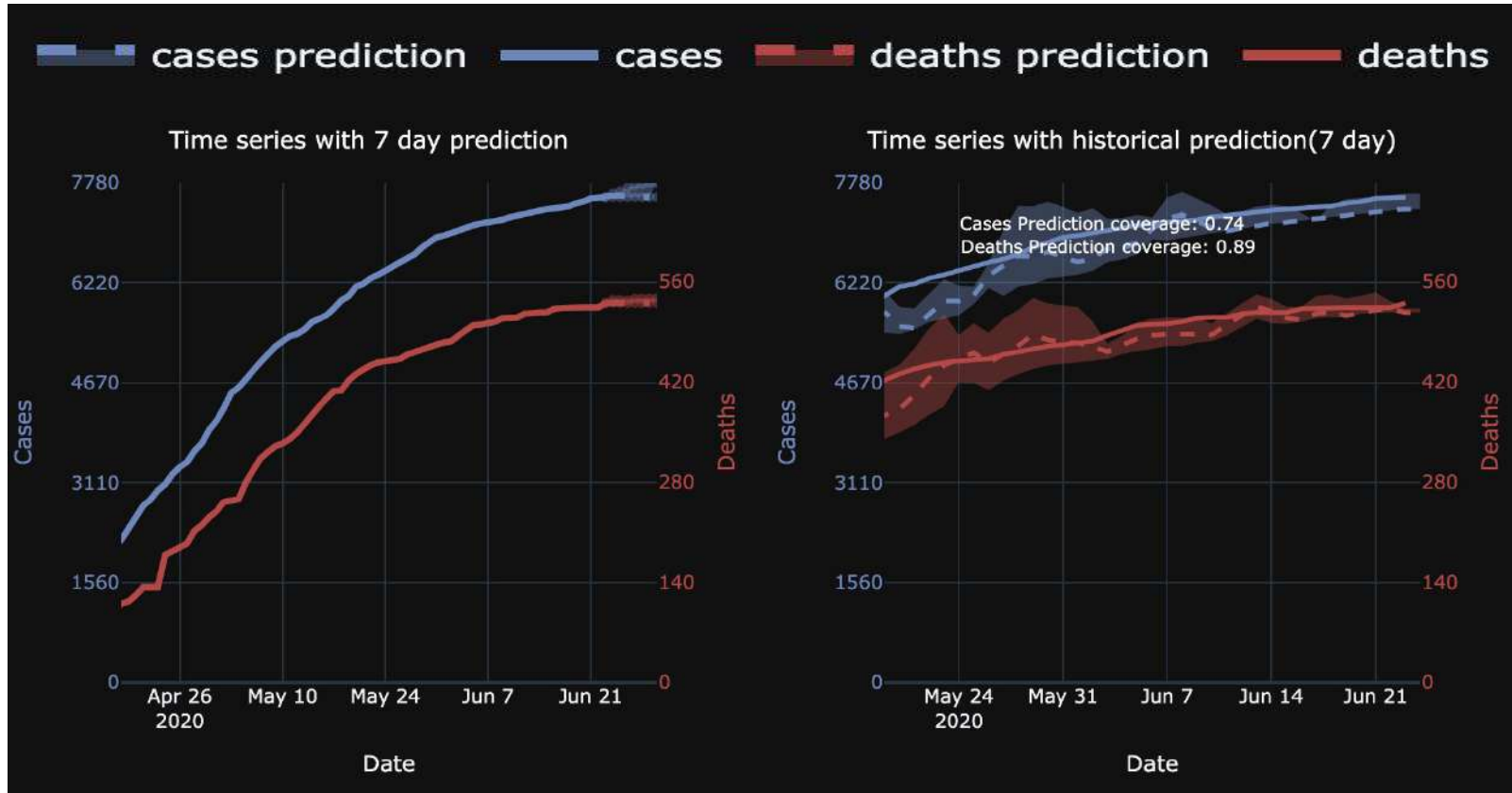


Empirical performance of MEPI for death counts

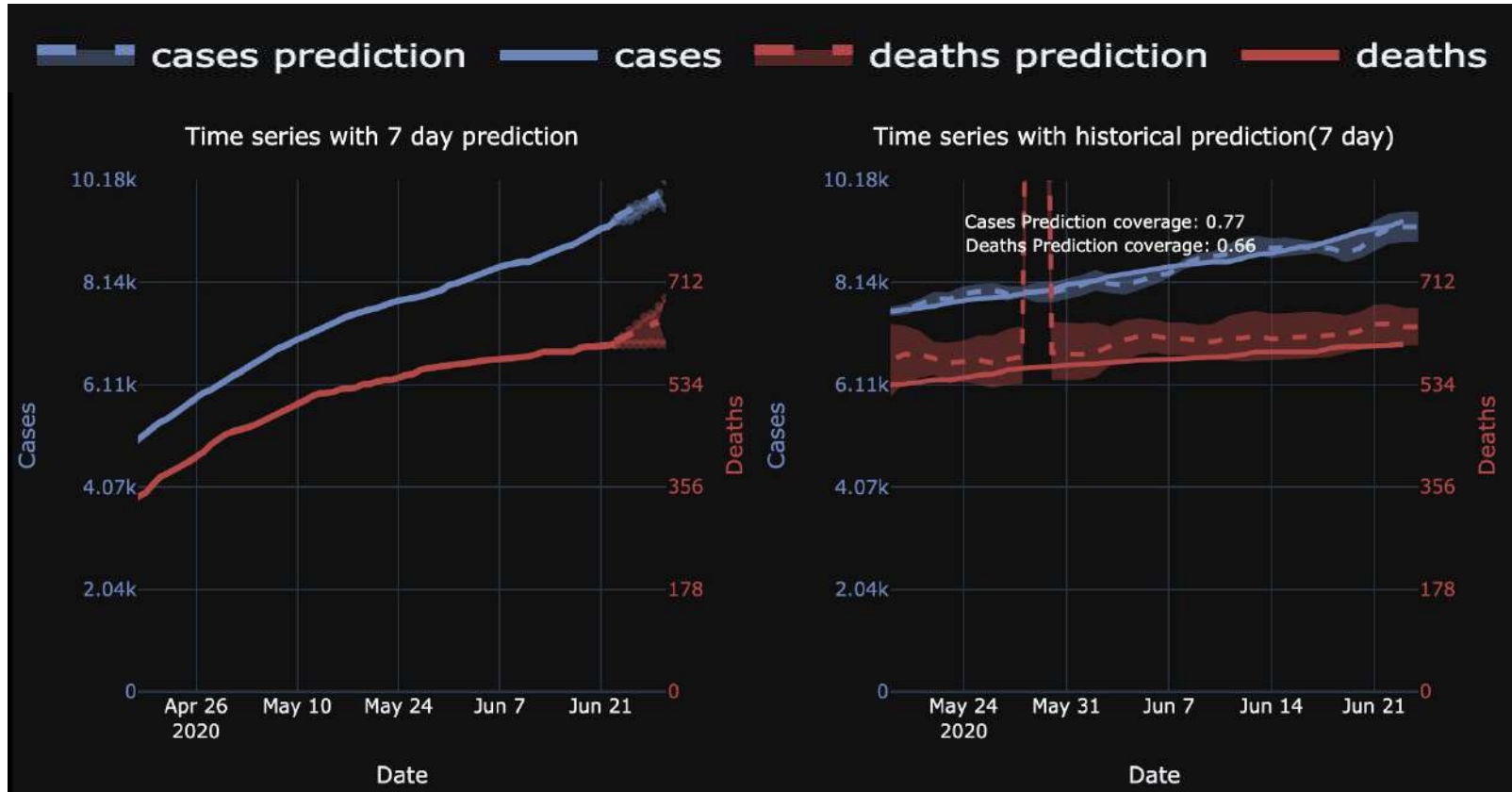


Evaluation period: March 28--April 27. Only include days since the county has 10 deaths. Having a normalized length of 0.8 means the PI is roughly $(0.6 \hat{y}_{t+k}, 1.4 \hat{y}_{t+k})$.

7-day prediction: Mercer county (Princeton), NJ



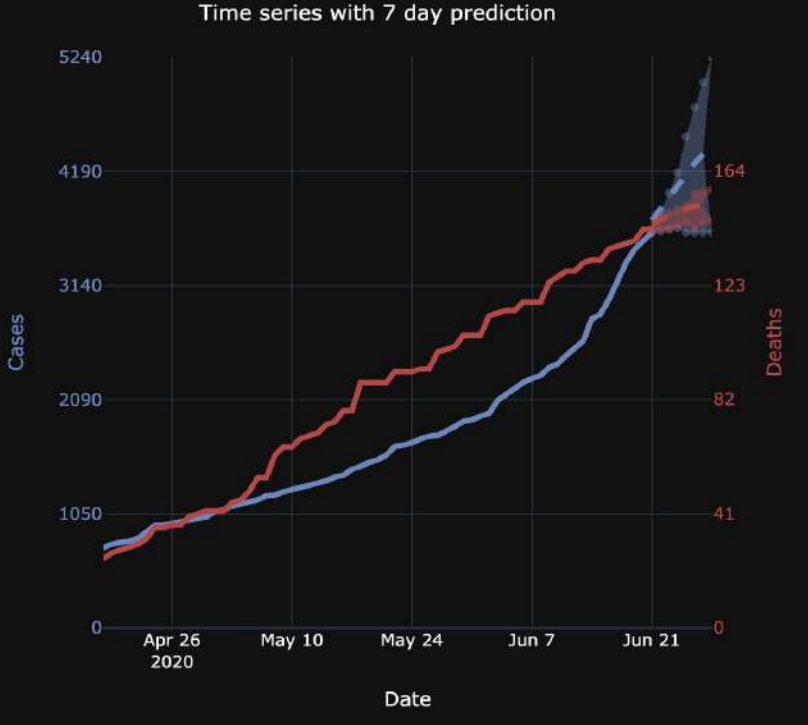
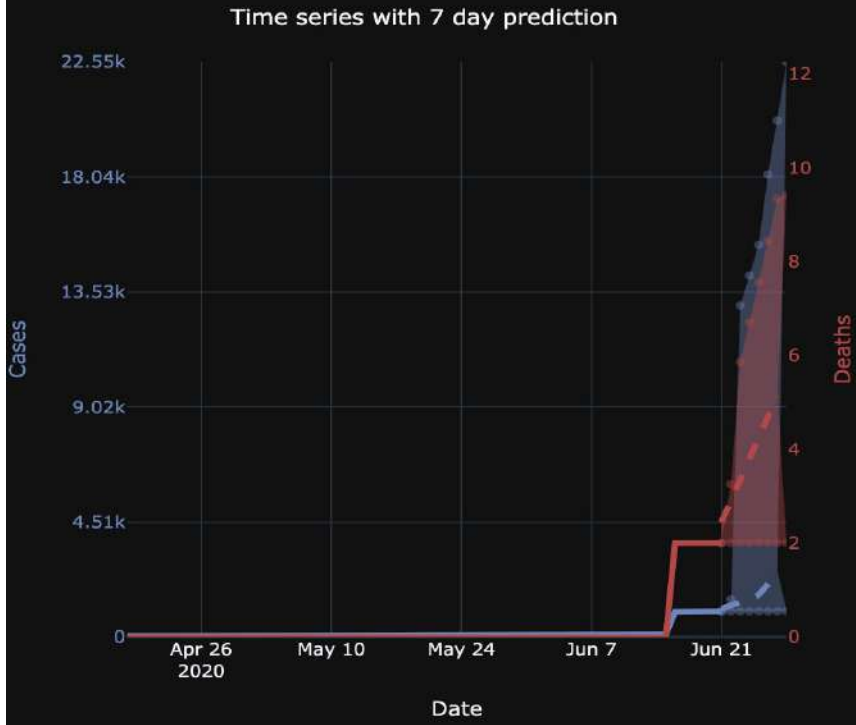
7-day prediction: King county (Seattle), WA



High case growth Anderson County in TX

High death growth Lee County in FL

cases prediction cases deaths prediction deaths



Manhattan

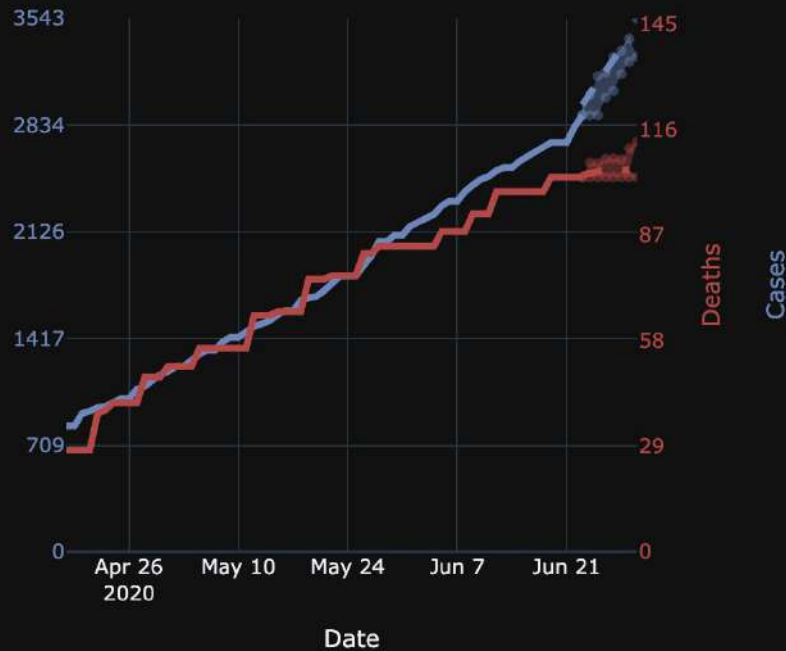
San Mateo, CA

cases prediction cases deaths prediction deaths

Time series with 7 day prediction



Time series with 7 day prediction



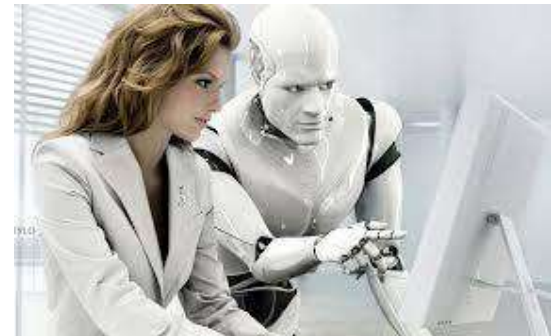
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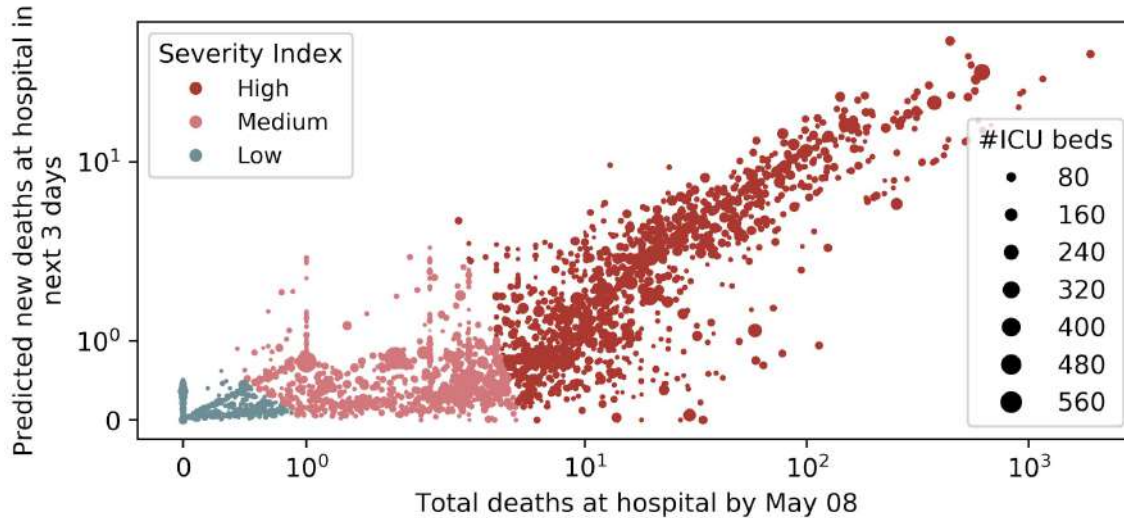
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Severity Index at covidseverity.com



A score* for each hospital based on:

1. Predicted cumulative deaths
2. Predicted daily deaths

* county level predicted deaths are distributed to hospitals proportional to #employees

5000 Face Shields arrived at Temple Univ Hospital on May 8



Don Landwirth, R4L

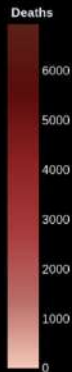
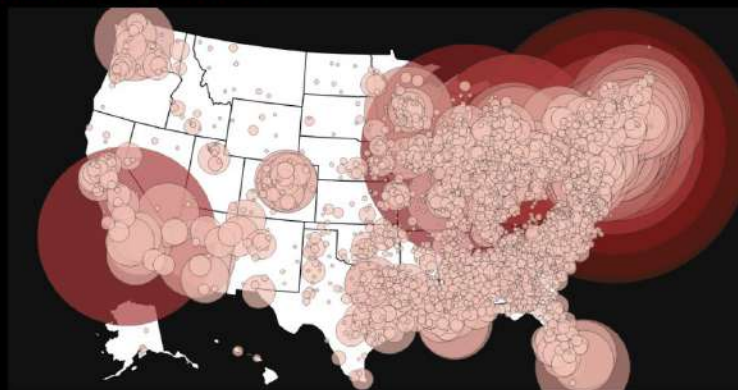
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COVID-19 SEVERITY PREDICTION

[Visualizations](#) [Data](#) [Models](#)

Predicted Cumulative COVID-19 Deaths

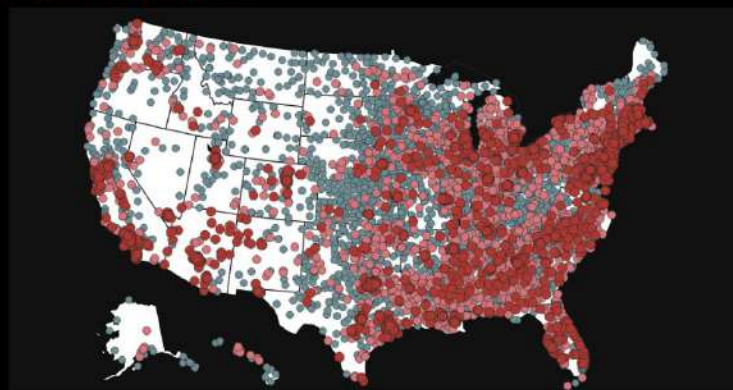
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May 19, 2020

†Authors ordered alphabetically. All authors contributed significantly to this work.

*Corresponding authors

This project was initiated on March 21, 2020, with the goal of helping aid the allocation of supplies to different hospitals in the U.S., in partnership with the non-profit Response4Life.

Current directions

- Data repository a popular resource for other covid-19 activities

In a period of two weeks, 12K visits with 1.1K unique visitors; 108 clones with 53 unique cloners

- Continued support to Response4Life
- Results and blog on CSDS atlas at Univ of Chicago
- **Hospitalization prediction** in collaboration with google (and possible collaboration with California Department of Public Health and Microsoft)
- **Causal investigation (e.g. impact of social distancing; matching of counties)** (beginning)

Thank you!

Any questions?

Please visit covidseverity.com

COVID-19 Data Repository and County Death Count Prediction

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Incremental Causal Effects

Dominik Rothenhaeusler

Stanford Statistics

ONR PI Meeting

June 24, 2020

PI: Bin Yu



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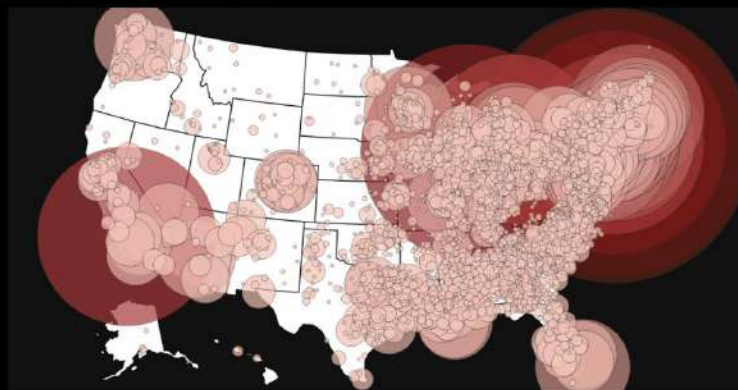
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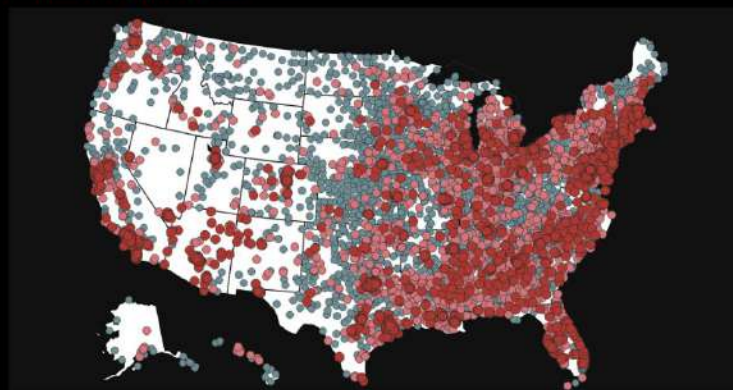
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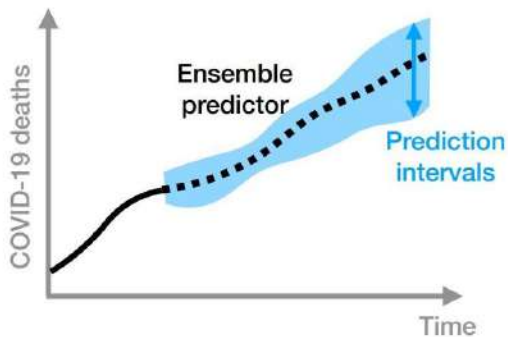
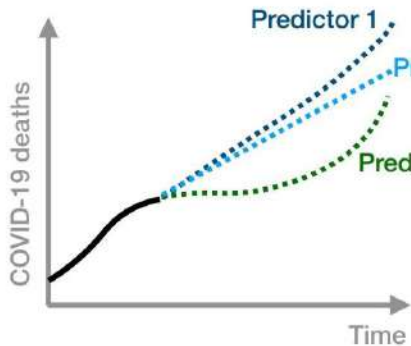
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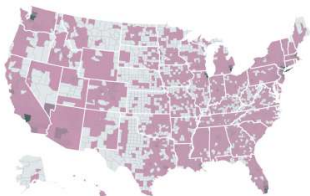


Curating a COVID-19 Data Repository

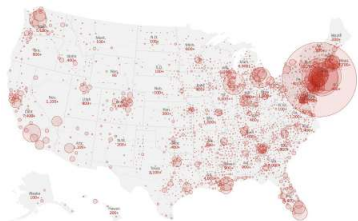
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(e.g., #ICU beds, staff)



Samuel Scarpino



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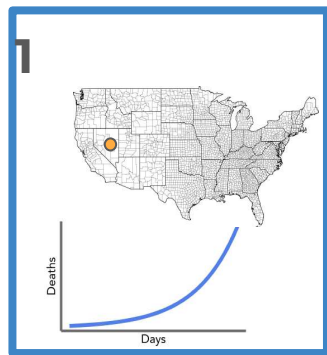
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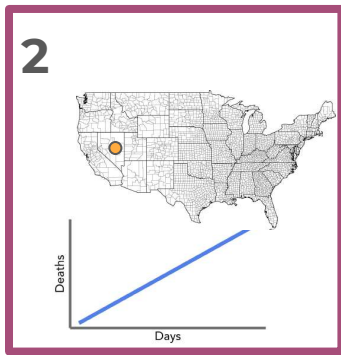
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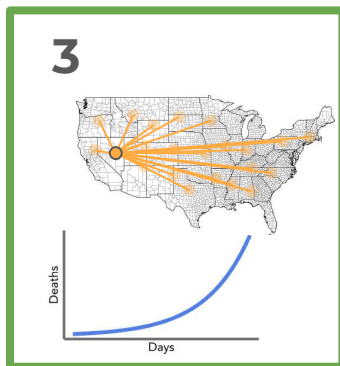
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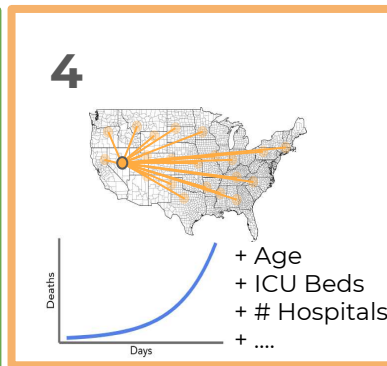
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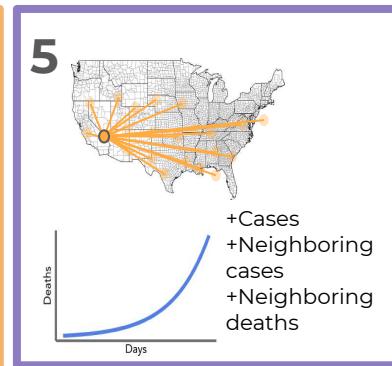
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Expanded Shared-county exponential predictor

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[1]. Schuller-Yu-Huang-Edler "Perceptual audio coding using adaptive pre-and post-filters and lossless compression." *IEEE Transactions on Speech and Audio Processing* 10.6 (2002): 379-390.

Combined Linear and Exponential Predictors (CLEP)

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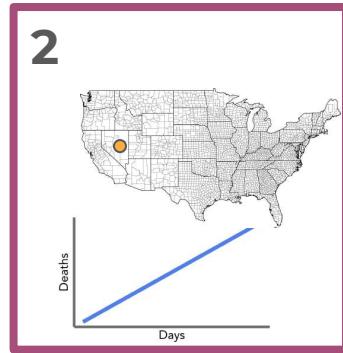
$$w_t^m \propto \exp \left(-c(1 - \mu) \sum_{i=t_0}^{t-1} \mu^{t-i} \ell(\hat{y}_i^m, y_i) \right)$$

Without μ , the weights are well motivated through Rissanen's predictive MDL (Minimum Description Length) principle, and μ in (0,1) allows adaptation to changing dynamics.

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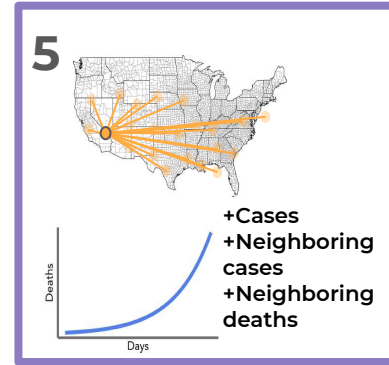
Combined Linear and Exponential **Predictor (CLEP)**

A combination of two predictors performs well



Separate-county linear predictor

+



Expanded Shared-county

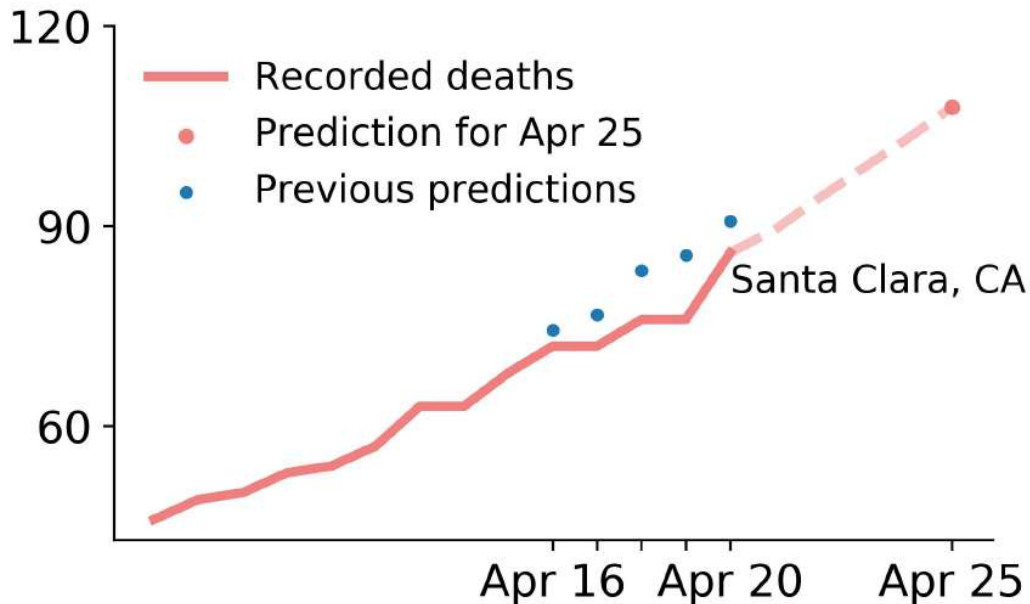
Elastic-net regularized Poisson GLM
k=7 for 7-day prediction

$$E[\text{deaths}_t | t] = \exp \left(\beta_0 + \beta_1 \log(\text{deaths}_{t-1} + 1) + \beta_2 \log(\text{cases}_{t-k} + 1) + \beta_3 \log(\text{neigh_deaths}_{t-k} + 1) + \beta_4 \log(\text{neigh_cases}_{t-k} + 1) \right)$$

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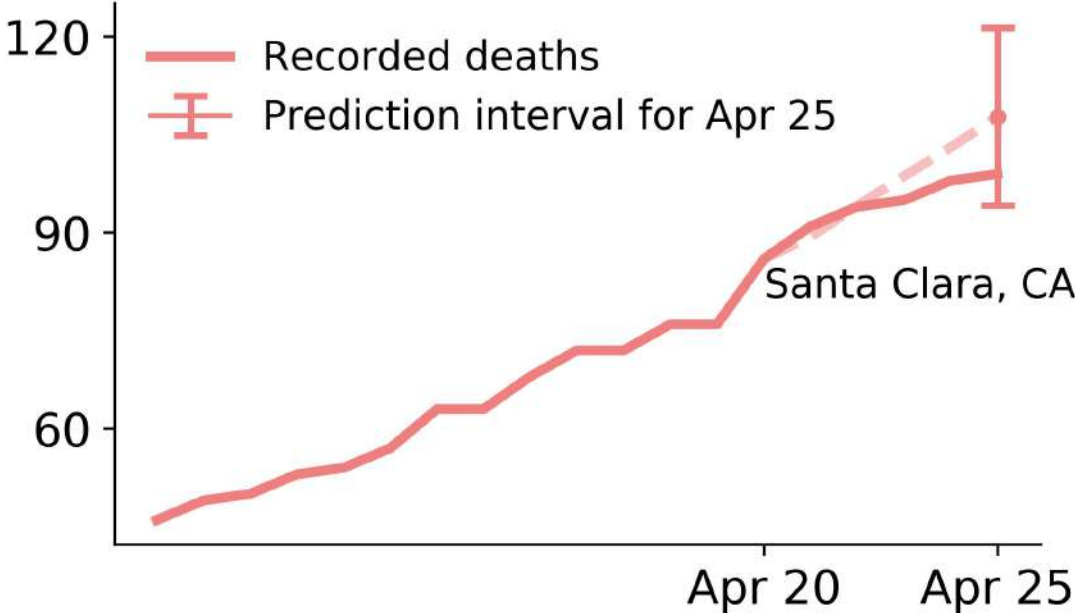
Prediction Intervals based on conformal prediction[2]



Previous 5-day-ahead prediction errors (%)

Apr 16	3.3%	} Take the max
Apr 17	6.5%	
Apr 18	9.6%	
Apr 19	12.6%	
Apr 20	5.5%	
Apr 25	?	

Prediction Intervals:



Predicted range of error
Apr 25 **[-12.6%, 12.6%]**

Actual error:
Apr 25 **8.8%**

Maximum (absolute) error prediction intervals (MEPI)

Step 1

Find normalized error of our predictor in the past.

$$\Delta_{\tau} := |y_{\tau} - \hat{y}_{\tau}| / |\hat{y}_{\tau}|.$$

Step 2

Find maximum error of past 5 days.

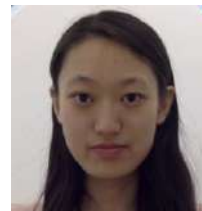
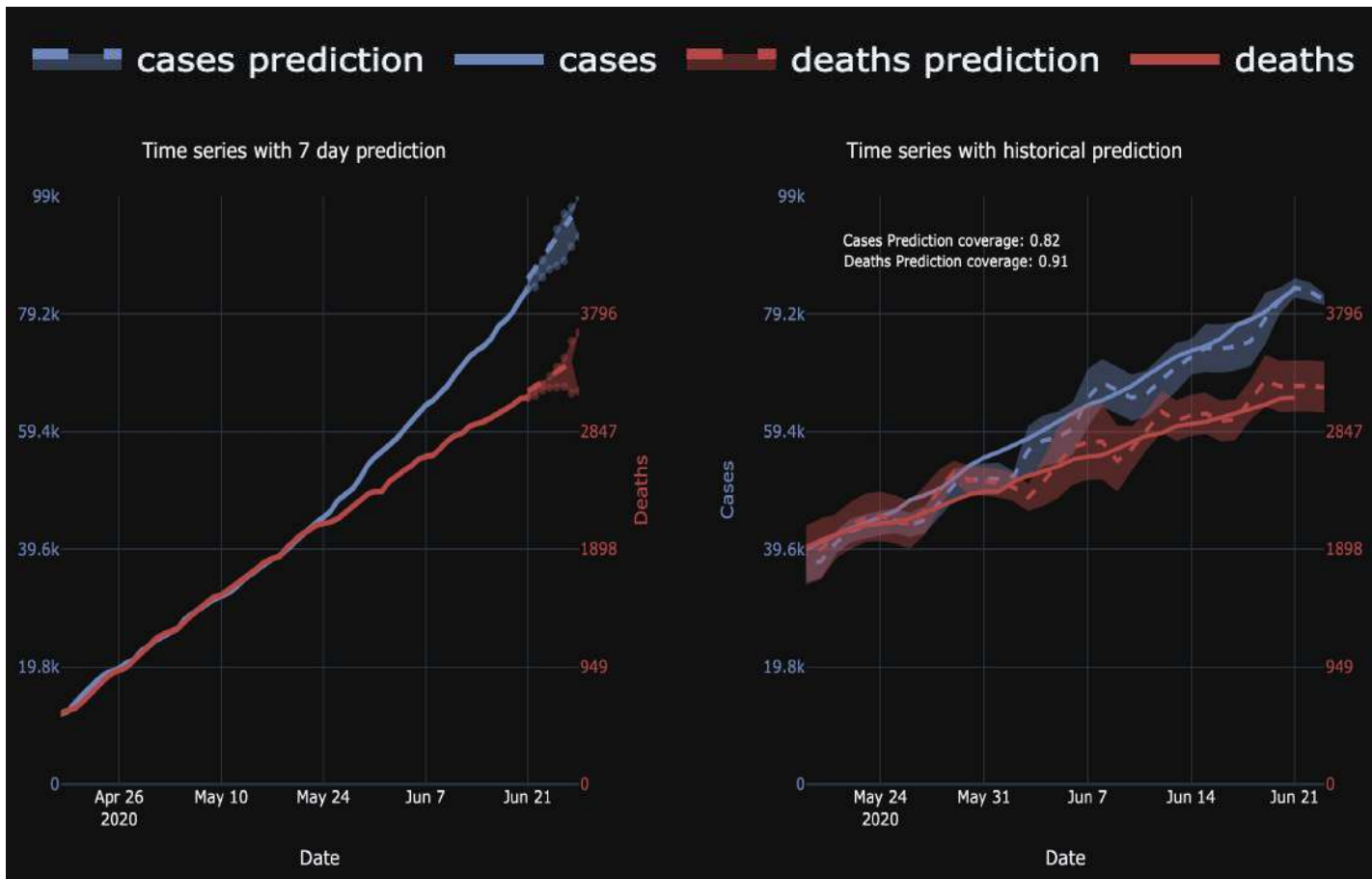
$$\Delta_{\max} := \max_{0 \leq j \leq 4} \Delta_{t-j}.$$

Step 3

$$\widehat{\text{PI}}_{t+k} := [\max \{ \hat{y}_{t+k}(1 - \Delta_{\max}), y_t \}, \hat{y}_{t+k}(1 + \Delta_{\max})]$$

Can be applied to any ML model, and it works well under **exchangeability** condition on the errors.

7-day prediction: LA county (new at covidseverity.com)

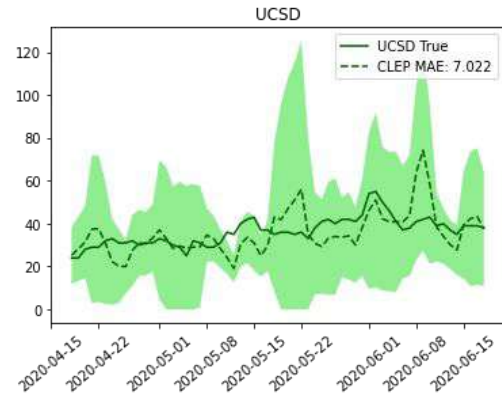
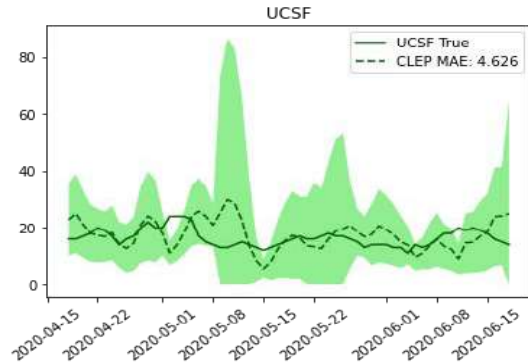
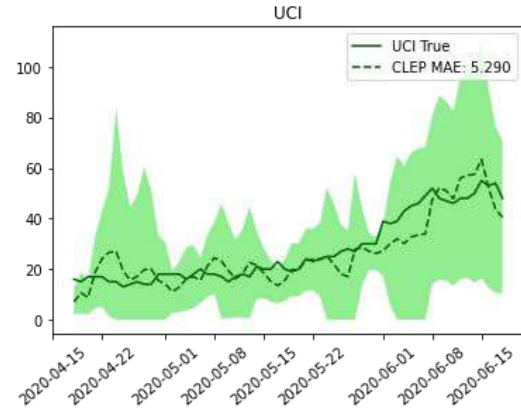
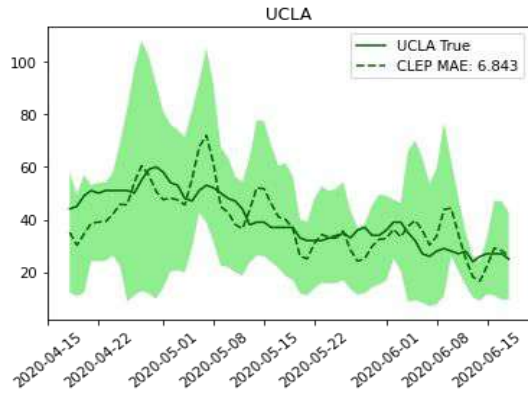


D. Wang



P. Norvig

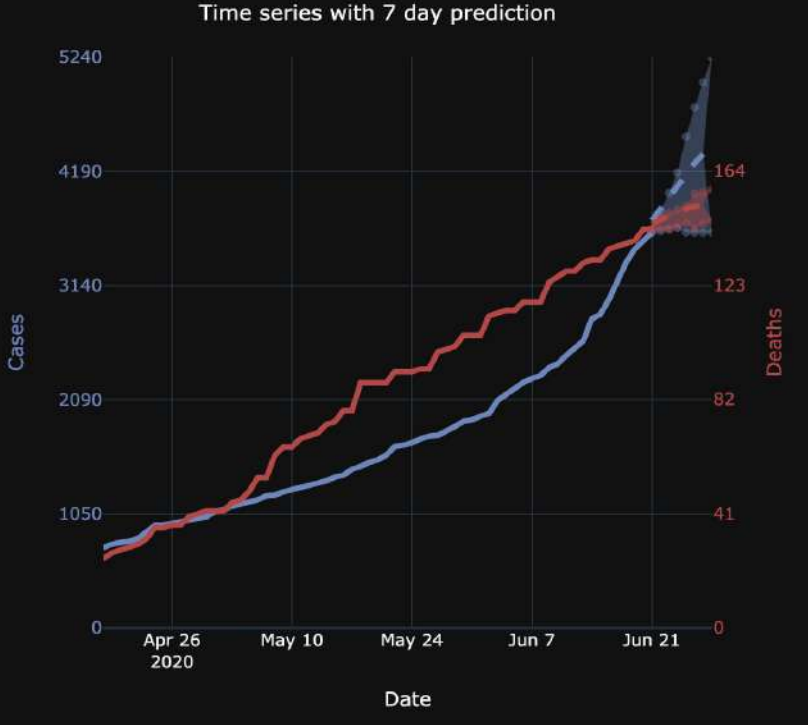
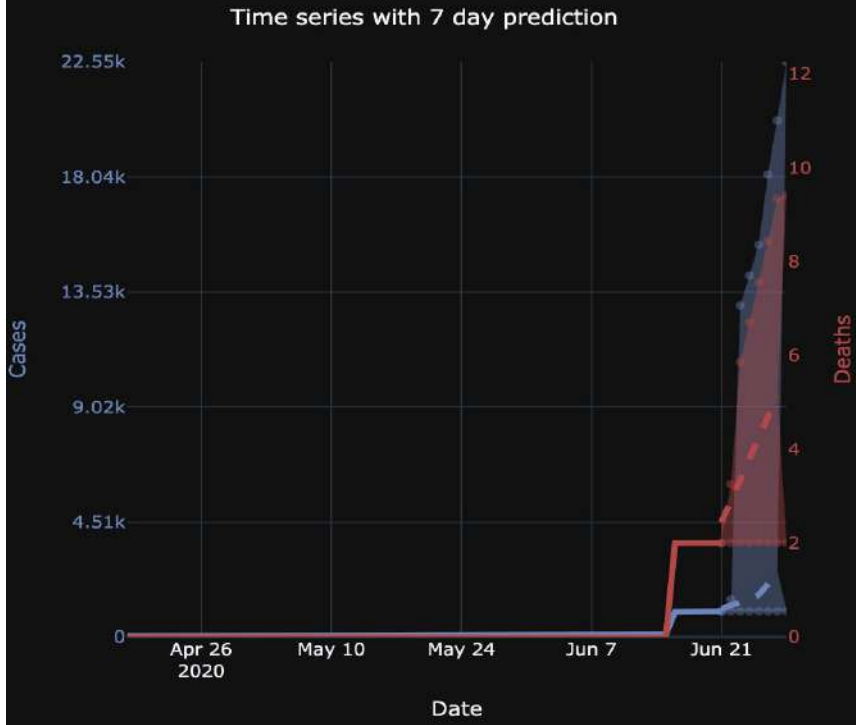
CLEP works also for predicting hospitalization for UC hospitals



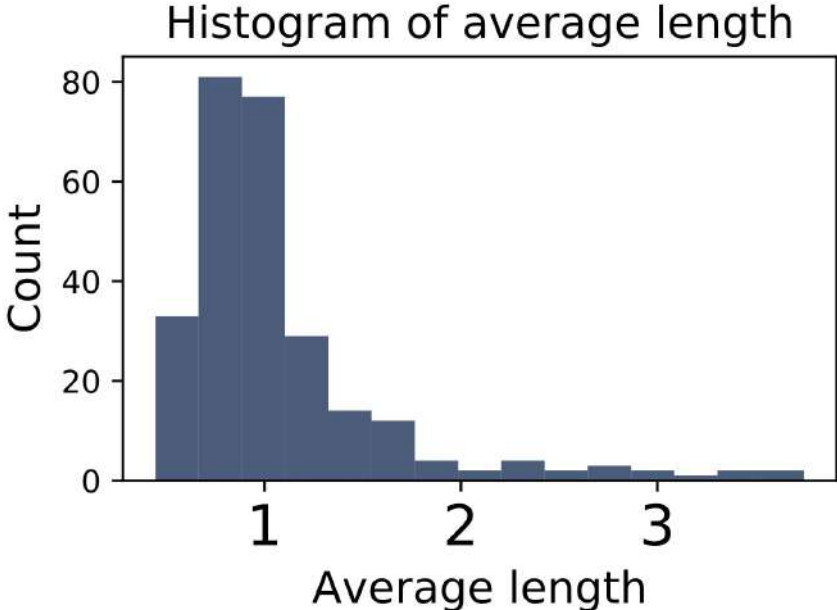
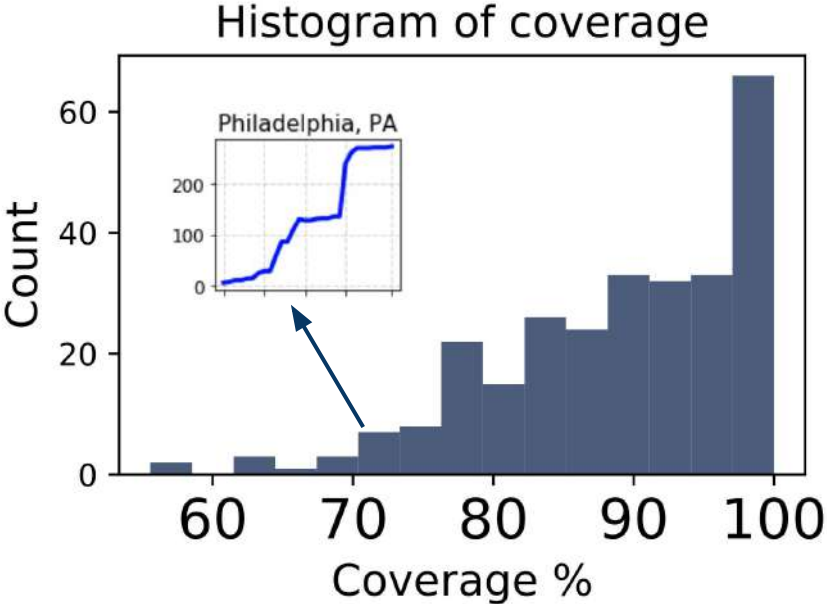
High case growth Anderson County in TX

High death growth Lee County in FL

cases prediction cases deaths prediction deaths

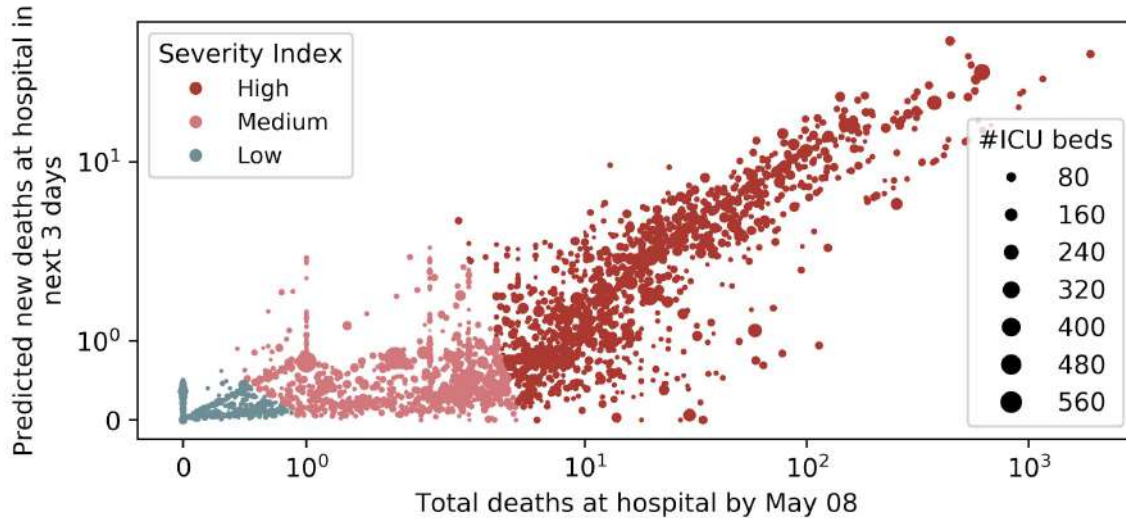


Empirical performance of MEPI for death counts



Evaluation period: March 28--April 27. Only include days since the county has 10 deaths. Having a normalized length of 0.8 means the PI is roughly $(0.6 \hat{y}_{t+k}, 1.4 \hat{y}_{t+k})$.

Severity Index



A score* for each hospital based on:

1. Predicted cumulative deaths
2. Predicted daily deaths

* county level predicted deaths are distributed to hospitals proportional to #employees

5000 Face Shields arrived at Temple Univ Hospital on May 8



Don Landwirth, R4L

Impact of our work beyond R4L

- Data repository a popular resource for other covid-19 activities

In a period of two weeks, 12K visits with 1.1K unique visitors; 108 clones with 53 unique cloners

- Results and blog on CSDS atlas at Univ of Chicago
- Final project option for DS 100 at UC Berkeley (> 1000 students) and Stat 542 at University of Illinois Urbana-Champaign (graduate stat-ml course)
- **Hospitalization prediction** in collaboration with google (and possible collaboration with California Department of Public Health and Microsoft)
- **Causal investigation (e.g. impact of social distancing; matching of counties)** (beginning)

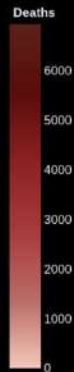
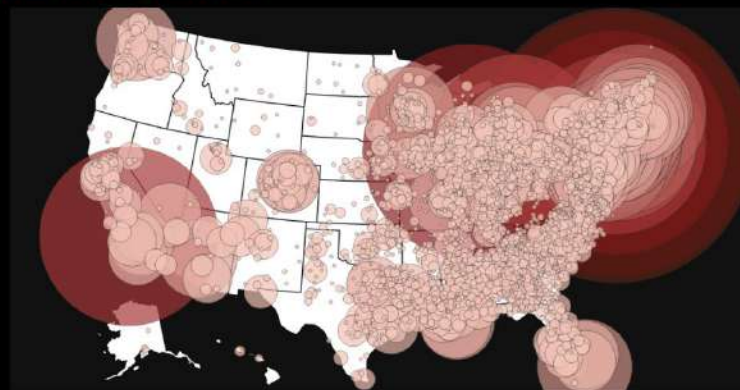
Data and code at covidseverity.com (searchable by county)

COVID-19 SEVERITY PREDICTION

Visualizations Data Models

Predicted Cumulative COVID-19 Deaths

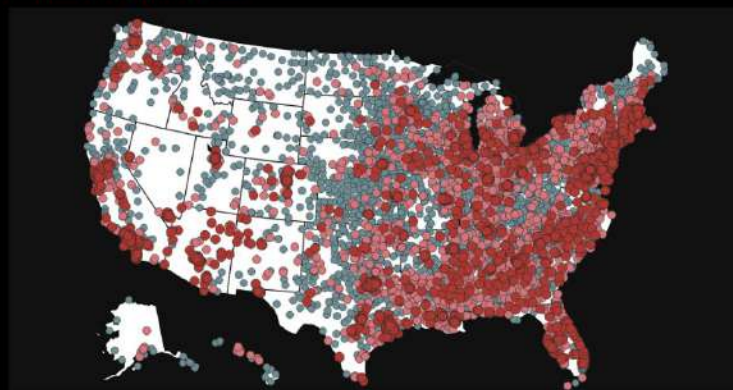
Use the slider below the map to change date.



[VIEW INTERACTIVE MAP IN FULLSCREEN](#)

Hospital-Level COVID-19 Pandemic Severity Index (CPSI)

Use the slider below the map to change date.



[VIEW INTERACTIVE MAP IN FULLSCREEN](#)

Incremental Causal Effects

Dominik Rothenhäusler¹ and Bin Yu²

¹Department of Statistics, Stanford University

²Department of Electrical Engineering and Computer Science, and
Department of Statistics, University of California, Berkeley

<https://arxiv.org/abs/1907.13258>

Supported by ONR Grant



Incremental causal effects (Rothenhaeusler and Yu, 2019)

Causal inference from observational data is challenging

Problems with confounding, overlap, weak instruments,...

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Causal inference from observational data is challenging

Problems with confounding, overlap, weak instruments,...

An important motivation for causal inference is evidence to act. Action decision might need weaker evidence than a positive average treatment effect (ATE) (e.g. whether to increase exercise time).

Moving the goalpost from ATE to other estimands can help:

- Local Average Treatment Effects (Imbens and Angrist, 1994)
- Weighted ATEs (Crump et al., 2006)
- Incremental propensity score interventions (Kennedy, 2019)
- ...



"I'm not cheating, I'm game-changing."

Incremental causal effects: looking for gradient effect

For a continuous treatment T and smooth potential outcomes $Y(t)$ define the incremental causal effect

$$\tau_{\text{incr}} = \mathbb{E}[\partial_t Y(T)]$$

This corresponds to the average change in outcome if slightly increasing the treatment for every unit in the population.

It is often estimated via the average derivative $\mathbb{E}[\partial_t \mathbb{E}[Y|X, T]]$ under appropriate assumptions. Such estimands have appeared in the econ literature (Powell et al., 1989, Newey & Stoker 2003, Banerjee, 2007,...) but have received relatively little attention.

Incremental causal effects - our contributions

- **Incremental causal effects are identified under weaker assumptions (a local ignorability and local overlap assumption)**

Conditionally on covariates, units only have to be comparable locally at current treatment t , not necessarily globally across all t

- Incremental causal effects can be estimated with **lower or equal variance** than ATE $E[Y(t+1)] - E[Y(t)]$ if the treatment distribution is Gaussian
- In high-dimensional settings, we use orthogonalization to **transform** the problem of estimation and inference of incremental effects to estimation and inference of a coefficient in a **standard regression model**

We can use the desparsified Lasso for estimation and inference of incremental causal effects

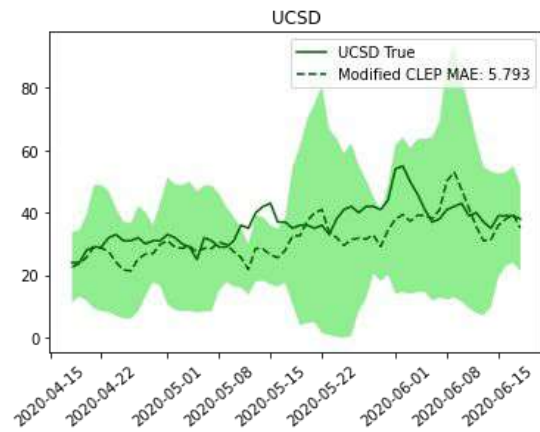
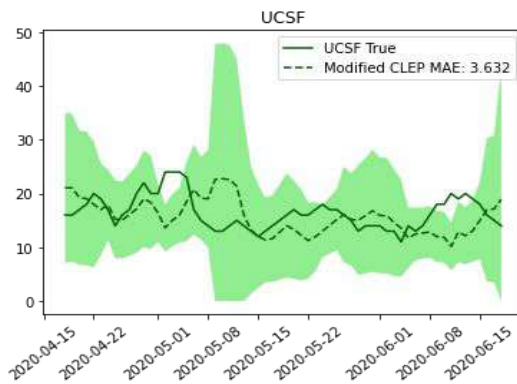
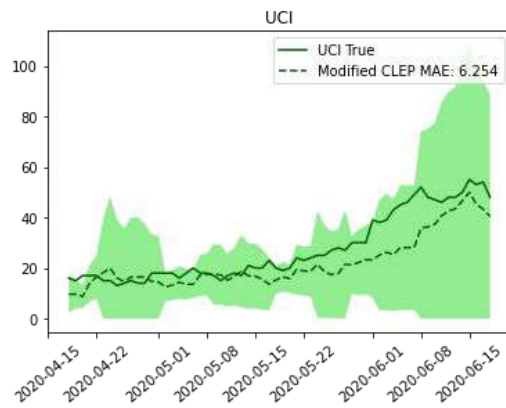
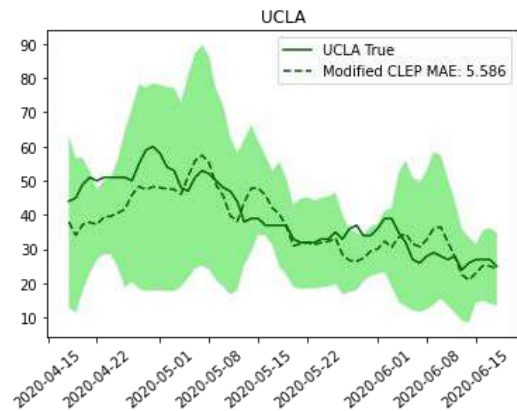
Paper available at <https://arxiv.org/abs/1907.13258>

Future work on “weak causality”

- So far: change type of intervention or target population
- Interpolate between effects that are easy to estimate and the ATE. What’s the right way to interpolate?
- Aggregate weak causal evidence across data sets
- Investigate “relaxed causal invariance constraints”

Thank you!

covidseverity.com





In partnership with



COVID-19 Data Repository and Severity Prediction

Yu Group
UC Berkeley Statistics, EECS, CCB



github.com/Yu-Group/covid19-severity-prediction

Website: covidseverity.com

IAS Virtual Event Series
June 25, 2020

COVID-19 Data Repository and Severity Prediction

Yu Group

UC Berkeley Statistics, EECS, CCB

PI: Bin Yu



N. Allieri



R. Barter



J. Duncan



R. Dwivedi



K. Kumbier



X. Li



R. Netzorg



B. Park



C. Singh
(Student Lead)



Y. Tan



T. Tang



Y. Wang

- Curated data repository
- Developed ensemble prediction algorithm at county level for death counts, 7-days ahead
- Designed covid severity index at hospital level for a Salesforce logistics system by R4L



github.com/Yu-Group/covid19-severity-prediction

Website: covidseverity.com

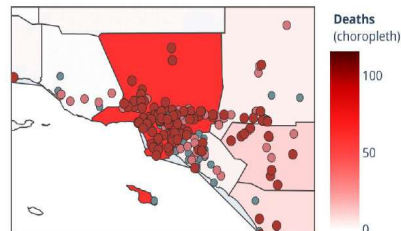
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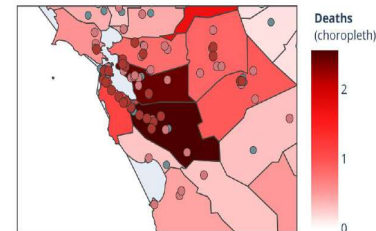
Don Landwirth, R4L



Predicted New Deaths for 2020-05-10



Predicted New Deaths for 2020-05-10



Overwhelmed
equipment sho
Coronavirus pandemic plays

SICK DOCTORS, NURSES AND NOT ENOUGH
EQUIPMENT: NYC HEALTH CARE WORKERS
ON THE FIGHT AGAINST THE CORONAVIRUS

Initial Goal: Help Aid Resource Allocation

Health officials warn US government does not have enough
stockpiled medical equipment to deal with coronavirus

Coronavirus pandemic
ing medical supplies

Perspective
Critical Supply
Protective Equipment during the Covid-19 Pandemic

forcing nurses
with "no protection"



masks

PI: Bin Yu



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Y. Wang

Many others at UC Berkeley, UCSF, Stanford, Northeastern, Univ. of Chicago, UW-Madison, ...

Our team

from UC Berkeley Statistics/EECS and UCSF



PI: B. Yu



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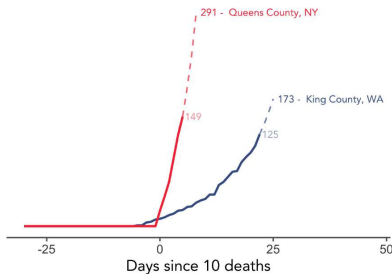
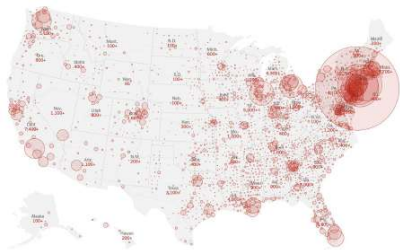


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Y. Wang

Many others at UC Berkeley, UCSF, Stanford, Northeastern, Univ. of Chicago, UW-Madison, ...



Data Curation

- Hospital data
- County data



Modeling

- County-level 7-day severity prediction
- hospital demand prediction



Evaluation / Visualization

- Identify hotspots and risk factors via news articles
- Visualization
- Validate forecasts

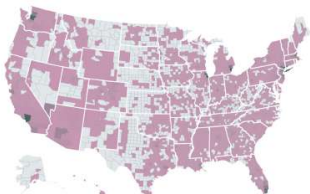


Curating a COVID-19 Data Repository

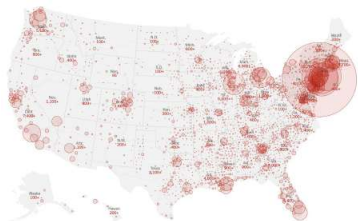
Data curation: scraped from a variety of sources

COVID-19 Cases/Deaths

USA FACTS



The New York Times



County-level Data

(Risk Factors, Demographics, Social Mobility)



Division for Heart Disease and Stroke Prevention



esri™

COVID-19 GIS Hub

County Health Rankings & Roadmaps

Building a Culture of Health, County by County



GHDx



SAFE GRAPH



COVID-19 Community Mobility Reports

Apple Maps Mobility Trends Reports

Hospital-level Data

(e.g., #ICU beds, staff)



Samuel Scarpino



A bird's-eye view of the **hospital-level & county-level data**

- ~7000 hospitals in US
- ~200 features:
 - Geographical identifiers: address, lat/long, county
 - Type of facility (e.g., short term acute care, critical access)
 - Urban/rural
 - # total beds, # Med-Surg beds, # ICU beds
 - ICU Occupancy rate
 - #Employees, #RNs
 - Total discharges, average length of stay, average daily census
 - Hospital overall rating
- COVID-19 cases and deaths (NYT and USAFacts)
- Demographics
 - Population, population density, age structure
- Health risk factors
 - Heart disease, stroke, respiratory disease, smoking, diabetes, overall mortality
- Socioeconomic risk factors
 - Social vulnerability index, unemployment, poverty, education, severe housing
- Social distancing and mobility
 - County-to-county work commute, change in distance traveled, government orders
- Other relevant data
 - Sample of flight itineraries in 2019, Kinsa temperature data, voting data

Data Repository Traffic & Users (Last 2 weeks)



Estimated total views: ~18K

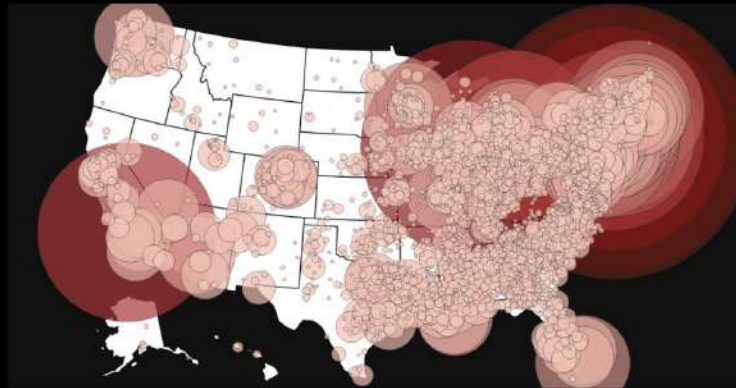
Forecasting county
death counts

COVID-19 SEVERITY PREDICTION

[Visualizations](#) [Data](#) [Models](#)

Predicted Cumulative COVID-19 Deaths

Use the slider below the map to change date.

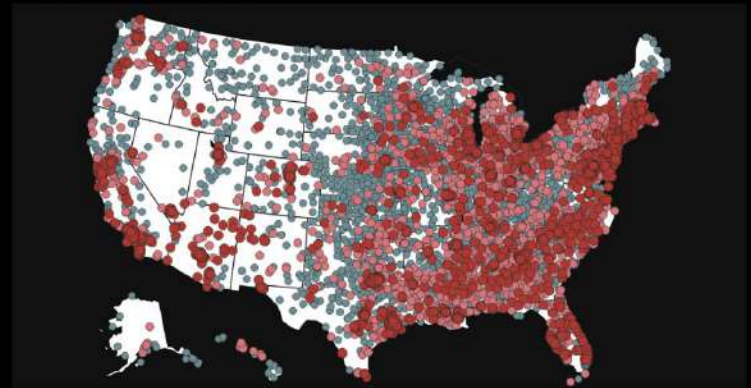


Deaths



Hospital-Level COVID-19 Pandemic Severity Index (CPSI)

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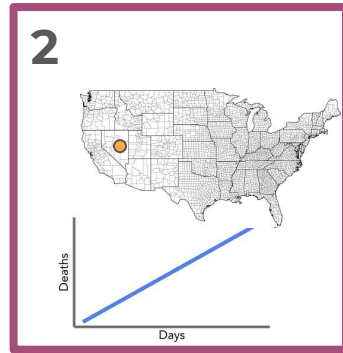
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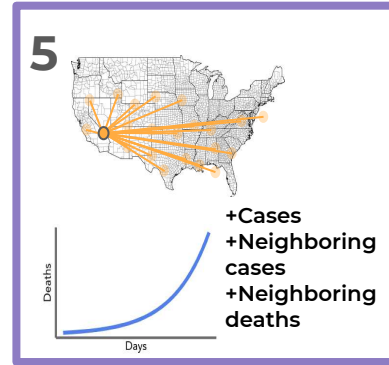
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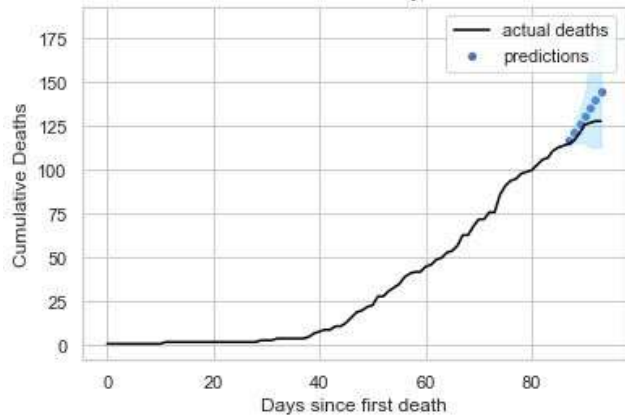
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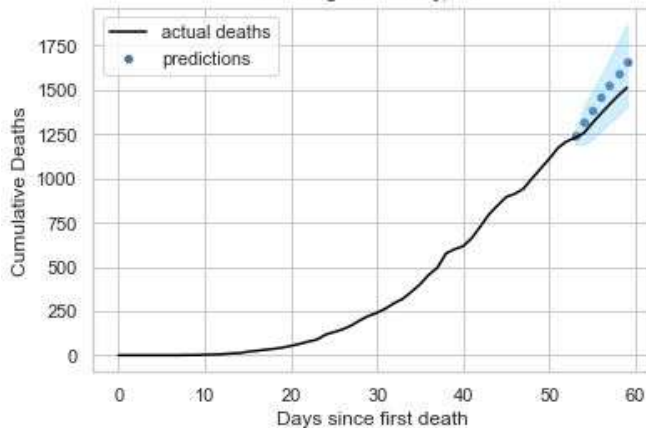
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Our county-level 7-day predictive performance

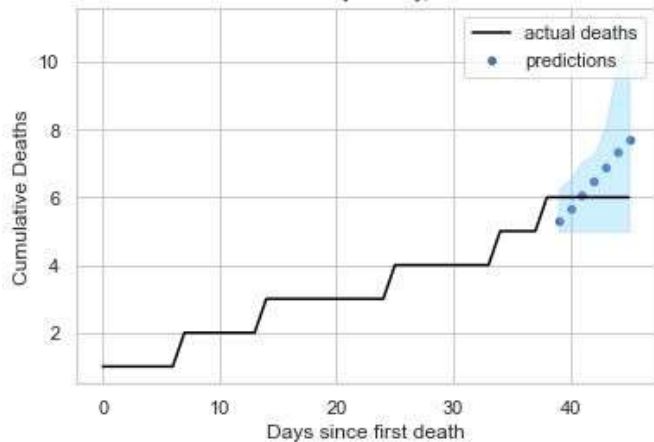
Santa Clara County, CA



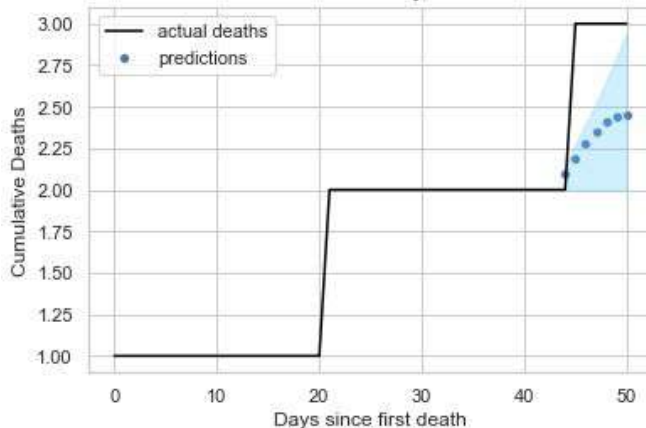
Los Angeles County, CA



Monterey County, CA

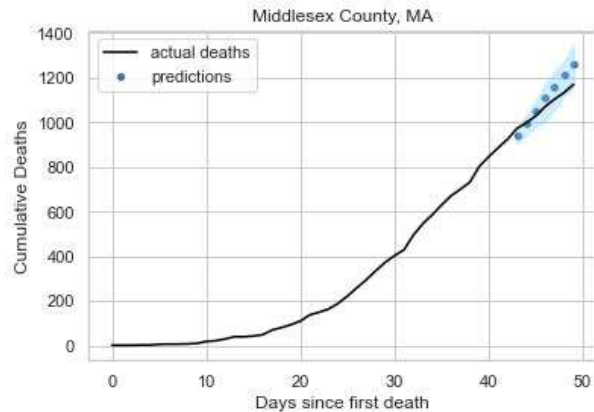
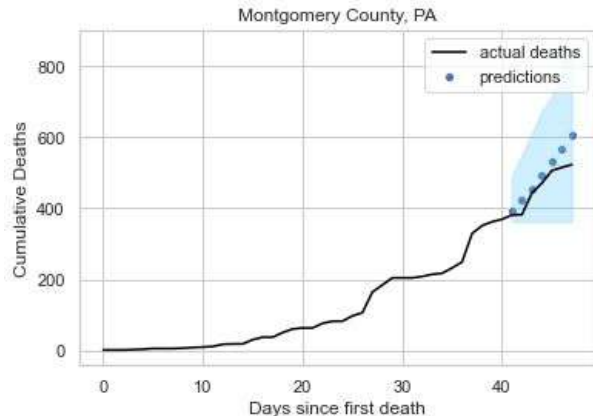
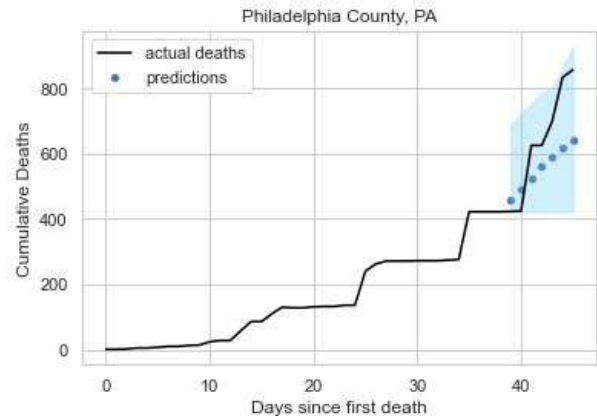


Sonoma County, CA



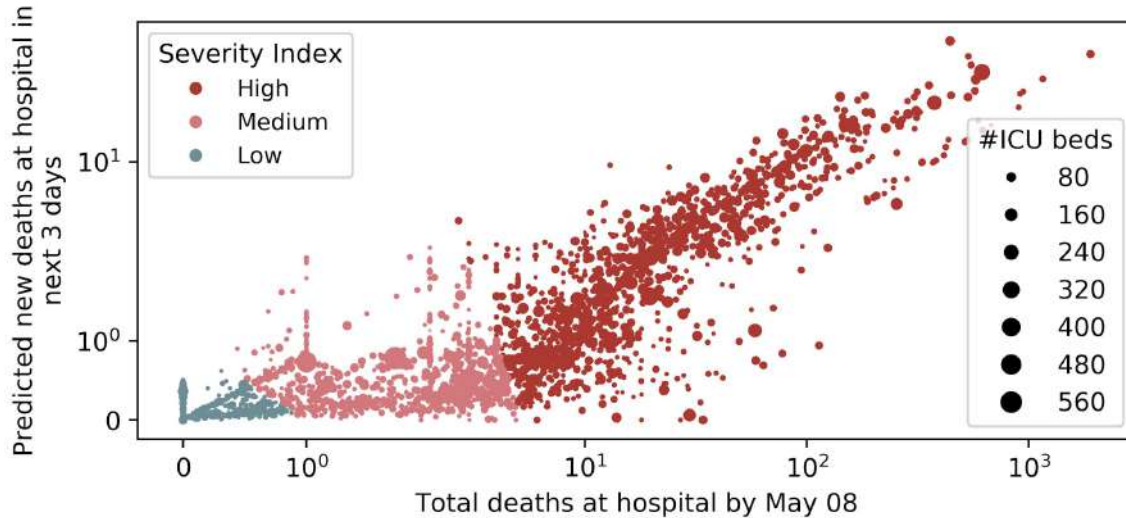
Selected CA counties

Our county-level 7-day predictive performance



Rapidly
Growing
Counties

Severity Index



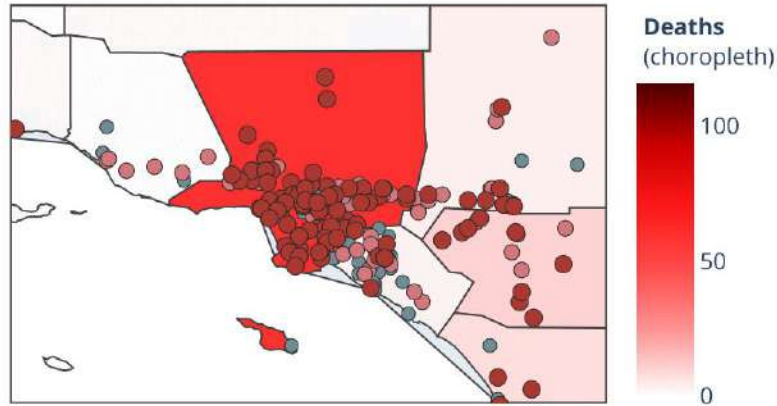
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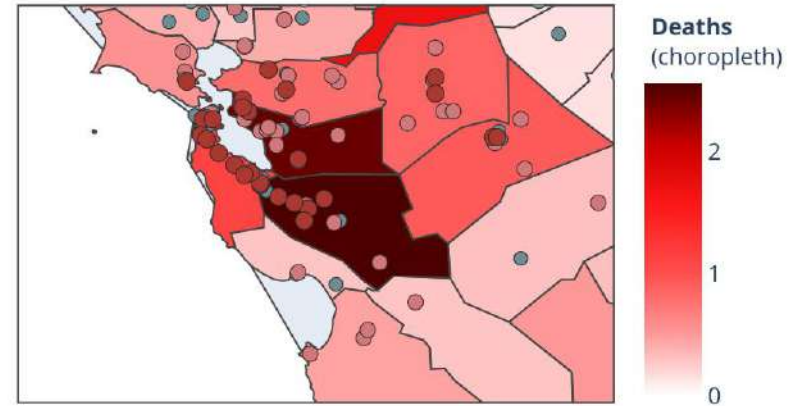
Mapping Deaths and the Hospital Severity Index Over Time

Predicted New Deaths for 2020-05-10



Los Angeles

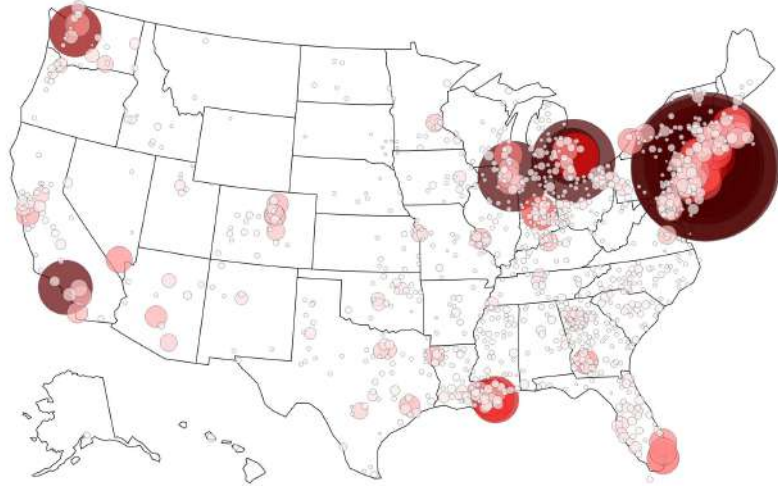
Predicted New Deaths for 2020-05-10



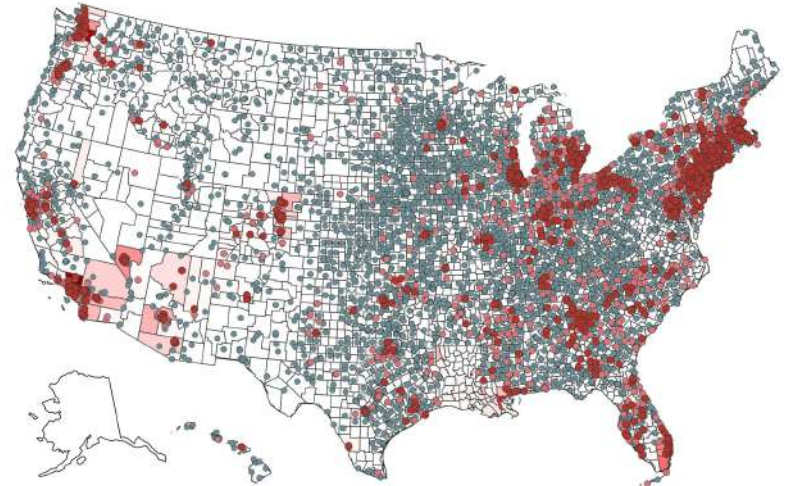
Bay Area

(Interactive) map visualizations

County-level predicted cumulative # of deaths*



Hospital severity index*



*Maps for 04/15

5000 Face Shields arrived at Temple Univ Hospital on May 8



Don Landwirth, R4L



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- Final project option for DS 100 at UC Berkeley (> 1000 students) and Stat 542 at University of Illinois Urbana-Champaign (graduate stat-ml course)
- Possible collaboration with California Department of Public Health
- Possible causal inference through matching of counties

Paper available at tinyurl.com/yugroup-covid19 and at Bin Yu's website

Curating a COVID-19 data repository and forecasting county-level death counts in the United States

Nick Altieri^{1, †}, Rebecca Barter¹, James Duncan⁶, Raaz Dwivedi², Karl Kumbier³,
Xiao Li¹, Robert Netzorg², Briton Park¹, Chandan Singh^{*2}, Yan Shuo Tan¹,
Tiffany Tang¹, Yu Wang¹, Bin Yu^{*1, 2, 4, 5, 6}

¹Department of Statistics, University of California, Berkeley

²Department of EECS, University of California, Berkeley

³Department of Pharmaceutical Chemistry, University of California, San Francisco

⁴Chan Zuckerberg Biohub, San Francisco

⁵Center for Computational Biology, University of California, Berkeley

⁶Division of Biostatistics, University of California, Berkeley

April 29, 2020

†Authors ordered alphabetically. All authors contributed significantly to this work.

*Corresponding authors

This project was initiated on March 21, 2020, with the goal of helping aid the allocation of supplies to different hospitals in the U.S., in partnership with the non-profit Response4Life.



In partnership with



COVID-19 Data Repository and County Death Count Prediction

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github.com/Yu-Group/covid19-severity-prediction

Website: covidseverity.com

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(Student Lead)



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T. Tang



Y. Wang

Many others at UC Berkeley, UCSF, Stanford, Northeastern, Univ. of Chicago, UW-Madison, ...

Overview: Current Data Repository & Prediction Pipeline



COVID-19 Data Repository
COVID-19 Cases/Deaths + County-level Data + Hospital-level Data



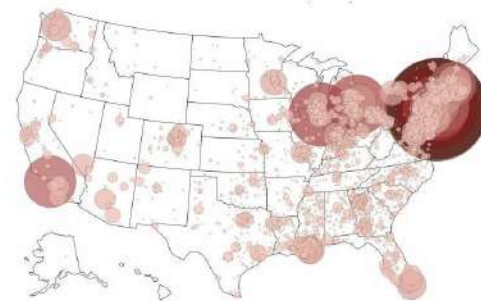
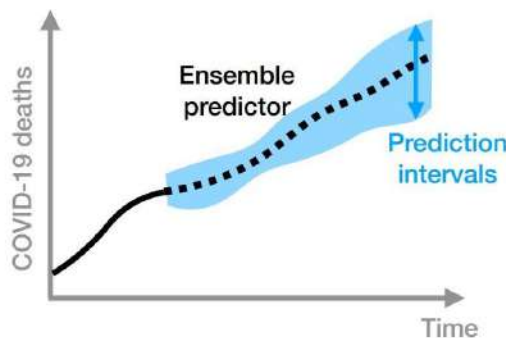
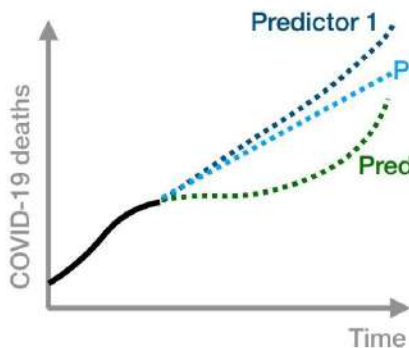
Multiple county-level predictors



CLEP Ensemble + MEPI intervals



Visualizations

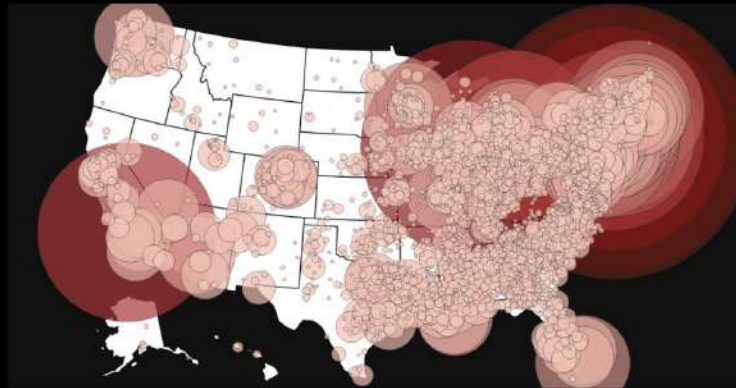


COVID-19 SEVERITY PREDICTION

[Visualizations](#) [Data](#) [Models](#)

Predicted Cumulative COVID-19 Deaths

Use the slider below the map to change date.

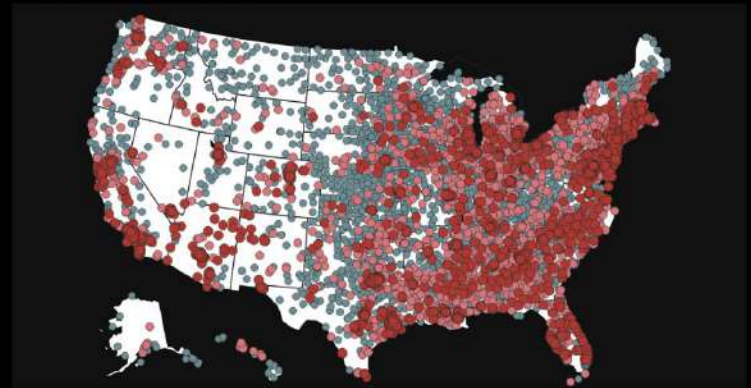


Deaths



Hospital-Level COVID-19 Pandemic Severity Index (CPSI)

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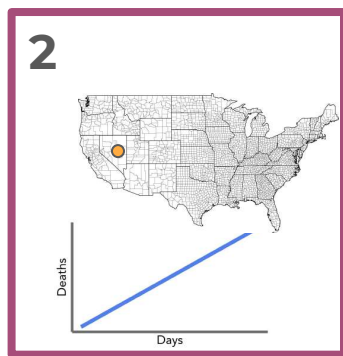
[VIEW INTERACTIVE MAP IN FULLSCREEN](#)



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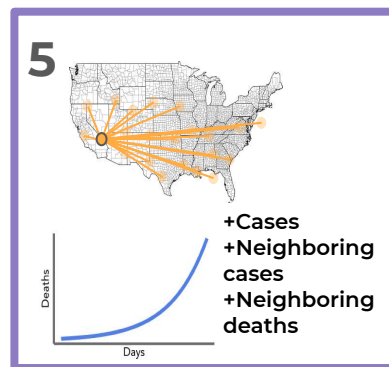
Combined Linear and Exponential **Predictor (CLEP)**

A combination of two models performs well



Separate-county
linear predictor

+



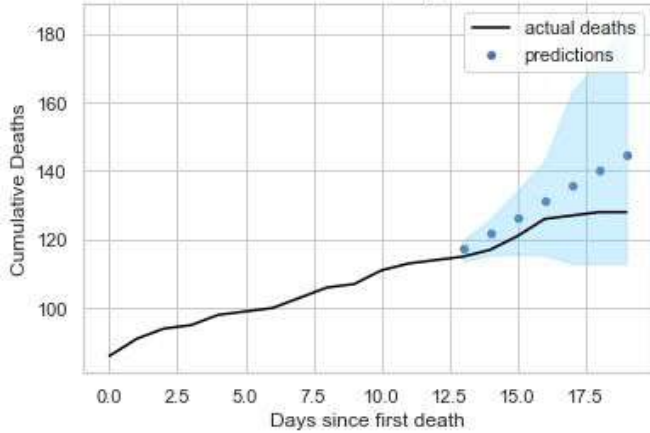
Expanded
Shared-county
exponential predictor

Calculate a **weighted average of the predictions**: higher weight to the models with better historical performance^[1]

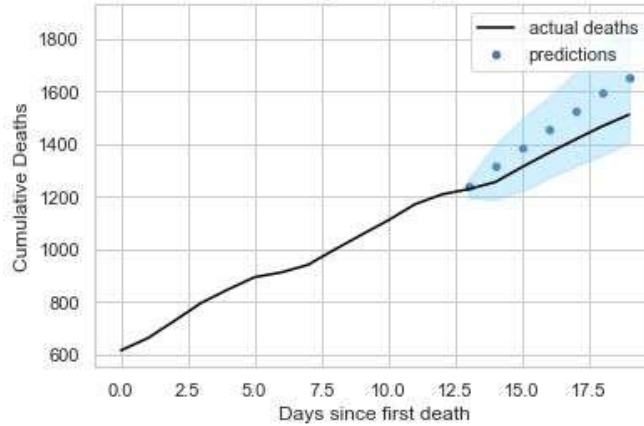
[1]. Schuller, Gerald DT, et al. "Perceptual audio coding using adaptive pre-and post-filters and lossless compression." *IEEE Transactions on Speech and Audio Processing* 10.6 (2002): 379-390.

Death count prediction results: 4/20-5/10

Santa Clara County, CA

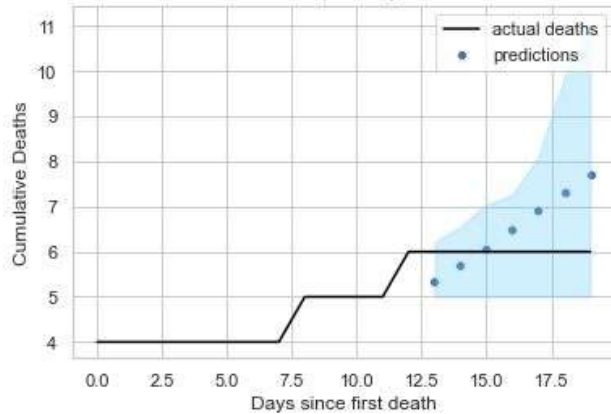


Los Angeles County, CA

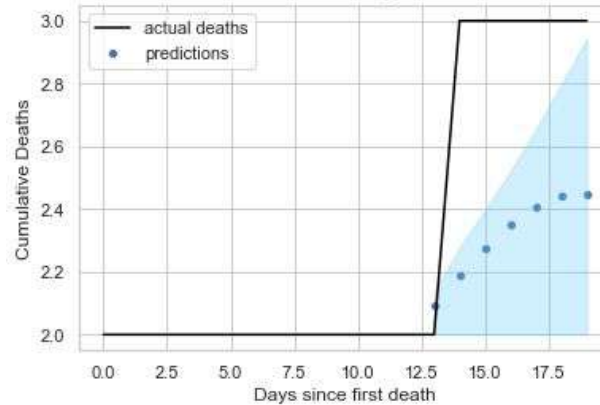


Selected CA counties

Monterey County, CA



Sonoma County, CA



Data Repository

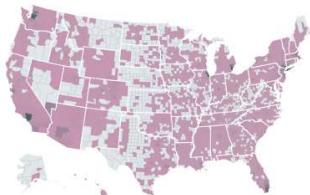
Overview of sources (county/hospital)

- pipelines/processes
 - Current users
 - Current efforts

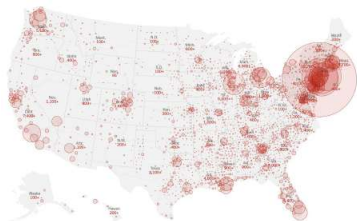
Data: scraped from a variety of sources

COVID-19 Cases/Deaths

USA FACTS



The New York Times



THE CENTER FOR SPATIAL DATA SCIENCE
THE UNIVERSITY OF CHICAGO

County-level Data

(Risk Factors, Demographics, Social Mobility)

CDC Centers for Disease Control and Prevention
CDC 24/7: Saving Lives, Protecting People™

Division for Heart Disease and Stroke Prevention



esri

COVID-19 GIS Hub



County Health Rankings & Roadmaps

Building a Culture of Health, County by County



GHDx



Introducing the Unacast
Social Distancing Scoreboard

USDSS UNITED STATES DIABETES SURVEILLANCE SYSTEM

Division of Diabetes Translation, CDC

JOHNS HOPKINS UNIVERSITY

CMS.gov
Centers for Medicare & Medicaid Services

United States®
Census
Bureau



STREETLIGHT

KHN
KAISER HEALTH NEWS



cuebiq

kinsa SAFE GRAPH

Hospital-level Data

(e.g., #ICU beds, staff)

HRSA
Health Resources & Services Administration

ArcGIS Hub



Samuel Scarpino



A bird's-eye view of the **hospital-level & county-level data**

- ~7000 hospitals in US
- ~200 features:
 - Geographical identifiers: address, lat/long, county
 - Type of facility (e.g., short term acute care, critical access)
 - Urban/rural
 - # total beds, # Med-Surg beds, # ICU beds
 - ICU Occupancy rate
 - #Employees, #RNs
 - Total discharges, average length of stay, average daily census
 - Hospital overall rating
- COVID-19 cases and deaths (NYT and USAFacts)
- Demographics
 - Population, population density, age structure
- Health risk factors
 - Heart disease, stroke, respiratory disease, smoking, diabetes, overall mortality
- Socioeconomic risk factors
 - Social vulnerability index, unemployment, poverty, education, severe housing
- Social distancing and mobility
 - County-to-county work commute, change in distance traveled, government orders
- Other relevant data
 - Sample of flight itineraries in 2019, Kinsa temperature data, voting data

Data Repository Traffic & Users (Last 2 weeks)



Estimated total views: ~18K

Impact: 5000 Face Shields arrived at Temple Univ Hospital on May 8



Don Landwirth, R4L



Other Impacts of Our Data Repository

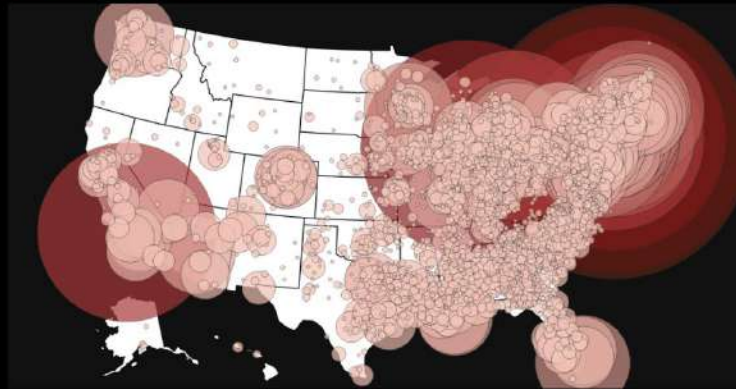
- Data repository a popular resource for other covid-19 activities:
In last two weeks, 2.9K visits with 394 unique visitors;
153 clones with 102 unique cloners
- Results on CSDS atlas at University of Chicago
- Final project option for DS100 at UC Berkeley (> 1000 students) and Stat542 at University of Illinois Urbana-Champaign (graduate stat-ml course)
- Collaboration with Google OpenSource, Microsoft's AI for Good, on hospitalization need prediction (on-going)
- Possible collaboration with with California Department of Public Health
- Exploratory causal inference through matching of counties (on-going)

COVID-19 SEVERITY PREDICTION

[Visualizations](#) [Data](#) [Models](#)

Predicted Cumulative COVID-19 Deaths

Use the slider below the map to change date.

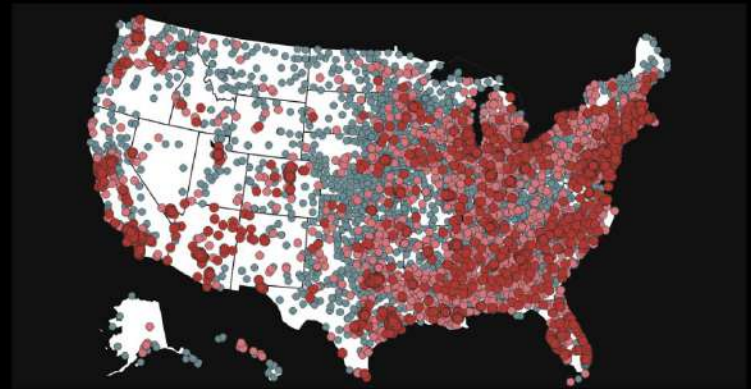


Deaths



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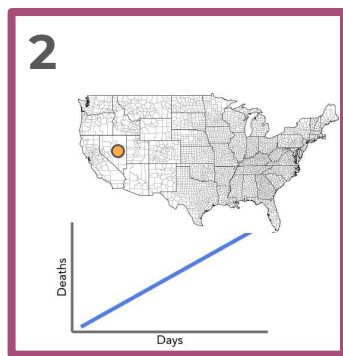
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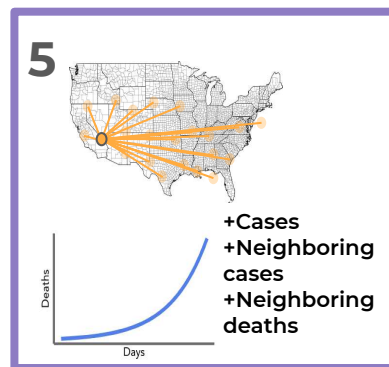
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Separate-county
linear predictor

+



Expanded
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Current Data Repository & Pipeline(alternative to page 2)



COVID-19 Data Repository

COVID-19 Cases/Deaths + County-level Data + Hospital-level Data



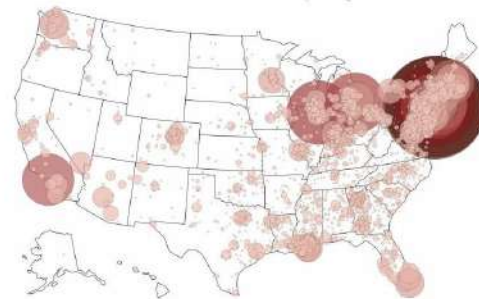
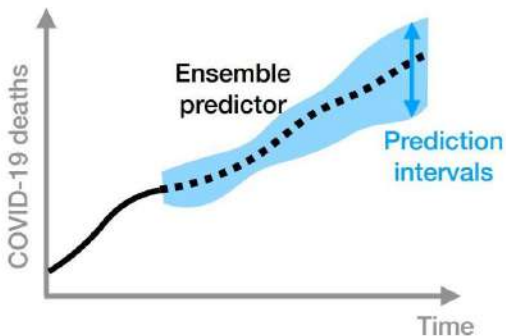
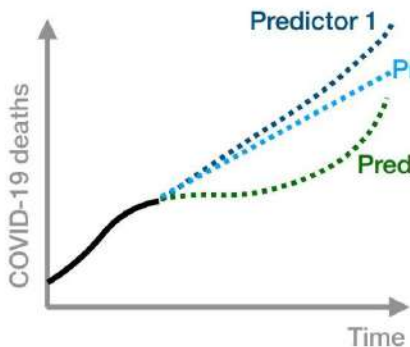
Multiple county-level predictors



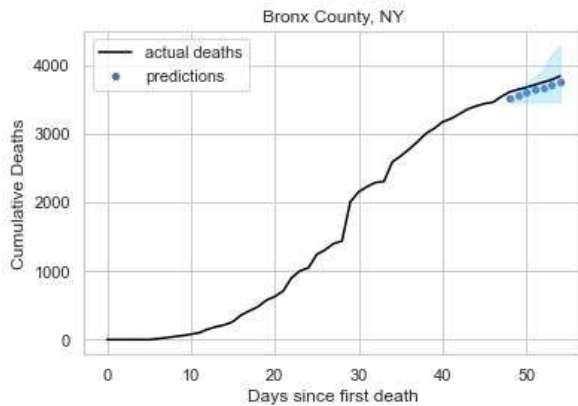
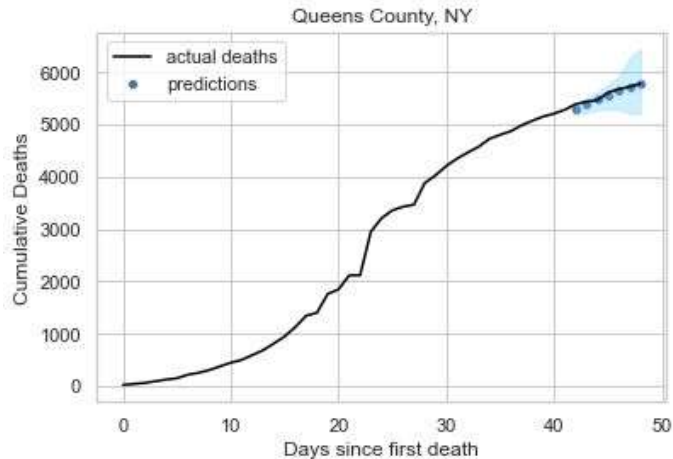
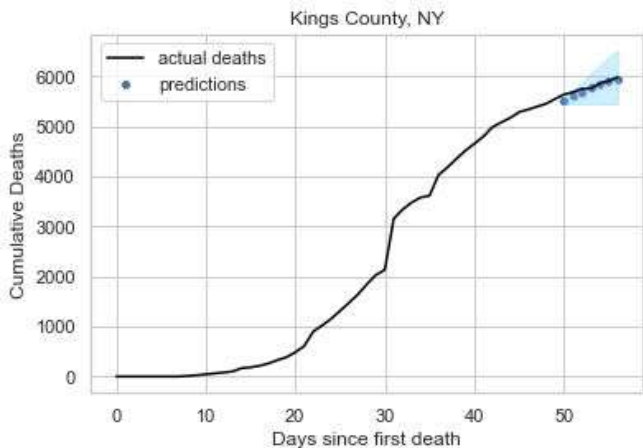
CLEP Ensemble + MEPI intervals



Visualizations



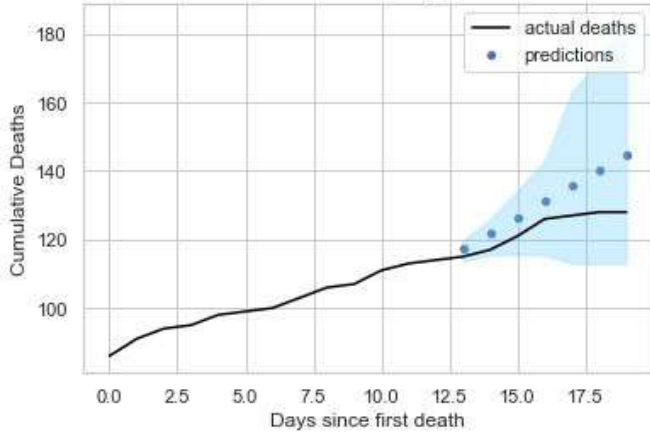
Our county-level 7-day predictive performance



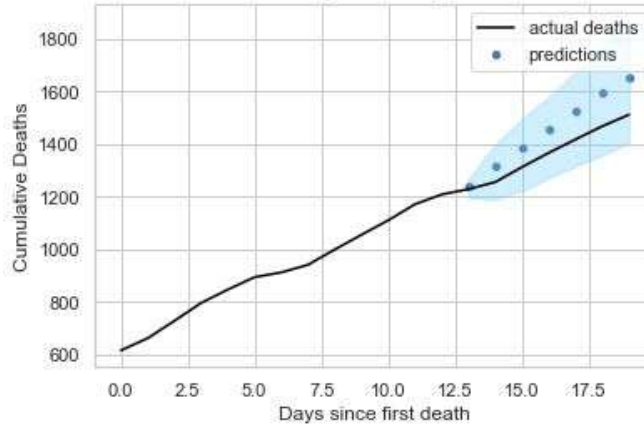
Worst Affected
Counties

Most recent 20 days zoom in

Santa Clara County, CA

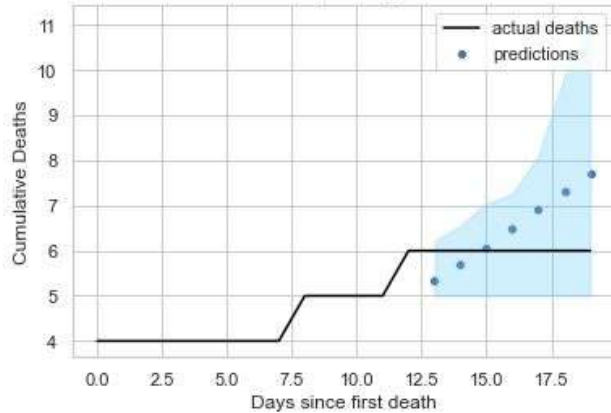


Los Angeles County, CA

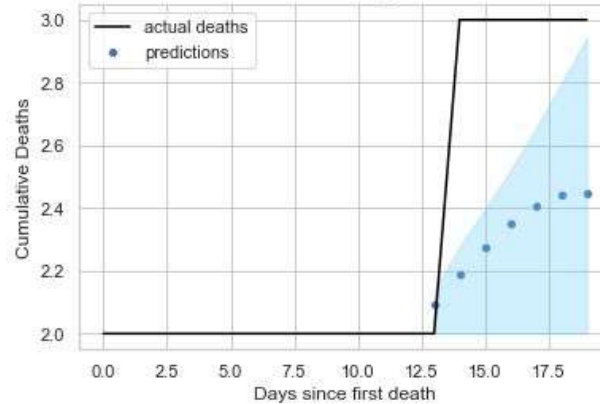


Selected CA counties

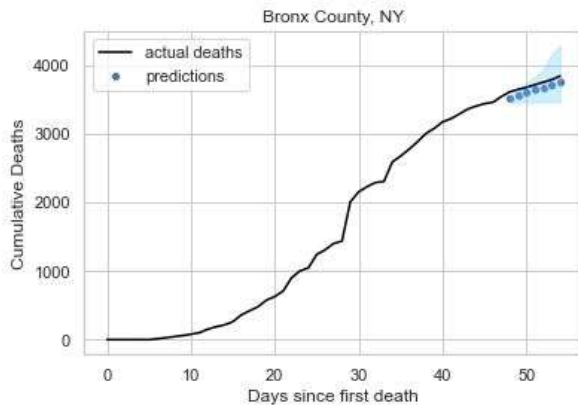
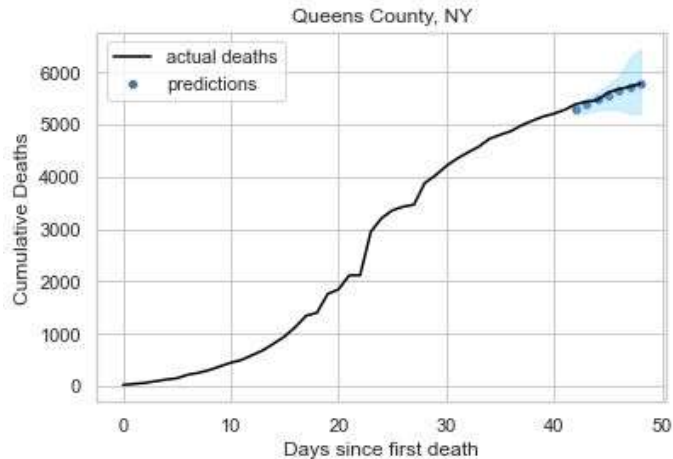
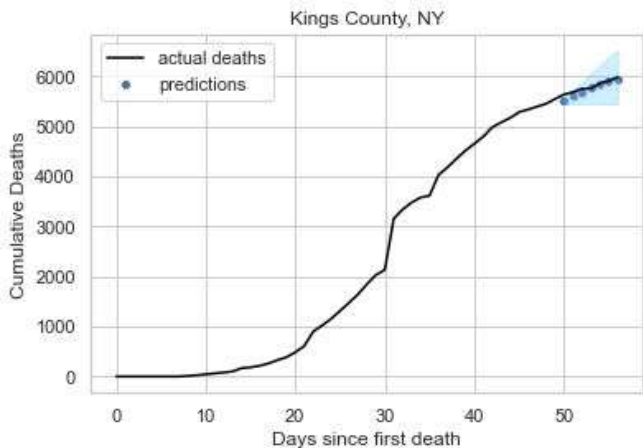
Monterey County, CA



Sonoma County, CA

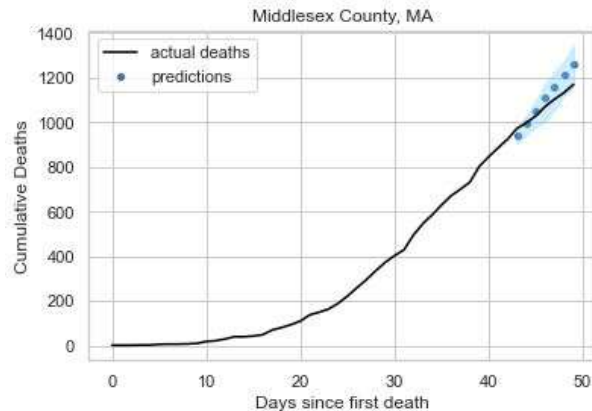
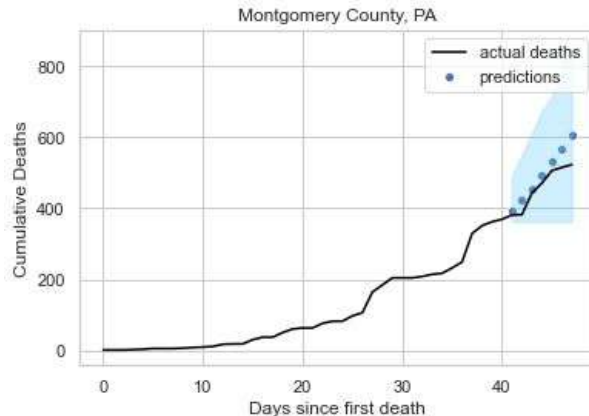
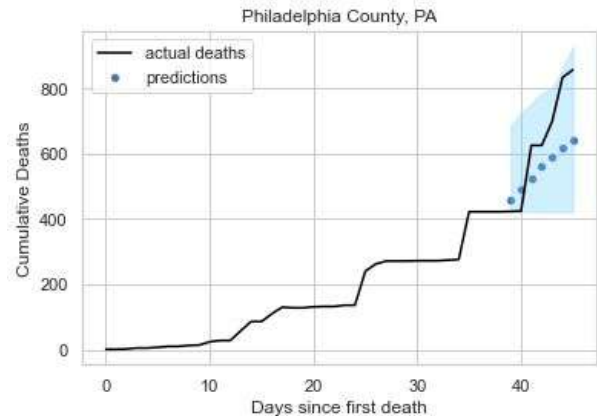


Our county-level 7-day predictive performance



Worst Affected
Counties

Our county-level 7-day predictive performance



Rapidly
Growing
Counties



In partnership with



COVID-19 Data Repository and Severity Prediction

Yu Group
UC Berkeley Statistics, EECS, CCB



github.com/Yu-Group/covid19-severity-prediction

Website: covidseverity.com

California Department of Public Health, Modeling Group
May 11, 2020

Overwhelmed
equipment sho
Coronavirus pandemic plays
out as sta

SICK DOCTORS, NURSES AND NOT ENOUGH
EQUIPMENT: NYC HEALTH CARE WORKERS
ON THE FIGHT AGAINST THE CORONAVIRUS

Government watchdog: Hospitals face
severe shortages of medical gear, confusing

'At War With No
Shortage of Prote

guidance from government

Goal: Help Aid Resource Allocation

Health officials warn US government does not have enough
stockpiled medical equipment to deal with coronavirus

Coronavirus pandemic

ing medical supplies

forcing nurses
asks

with "no protection"

Perspective

Critical Supply

Protective Equipment during the Covid-19 Pandemic



Our team

from UC Berkeley Statistics/EECS and UCSF



PI: B. Yu



N. Altieri



R. Barter



J. Duncan



R. Dwivedi



K. Kumbier



X. Li



R. Netzorg



B. Park



C. Singh
(Student Lead)



Y. Tan

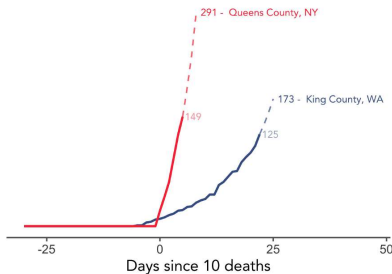
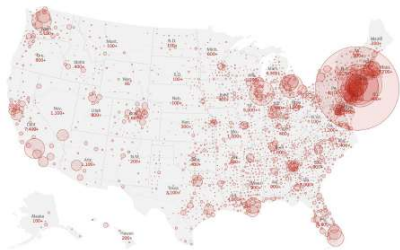


T. Tang



Y. Wang

Many others at UC Berkeley, UCSF, Stanford, Northeastern, Univ. of Chicago, UW-Madison, ...



Data Curation

- Hospital data
- County data



Modeling

- County-level 7-day severity prediction
- hospital demand prediction



Evaluation / Visualization

- Identify hotspots and risk factors via news articles
- Visualization
- Validate forecasts



Curating a COVID-19 Data Repository

Data Processing Pipeline

Data Scraping

- **Collect 1M records from 10+ data sources**
- **Monitor data changes 24/7 powered by AWS**

Data Cleaning

- **Handling missing and erratic entries**
- **Automated python script**

Data Validity

- **Compare data across different sources to ensure data validity**
- **Search for emerging data sources**

For almost a month, 2 full-time students, and on-going with 1 full-time student



Amazon EC2



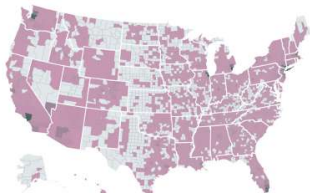
Data and code available: <https://github.com/Yu-Group/covid19-severity-prediction>

★ Being used by multiple research groups across the country

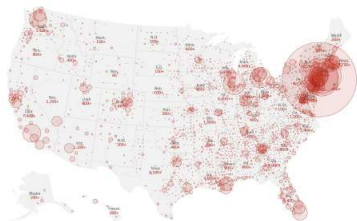
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USA FACTS



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esri

COVID-19 GIS Hub



County Health Rankings & Roadmaps

Building a Culture of Health, County by County



GHDx



Introducing the Unacast
Social Distancing Scoreboard

USDSS UNITED STATES DIABETES SURVEILLANCE SYSTEM

Division of Diabetes Translation, CDC

JOHNS HOPKINS UNIVERSITY

CMS.gov
Centers for Medicare & Medicaid Services

United States®
Census
Bureau



STREETLIGHT

KHN
KAISER HEALTH NEWS



cuebiq

kinsa SAFE GRAPH

Hospital-level Data

(e.g., #ICU beds, staff)

HRSA
Health Resources & Services Administration

ArcGIS Hub

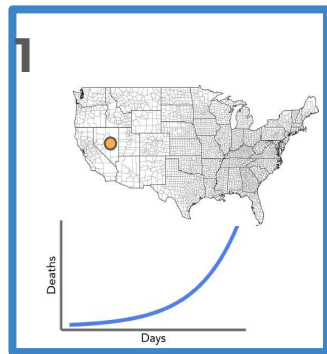


Samuel Scarpino

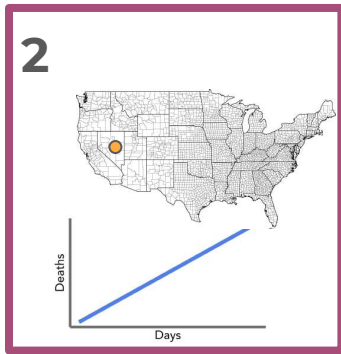


Forecasting county
death counts

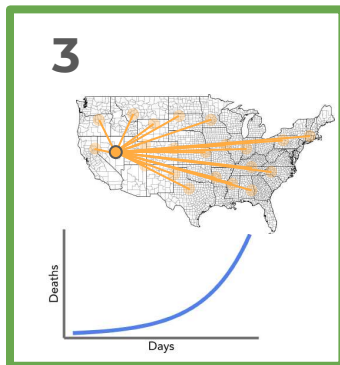
Combined Linear and Exponential Predictors (CLEP)



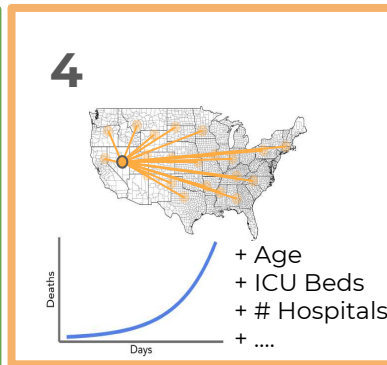
Separate-county exponential predictor



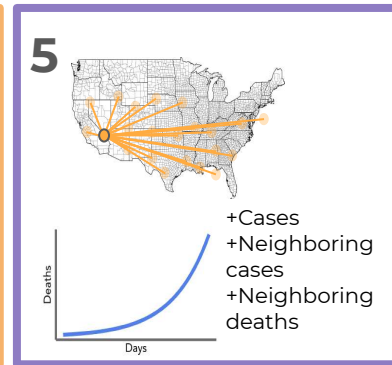
Separate-county linear predictor



Shared-county exponential predictor



Shared-county exponential predictor + demographics



Expanded Shared-county exponential predictor

Calculate a **weighted average of the predictions**: higher weight to the models with better historical performance^[2]

[2]. Schuller, Gerald DT, et al. "Perceptual audio coding using adaptive pre-and post-filters and lossless compression." *IEEE Transactions on Speech and Audio Processing* 10.6 (2002): 379-390.

Combined Linear and Exponential Predictors (CLEP)

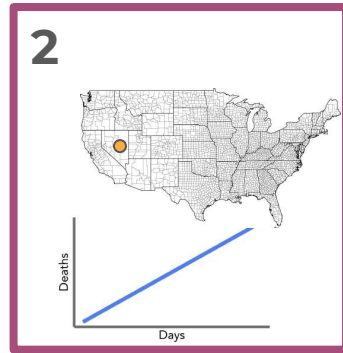
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$$w_t^m \propto \exp \left(-c(1 - \mu) \sum_{i=t_0}^{t-1} \mu^{t-i} \ell(\hat{y}_i^m, y_i) \right)$$

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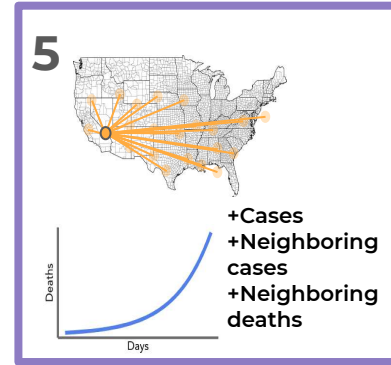
Combined Linear and Exponential Predictors (CLEP)

A smaller combination performed better



Separate-county
linear predictor

+



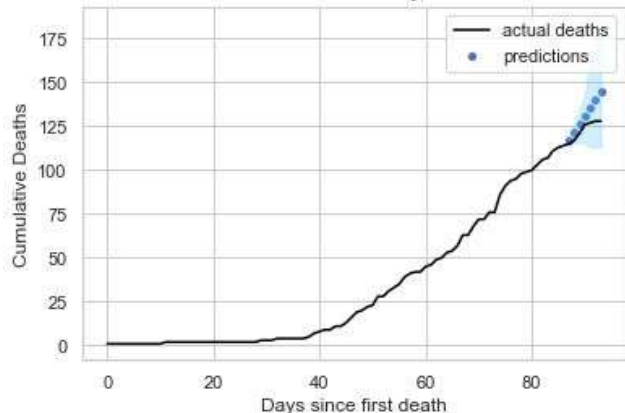
Expanded
Shared-county
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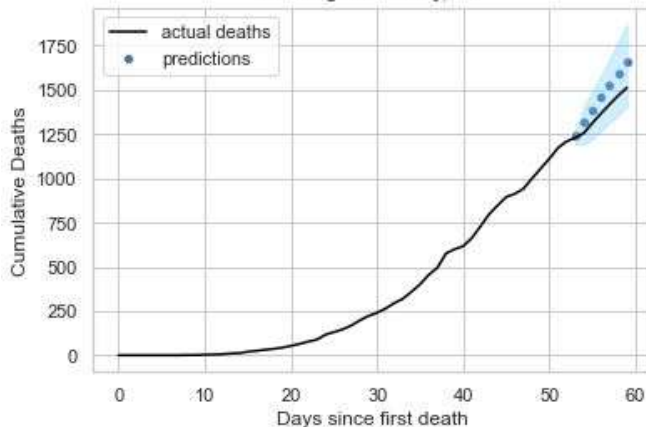
[2]. Schuller, Gerald DT, et al. "Perceptual audio coding using adaptive pre-and post-filters and lossless compression." *IEEE Transactions on Speech and Audio Processing* 10.6 (2002): 379-390.

Our county-level 7-day predictive performance

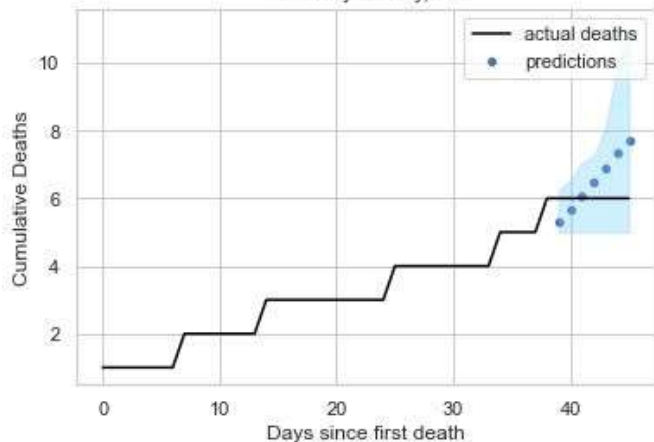
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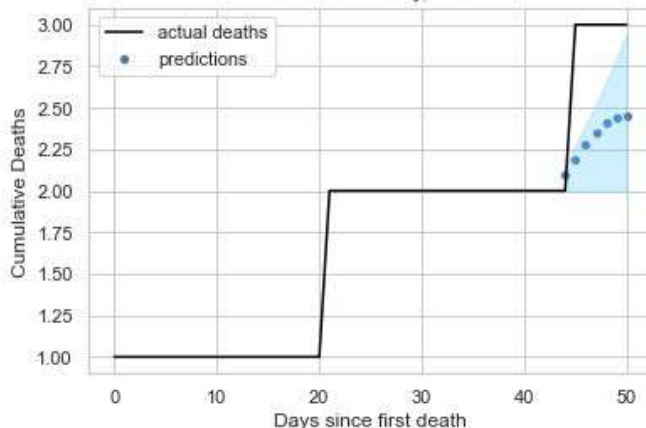
Los Angeles County, CA



Monterey County, CA



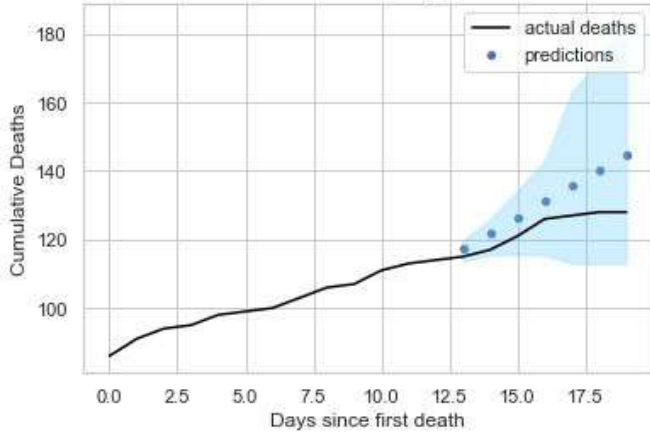
Sonoma County, CA



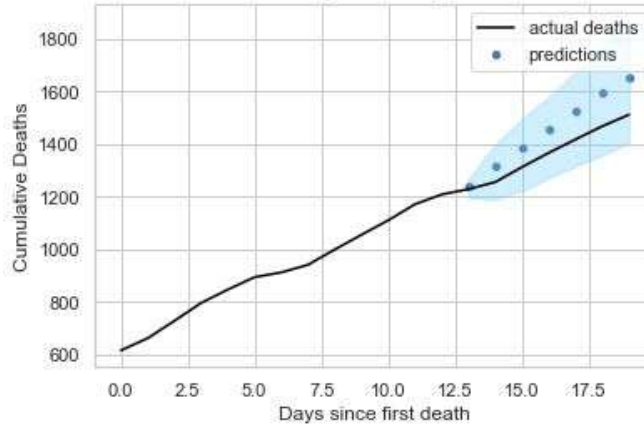
Selected CA counties

Most recent 20 days zoom in

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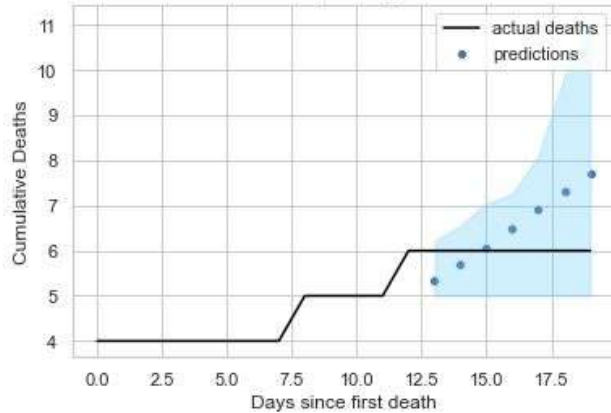


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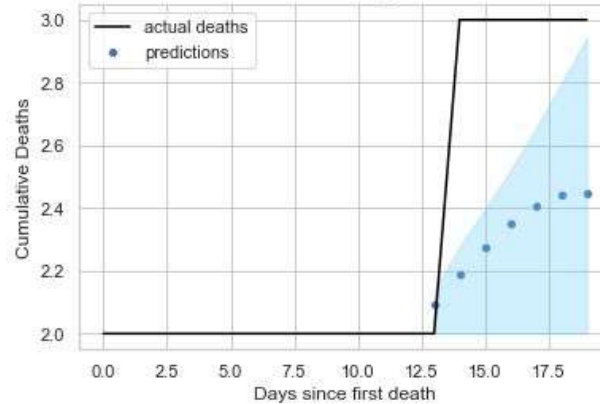


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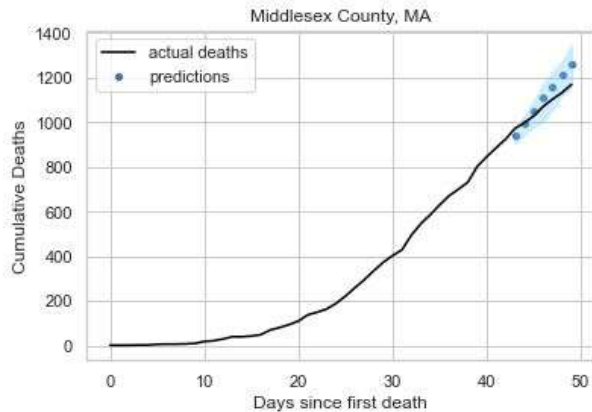
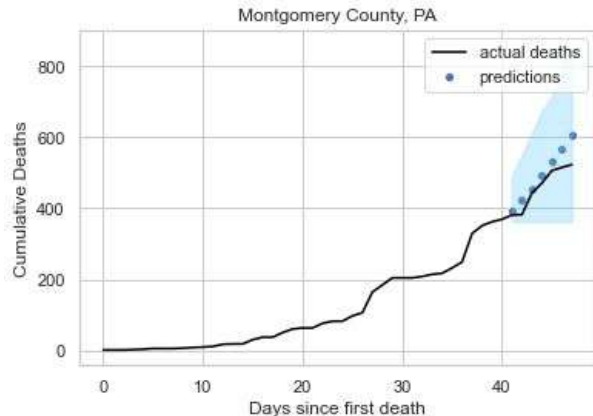
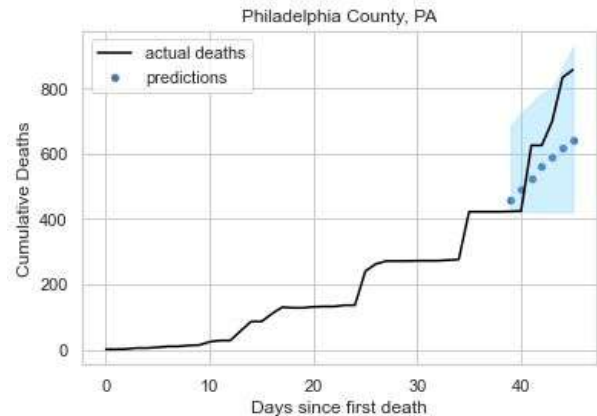
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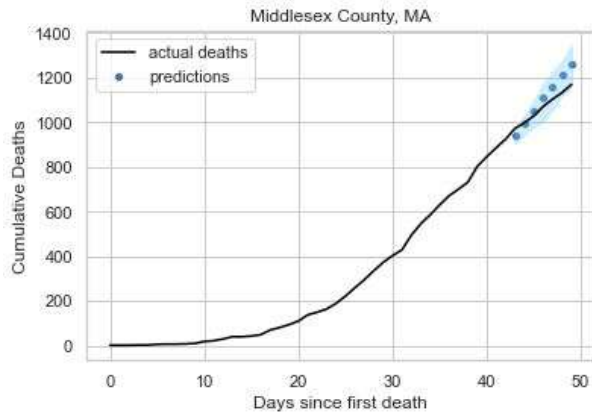
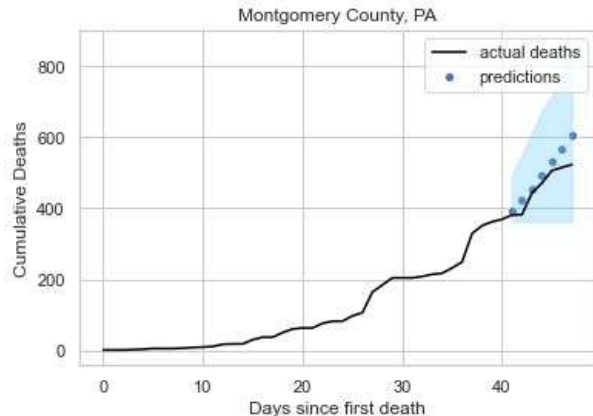
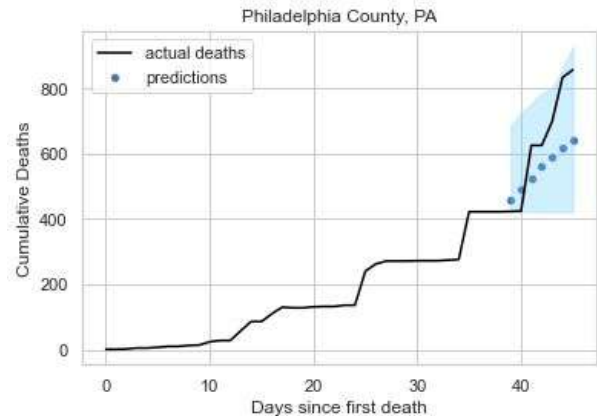


Our county-level 7-day predictive performance



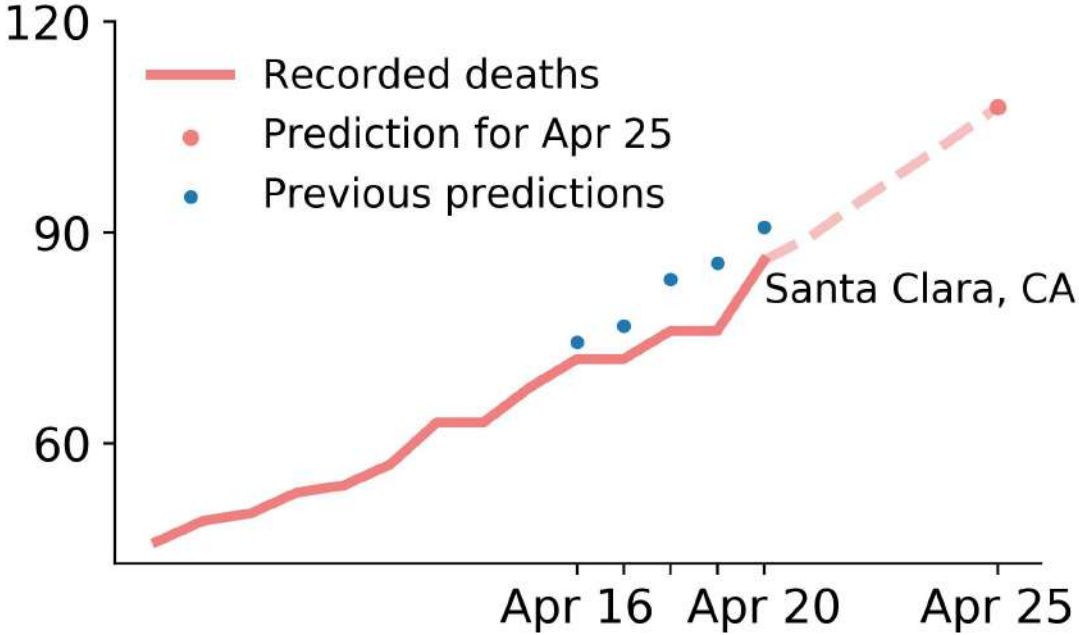
Rapidly
Growing
Counties

Our county-level 7-day predictive performance



Rapidly
Growing
Counties

Prediction Intervals:

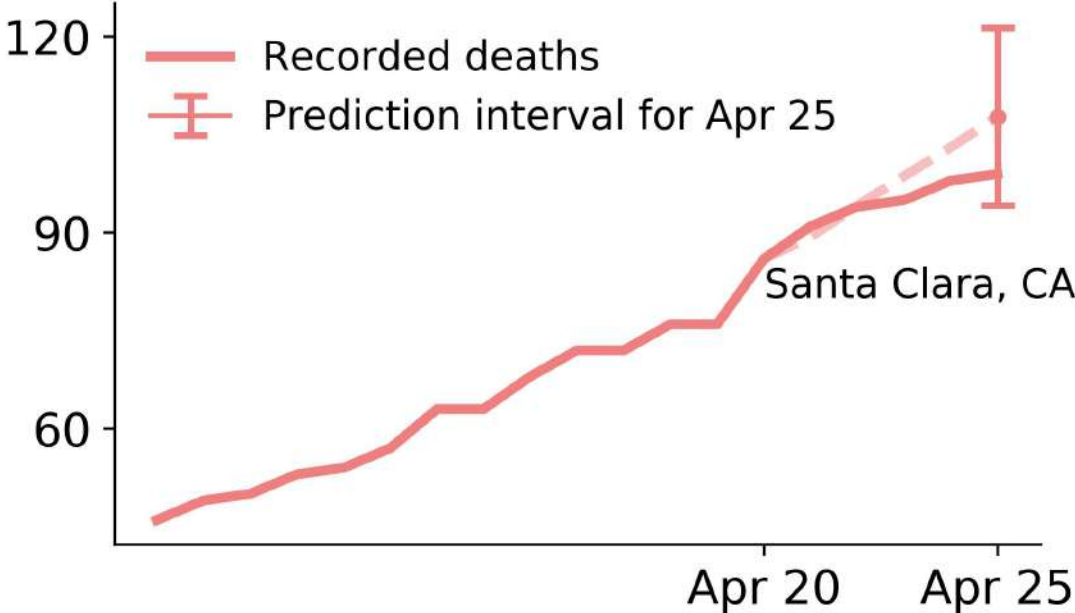


Previous 5-day-ahead prediction errors (%)

Apr 16	3.3%
Apr 17	6.5%
Apr 18	9.6%
Apr 19	12.6%
Apr 20	5.5%
Apr 25	?

Take the max

Prediction Intervals:



Predicted range of error
Apr 25 **[-12.6%, 12.6%]**

Actual error:
Apr 25 **8.8%**

Maximum (absolute) error prediction intervals (MEPI)

Step 1

Find normalized error of our predictor in the past.

$$\Delta_{\tau} := |y_{\tau} - \hat{y}_{\tau}| / |\hat{y}_{\tau}|.$$

Step 2

Find maximum error of past 5 days.

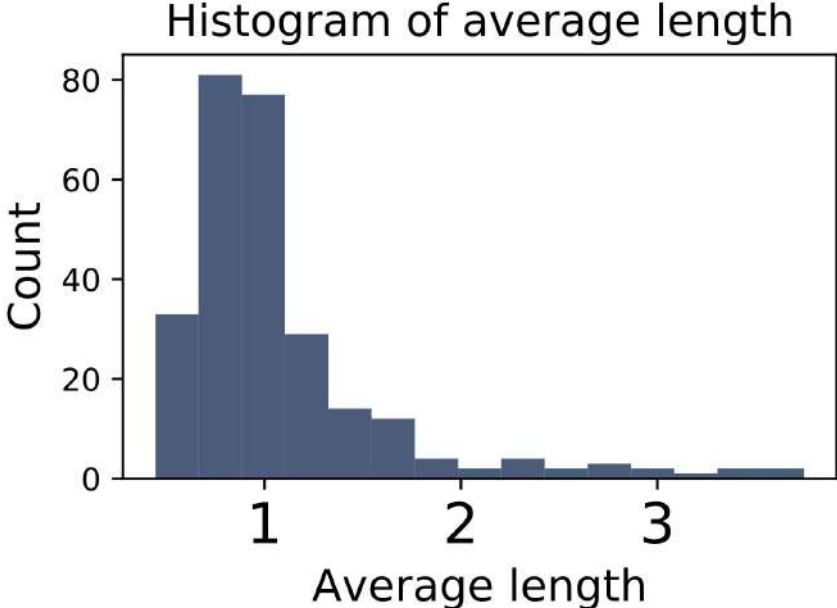
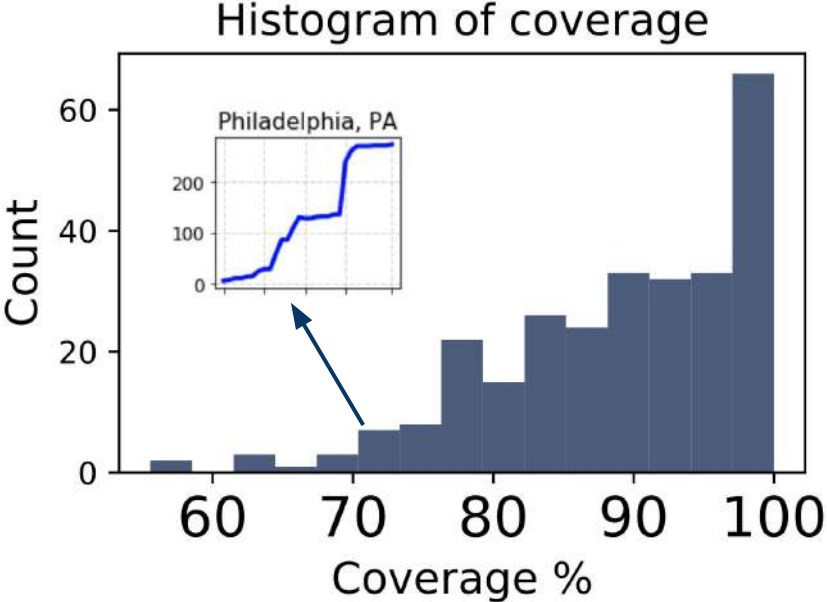
$$\Delta_{\max} := \max_{0 \leq j \leq 4} \Delta_{t-j}.$$

Step 3

$$\widehat{\text{PI}}_{t+k} := [\max \{ \hat{y}_{t+k}(1 - \Delta_{\max}), y_t \}, \hat{y}_{t+k}(1 + \Delta_{\max})]$$

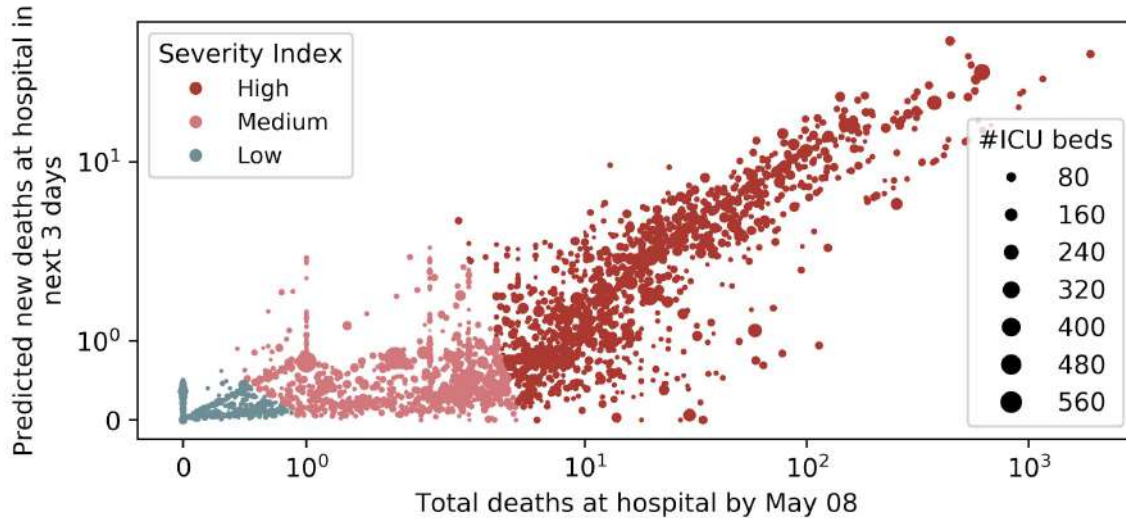
Can be applied to any ML model, and it works well under **exchangeability** condition on the errors.

Empirical performance of MEPI



Evaluation period: March 28--April 27. Only include days since the county has 10 deaths. Having a normalized length of 0.8 means the PI is roughly $(0.6 \hat{y}_{t+k}, 1.4 \hat{y}_{t+k})$.

Severity Index



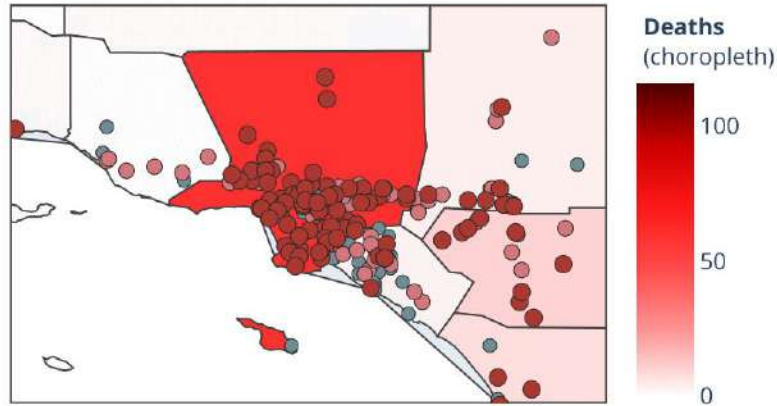
A score* for each hospital based on:

1. Predicted cumulative deaths
2. Predicted daily deaths

* county level predicted deaths are distributed to hospitals proportional to #employees

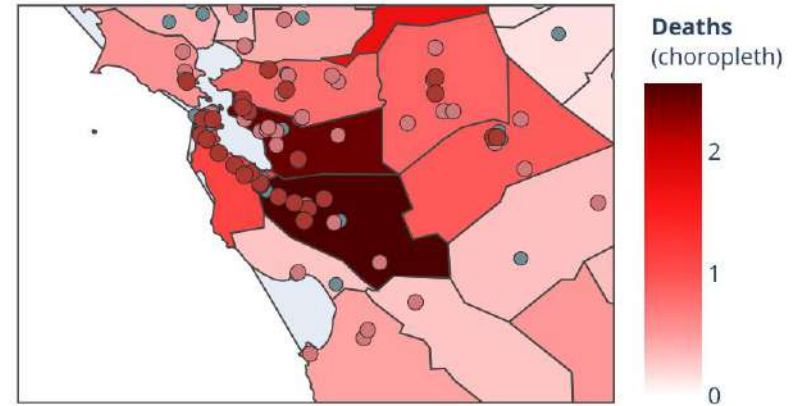
Mapping Deaths and the Hospital Severity Index Over Time

Predicted New Deaths for 2020-05-10



Los Angeles

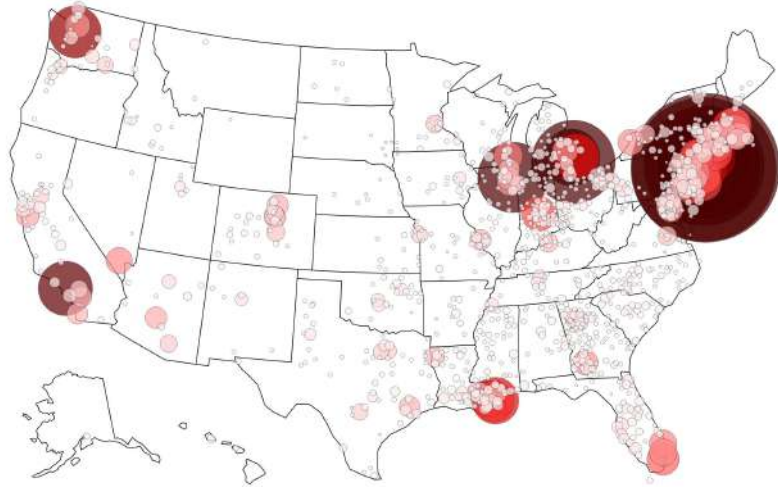
Predicted New Deaths for 2020-05-10



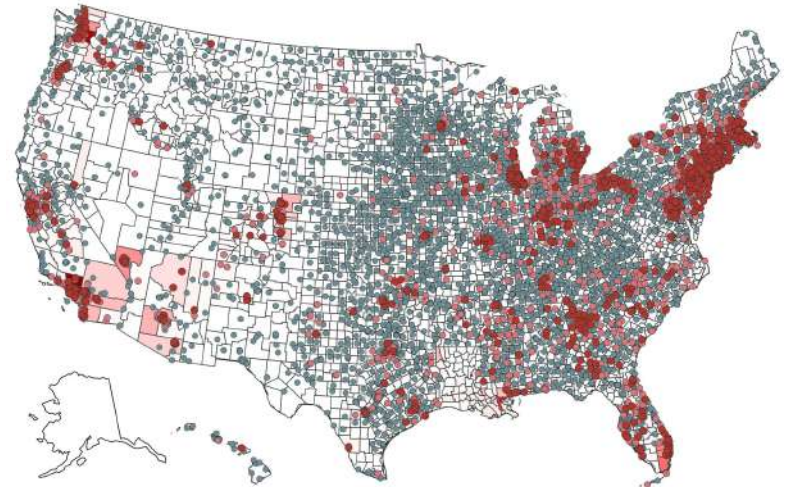
Bay Area

(Interactive) map visualizations

County-level predicted cumulative # of deaths*



Hospital severity index*



*Maps for 04/15

5000 Face Shields arrived at Temple Univ Hospital on May 8



Don Landwirth, R4L

Impact of our work beyond R4L

- Data repository a popular resource for other covid-19 activities

In last two weeks, 12K visits with 1.1K unique visitors; 108 clones with 53 unique cloners

- Results on CSDS atlas at Univ of Chicago
- Final project option for DS 100 at Berkeley (> 1000 students) and Stat 542 at University of Illinois Urbana-Champaign (graduate stat-ml course)
- Possible causal inference through matching of counties
- Possible collaboration with California Department of Public Health (?)

Paper available at tinyurl.com/yugroup-covid19 and at

[Curating a COVID-19 data repository and forecasting county-level death counts in the United States](#)

Curating a COVID-19 data repository and forecasting county-level death counts in the United States

Nick Altieri^{1, †}, Rebecca Barter¹, James Duncan⁶, Raaz Dwivedi², Karl Kumbier³,
Xiao Li¹, Robert Netzorg², Briton Park¹, Chandan Singh^{*2}, Yan Shuo Tan¹,
Tiffany Tang¹, Yu Wang¹, Bin Yu^{*1, 2, 4, 5, 6}

¹Department of Statistics, University of California, Berkeley

²Department of EECS, University of California, Berkeley

³Department of Pharmaceutical Chemistry, University of California, San Francisco

⁴Chan Zuckerberg Biohub, San Francisco

⁵Center for Computational Biology, University of California, Berkeley

⁶Division of Biostatistics, University of California, Berkeley

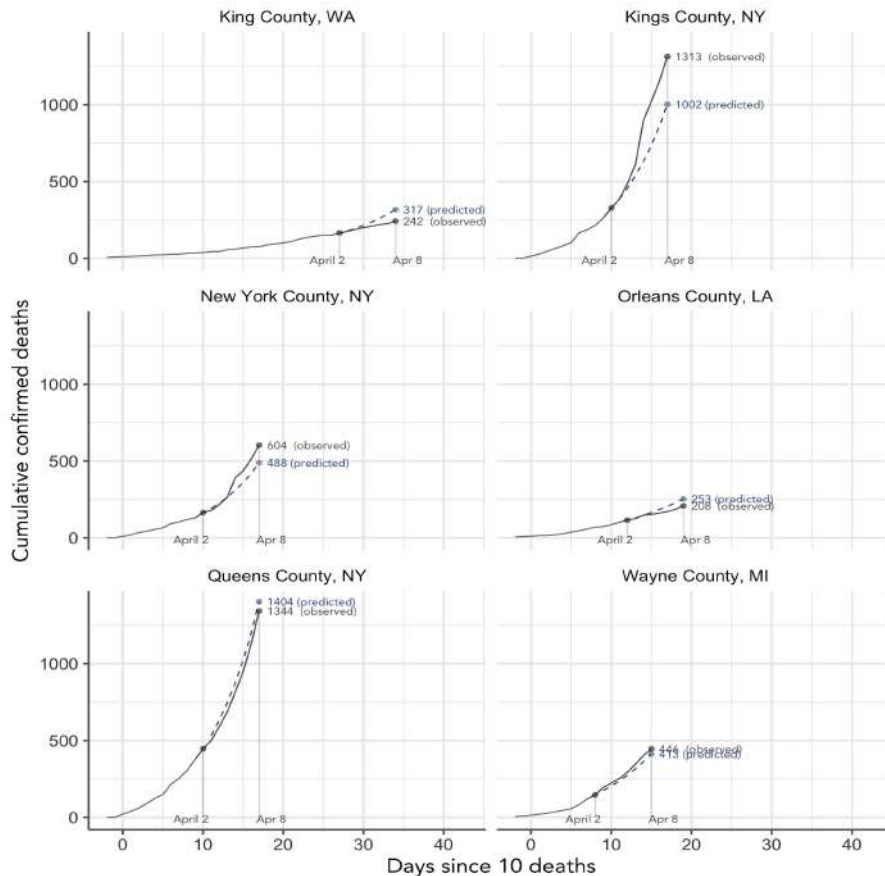
April 29, 2020

†Authors ordered alphabetically. All authors contributed significantly to this work.

*Corresponding authors

This project was initiated on March 21, 2020, with the goal of helping aid the allocation of supplies to different hospitals in the U.S., in partnership with the non-profit Response4Life.

Our county-level 7-day predictive performance



Focusing on 6 of the worst-affected counties

*Based on 4/8 data



In partnership with



COVID-19 Data Repository and Severity Prediction

Yu Group

UC Berkeley Statistics, EECS, CCB



github.com/Yu-Group/covid19-severity-prediction

Website: covidseverity.com

Overwhelmed
equipment sho
Coronavirus pandemic plays
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SICK DOCTORS, NURSES AND NOT ENOUGH
EQUIPMENT: NYC HEALTH CARE WORKERS
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Goal: Help Aid Resource Allocation

Health officials warn US government does not have enough
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Coronavirus pandemic

ing medical supplies

forcing nurses
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with "no protection"

Perspective

Critical Supply

Protective Equipment during the Covid-19 Pandemic



Our team

from UC Berkeley Statistics/EECS and UCSF



N. Altieri



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C. Singh
(Student Lead)



Y. Tan

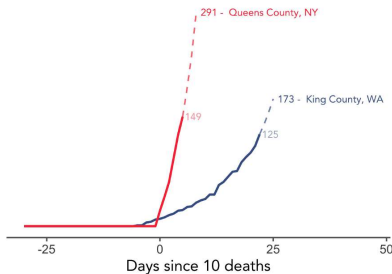
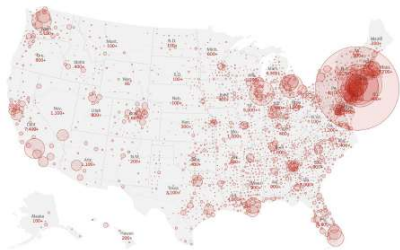


T. Tang



Y. Wang

Many others at UC Berkeley, UCSF, Stanford, Northeastern, Univ. of Chicago, UW-Madison, ...



Data Curation

- Hospital data
- County data



Modeling

- County-level 7-day severity prediction
- hospital demand prediction



Evaluation / Visualization

- Identify hotspots and risk factors via news articles
- Visualization
- Validate forecasts



Part I: Curating a COVID-19 Data Repository

Outline of Part I: Data Curation

- Our data processing pipeline
- Overview of the data
- Frequently overlooked aspects and challenges
- Some useful tools



Data Processing Pipeline

Data Scraping

- **Collect 1M records from 10+ data sources**
- **Monitor data changes 24/7 powered by AWS**

Data Cleaning

- **Handling missing and erratic entries**
- **Automated python script**

Data Validity

- **Compare data across different sources to ensure data validity**
- **Search for emerging data sources**

For almost a month, 2 full-time students, and on-going with 1 full-time student



Amazon EC2



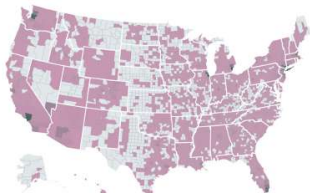
Data and code available: <https://github.com/Yu-Group/covid19-severity-prediction>

★ Being used by multiple research groups across the country

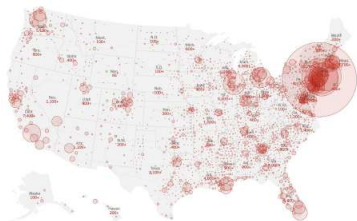
Data: scraped from a variety of sources

COVID-19 Cases/Deaths

USA FACTS



The New York Times



THE CENTER FOR SPATIAL DATA SCIENCE
THE UNIVERSITY OF CHICAGO

County-level Data

(Risk Factors, Demographics, Social Mobility)

CDC Centers for Disease Control and Prevention
CDC 24/7: Saving Lives, Protecting People™

Division for Heart Disease and Stroke Prevention



esri

COVID-19 GIS Hub



County Health Rankings & Roadmaps

Building a Culture of Health, County by County



GHDx



Introducing the Unicast
Social Distancing Scoreboard

USDSS UNITED STATES DIABETES SURVEILLANCE SYSTEM

Division of Diabetes Translation, CDC

JOHNS HOPKINS UNIVERSITY

CMS.gov
Centers for Medicare & Medicaid Services

United States®
Census
Bureau



STREETLIGHT

KHN
KAISER HEALTH NEWS



cuebiq

kinsa SAFE GRAPH

Hospital-level Data

(e.g., #ICU beds, staff)

HRSA
Health Resources & Services Administration

ArcGIS Hub



Samuel Scarpino



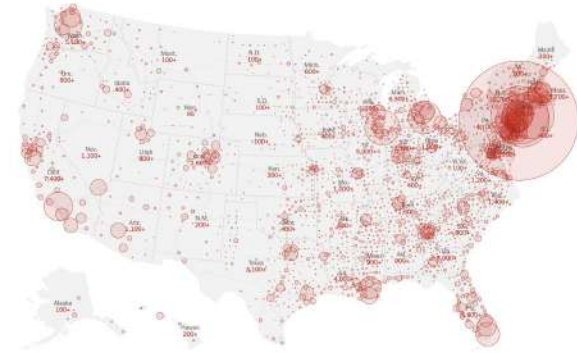
A bird's-eye view of the **hospital-level data**

- ~7000 hospitals in US
- ~200 features:
 - Geographical identifiers: address, lat/long, county
 - Type of facility (e.g., short term acute care, critical access)
 - Urban/rural
 - # total beds, # Med-Surg beds, # ICU beds
 - ICU Occupancy rate
 - #Employees, #RNs
 - Total discharges, average length of stay, average daily census
 - Hospital overall rating



A bird's-eye view of the **county-level data**

- COVID-19 cases and deaths (NYT and USAFacts)
- Demographics
 - Population, population density, age structure
- Health risk factors
 - Heart disease, stroke, respiratory disease, smoking, diabetes, overall mortality
- Socioeconomic risk factors
 - Social vulnerability index, unemployment, poverty, education, severe housing
- Social distancing and mobility
 - County-to-county work commute, change in distance traveled, government orders
- Other relevant data
 - Sample of flight itineraries in 2019, Kinsa temperature data, voting data



Our **data repository** can be found at the following link:

<https://github.com/Yu-Group/covid19-severity-prediction>

Now a little journey through cleaning the
USA Facts COVID-19 cases/deaths data...



No data left
behind!

A journey through cleaning the USAFacts COVID-19 cases/deaths data

Got the data from website



Some counties are duplicated.



Some cases/deaths cannot be allocated to a county.



Cumulative deaths counts sometimes decrease.

countyFIPS	County Nar	State	stateFIPS	1/22/2020	1/23/2020
0	Statewide	AL	1	0	0
1001	Autauga Cc	AL	1	0	0
1003	Baldwin Co	AL	1	0	0
1005	Barbour Co	AL	1	0	0
1007	Bibb Count	AL	1	0	0
1009	Blount Cou	AL	1	0	0
1011	Bullock Cou	AL	1	0	0
1013	Butler Cour	AL	1	0	0
1015	Calhoun Co	AL	1	0	0
1017	Chambers C	AL	1	0	0
1019	Cherokee C	AL	1	0	0
1021	Chilton Cou	AL	1	0	0
1023	Choctaw Cc	AL	1	0	0
1025	Clarke Cour	AL	1	0	0
1027	Clay County	AL	1	0	0
1029	Cleburne C	AL	1	0	0
1031	Coffee Cou	AL	1	0	0
1033	Colbert Cou	AL	1	0	0
1035	Conecuh Cc	AL	1	0	0
1037	Coosa Cour	AL	1	0	0
1039	Covington C	AL	1	0	0
1041	Crenshaw C	AL	1	0	0
1043	Cullman Co	AL	1	0	0
1045	Dale Count	AL	1	0	0
1047	Dallas Cour	AL	1	0	0
1049	DeKalb Cou	AL	1	0	0
1051	Elmore Cou	AL	1	0	0

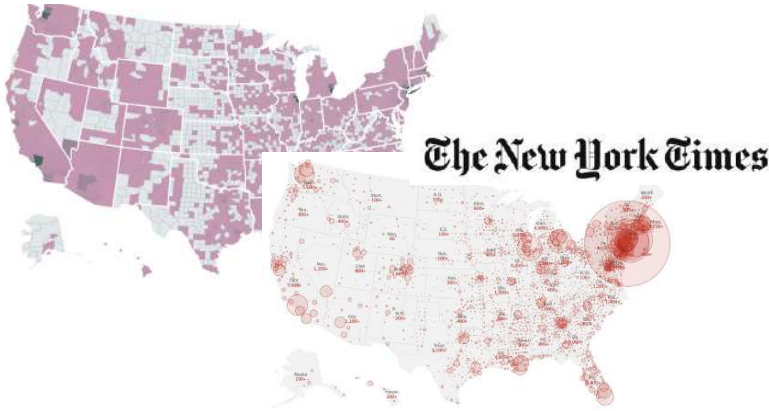
Are we done? 🤔

A journey through cleaning the USAFacts COVID-19 cases/deaths data

Things got interesting when multiple data sources are available.



USAFACTS

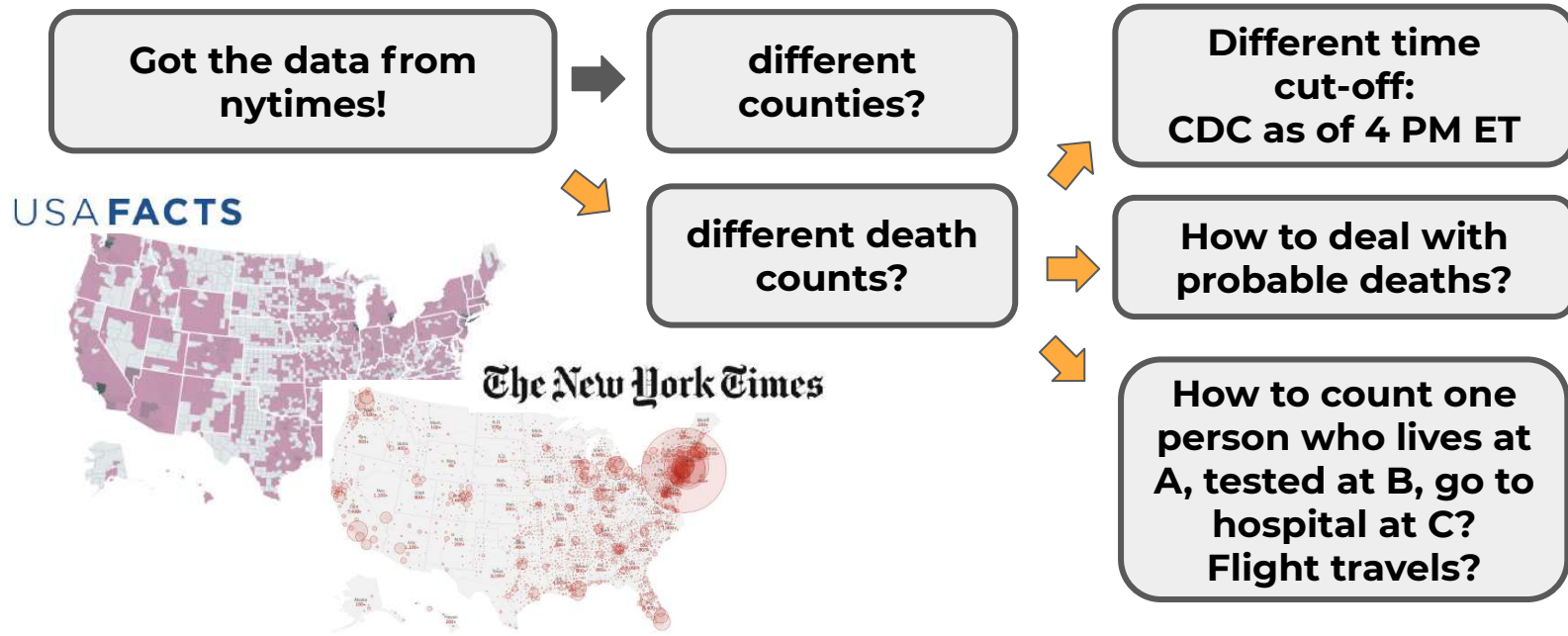


Some counties changed their countyFIPS code.

NYTimes aggregated some counties together.

A journey through cleaning the USAFacts COVID-19 cases/deaths data

Things got interesting when multiple data sources are available.



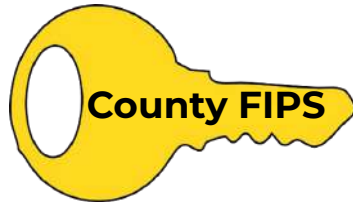
Multiple data sources give us insights into the caveats of the data.

Additional challenges in data cleaning



- What is a “primary key”?
 - Use primary key to merge different sources of data together.
 - Ideally, key should be stable over time and no duplicates.

For county-level data



County FIPS can change over time (though this is rare)

For hospital-level data



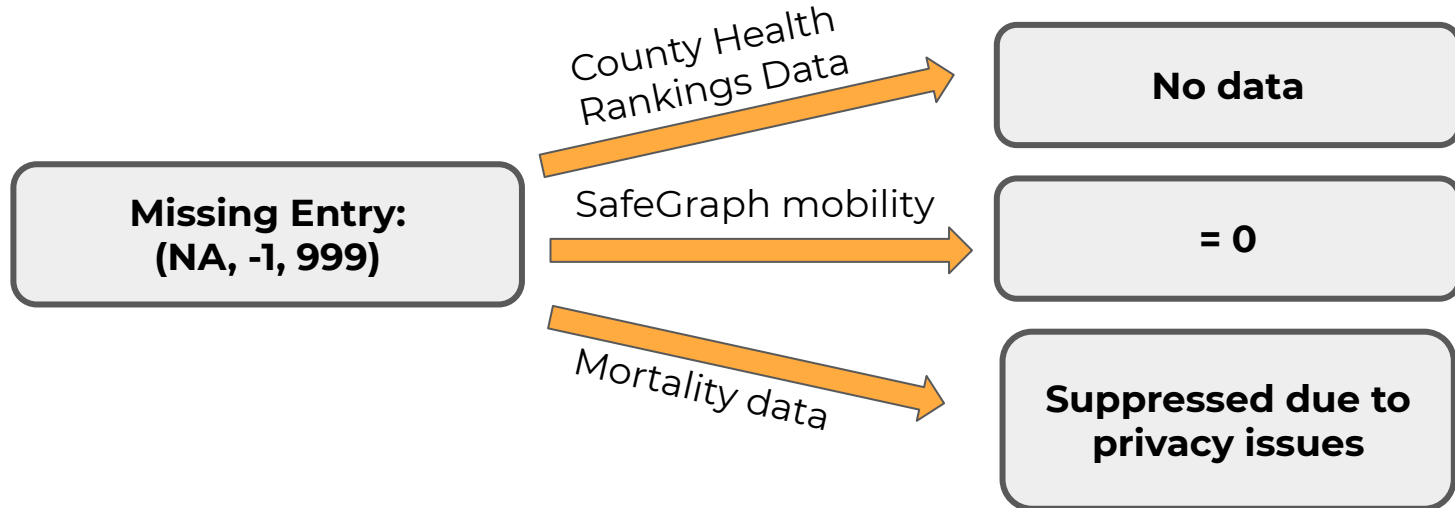
Not all the hospitals have this number (e.g., Indian reservation hospitals)

For commute and county adjacency data



Additional challenges in data cleaning

- Missing data entries
 - Encoded as NAs, -1, 999, and more...
 - Meaning can depend on the data set



Frequently overlooked questions

- Who is the audience or end user?
 - How to present the data to make it easily accessible by our modeling team, visualization team, and other researchers in the broader community
 - Clear documentation
 - Abridged version and unabridged version of the county-level data



Frequently overlooked questions

- Who is the audience or end user?
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readme.md

Interactive Atlas of Heart Disease and Stroke - All Strokes (2014-2016)

- **Data source:** <https://www.cdc.gov/dhdsp/maps/atlas/index.htm>
- **Last downloaded:** 04/02/2020
- **Data description:** county-level estimates of mortality rates per 100,000 (all ages, all races/ethnicities, both genders, 2014-2016) from all strokes (ICD10 codes: I60-I69)
- **Known data quality issues:** Data values within the table of "-1" or "-9999" indicate "Insufficient Data."
- **Short list of data columns:**
 - **countyFIPS:** county FIPS
 - **StrokeMortality:** estimate of mortality rate per 100,000 (all ages, all races/ethnicities, both genders, 2014-2016) from all strokes (ICD10 codes: I60-I69)
- **Notes:**
 - Data downloaded from the Interactive Atlas of Heart Disease and Stroke, a website developed by the Centers for Disease Control and Prevention, Division for Heart Disease and Stroke Prevention. <http://nccd.cdc.gov/DHDSPAtlas>.

271 lines (250 sloc) 33 KB

List of columns - county level

Identifying variables

Data variable	Description	Source data set
countyFIPS	state-county FIPS Code	county_fips
STATEFP	state FIPS Code	county_popcenters
COUNTYFP	county FIPS Code	county_popcenters
CountyName	county name	county_fips
StateName	state abbreviation	county_fips
State	state name	county_latlong

Data variables

Geographical identifiers

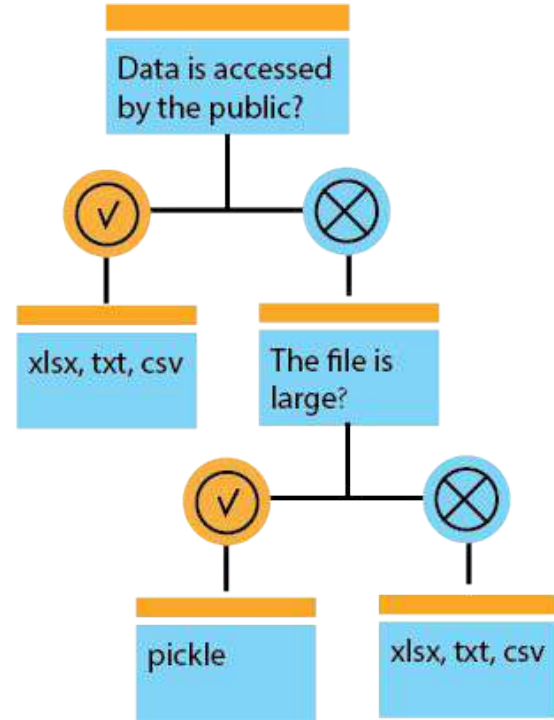
Frequently overlooked questions

- What are the naming conventions and organization structure for data storage and preprocessing?
 - Improves accessibility for end users
 - Necessary to quickly integrate new members and volunteers
 - Best to set standards at the beginning
 - But this is very challenging because:
 - A good convention depends on the data we collect but we don't know what data will be there.
 - Some data sets might change over time



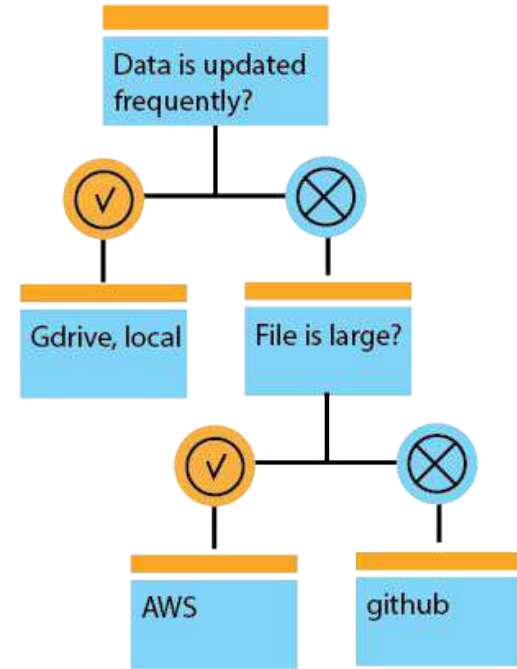
Frequently overlooked questions

- Which file format?
 - txt, csv, pickle, xlsx
 - compressed versions



Frequently overlooked questions

- Which file format?
 - txt, csv, pickle, xlsx
 - compressed versions
- How to store the data?
 - Locally
 - GitHub
 - AWS
 - Google drive



The data team is at its best when working closely alongside everyone on the team

- In particular, modeling team depends on data team AND data team depends on modeling team
 - Determine what are relevant data sets
 - Iterative process between two teams to figure out how to clean the data

Overview of some useful tools

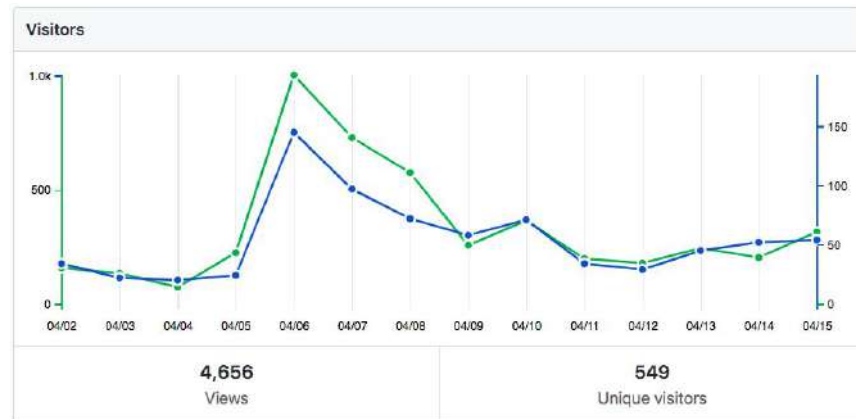
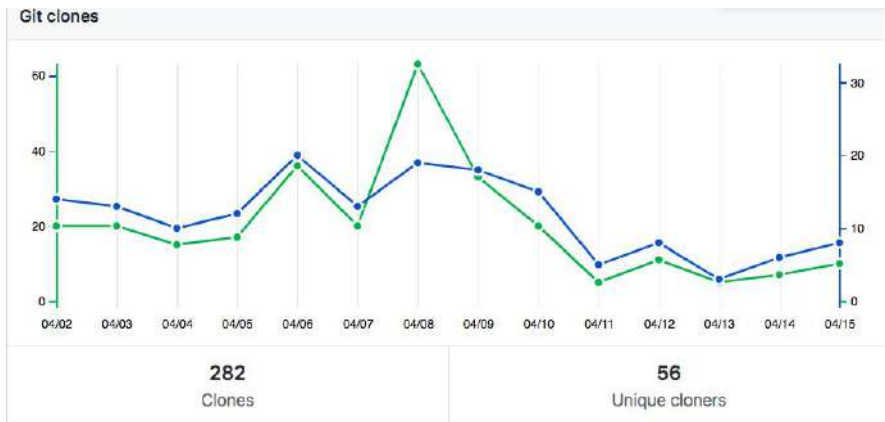
- Git commands: pull, push, merge conflicts
- Linux commands
 - shell commands
 - wget
 - Can easily download data from online source (including google drive)
 - cron jobs
 - To automatically update data, predictions, and visualizations daily
- AWS package
 - S3 buckets
- Google cloud package (update google sheet)



Summary: Data and code

Data repository:

<https://github.com/Yu-Group/covid19-severity-prediction>



Summary: Paper

Paper available:

Curating a COVID-19 data repository and forecasting county-level death counts in the United States

Nick Altieri^{1, †}, Rebecca Barter¹, James Duncan⁶, Raaz Dwivedi², Karl Kumbier³,
Xiao Li¹, Robert Netzorg², Briton Park¹, Chandan Singh^{*2}, Yan Shuo Tan¹,
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April 29, 2020

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In partnership with



COVID-19 Data Repository and Severity Prediction

Yu Group

UC Berkeley Statistics, EECS, CCB



github.com/Yu-Group/covid19-severity-prediction

Website: covidseverity.com

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B. Park



C. Singh
(Student Lead)



Y. Tan



T. Tang



Y. Wang

Many others at UC Berkeley, UCSF, Stanford, Northeastern, Univ. of Chicago, UW-Madison, ...

Impact

500k face shields in US by mid-may

- Santa Clara + Temple University Med
- in collaboration with GetUsPPE, AeroBridge, Maker Nexus, Synergy Mill maker space, R4L
- +65k to 25 recipients in 15 states in 2 weeks
- many more expected

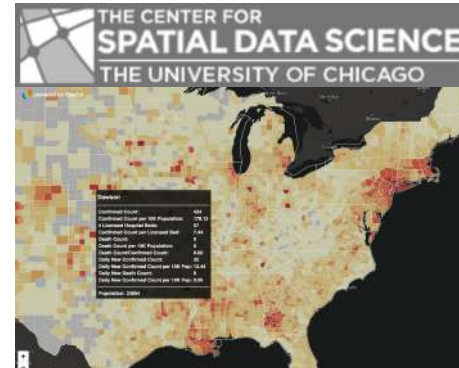
Salesforce system

Recipient Name	State	Count 1	Count 2	Count 3	Count 4	Count 5	Count 6	Count 7	Count 8	Count 9	Count 10
1. SPH Medical Group - South Alameda Medical Center	CA	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
2. SPH Medical Group - San Francisco Medical Center	CA	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
3. ESI Medical Group - Kaiser Medical Center	MS	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
4. Valley Medical Group - Wright Patterson Air Force Base Medical Center	OH	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
5. A.D. Fox Hospital	NY	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
6. Allegheny Area Medical Center	SC	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
7. United Northwestern Hospital	WA	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
8. Wellstar Good Samaritan Medical Center	TX	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
9. Allentown - Lehigh Valley Hospital	PA	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
10. Hennepin Hospital - Jefferson South	MI	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
11. Phoenix Jewish Memorial Hospital	IL	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
12. Alameda Anatomical Hospital	IN	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
13. Hennepin County Hospital	AZ	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
14. Alameda Central Campus	AR	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
15. Hennepin Central Campus	AZ	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
16. Hennepin Southeast Campus	AR	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
17. Hennepin Southwest Campus	AZ	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
18. Hennepin West Campus	AR	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
19. Hennepin West Campus	AZ	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
20. Hennepin West Campus	TX	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
21. Alameda Hospital System	OH	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
22. Alameda Hospital System	MI	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000

Data Repository and Code Base

Data variable	Description	Source data set
countyFIPS	state-county FIPS Code	county_fips
STATEFP	state FIPS Code	county_popcenters
COUNTYFP	county FIPS Code	county_popcenters
CountyName	county name	county_fips
StateName	state abbreviation	county_fips
State	state name	county_latlong

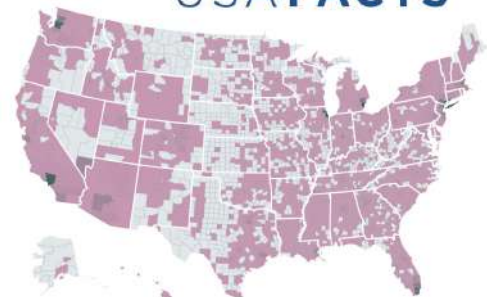
Visualizations



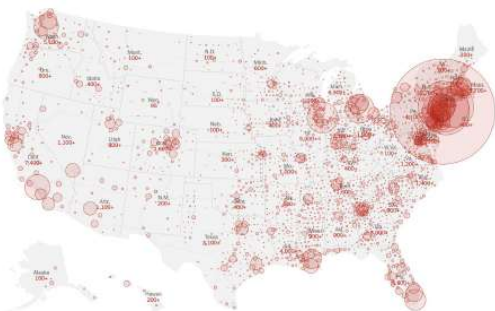
Last Week: Curating a COVID-19 Data Repository

Covid 19 Cases/Deaths

USA FACTS



The New York Times



Risk Factors, Demographics, County-level Data

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CDC 24/7: Saving Lives, Protecting People™

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GHDx



Introducing the Unacast

Social Distancing Scoreboard

United States®
Census
Bureau

CMS.gov

Centers for Medicare & Medicaid Services

kinsa®

KHN
KAISER HEALTH NEWS

Hospital-level Data

(e.g., #ICU beds, staff)

HRSA
Health Resources & Services Administration



ArcGIS Hub



Samuel Scarpino



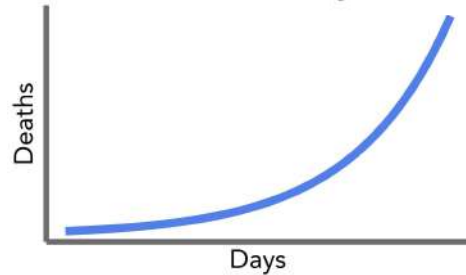
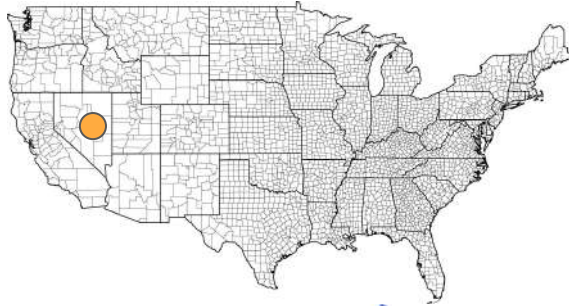
This Week:
Forecasting death
counts

Ensemble different predictors

We combined many different prediction approaches

Ensemble predictors

1. Separate-county exponential model^[1]

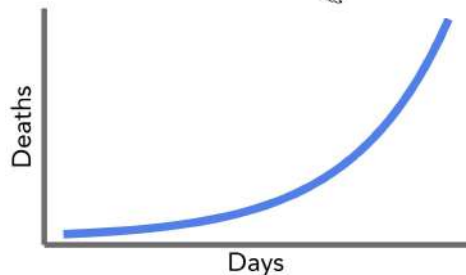


[1] Anderson, Roy M., B. Anderson, and Robert M. May. *Infectious diseases of humans: dynamics and control*. Oxford university press, 1992.

Ensemble predictors

We combined many different model approaches

1. Separate-county **exponential** model^[1]



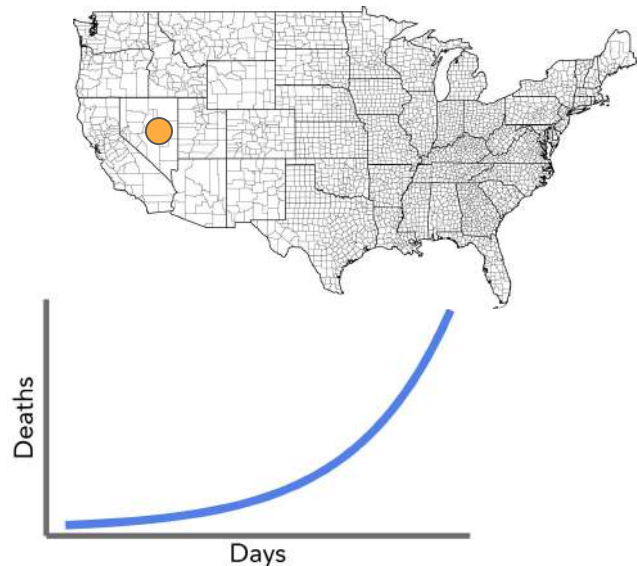
$$E(\text{deaths}_t \mid t) = e^{\beta_0 + \beta_1 t}$$

[1] Anderson, Roy M., B. Anderson, and Robert M. May. *Infectious diseases of humans: dynamics and control*. Oxford university press, 1992.

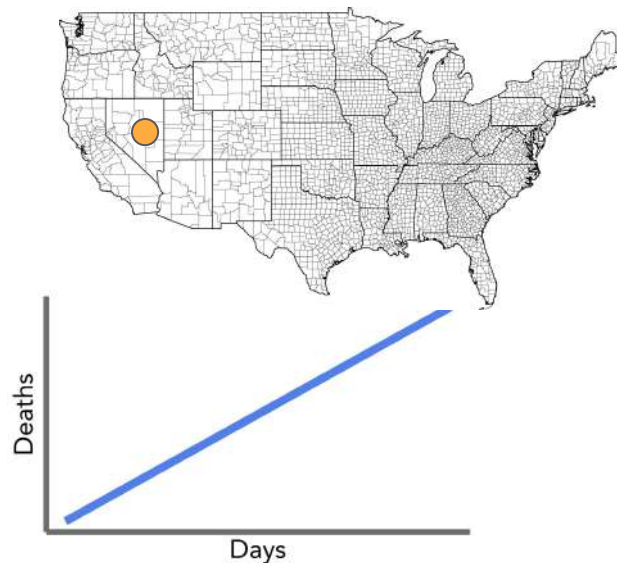
Ensemble predictors

We combined many different model approaches

1. Separate-county **exponential** model^[1]



2. Separate-county **linear** model

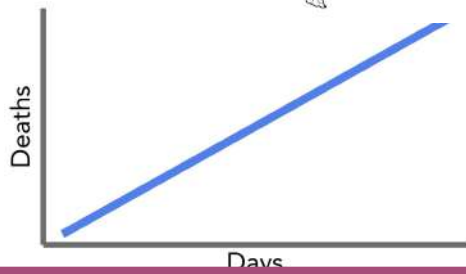
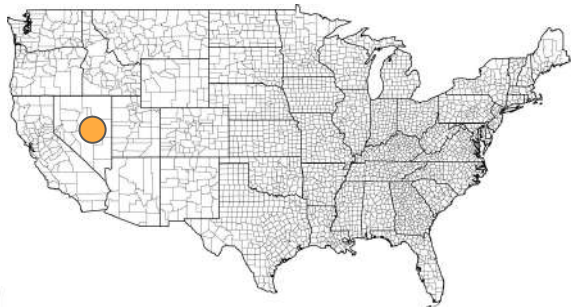


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Ensemble predictors

We combined many different model approaches

2. Separate-county
linear model

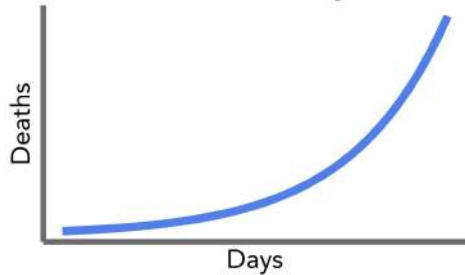
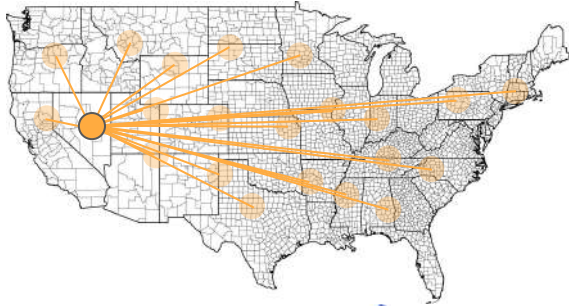


$$E[\text{deaths}_t | t] = \beta_0 + \beta_1 t$$

Ensemble predictors

We combined many different prediction approaches

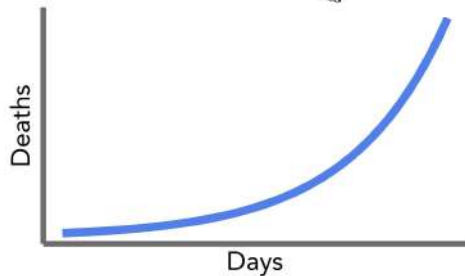
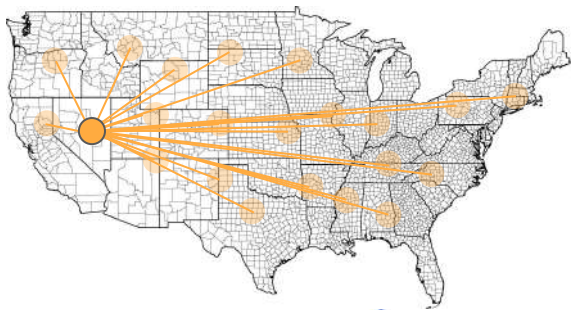
3. Shared-county exponential model



Ensemble predictors

We combined many different prediction approaches

3. Shared-county exponential model

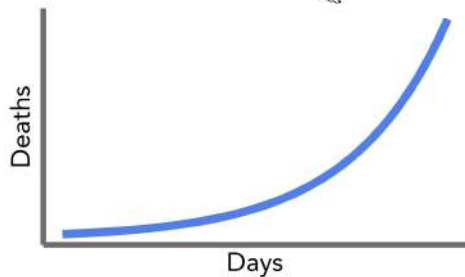
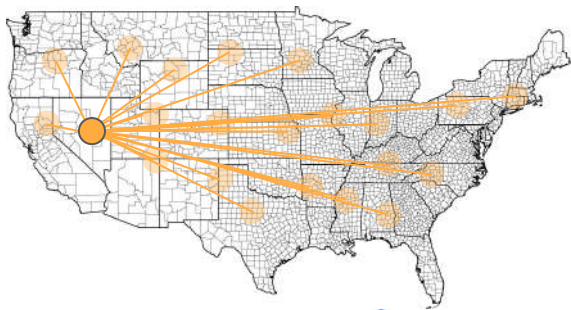


$$\begin{aligned} E(\text{deaths}_t \mid t) \\ = e^{\beta_0 + \beta_1 \log(\text{deaths}_{t-1} + 1)} \end{aligned}$$

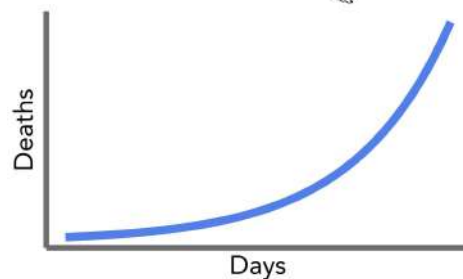
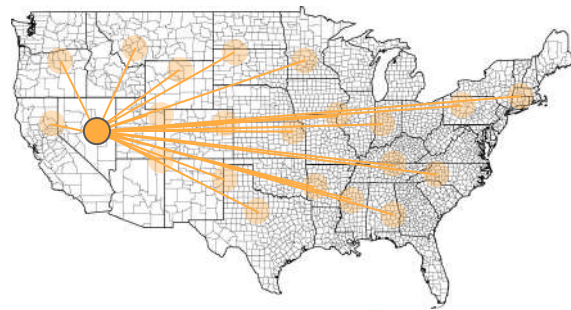
Ensemble predictors

We combined many different prediction approaches

3. Shared-county exponential model



4. Shared-county exponential + demographics model

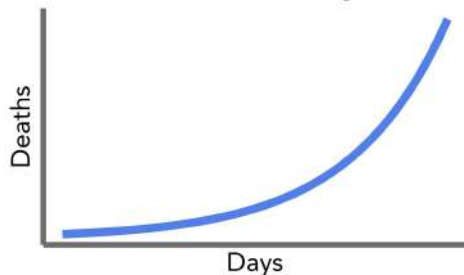
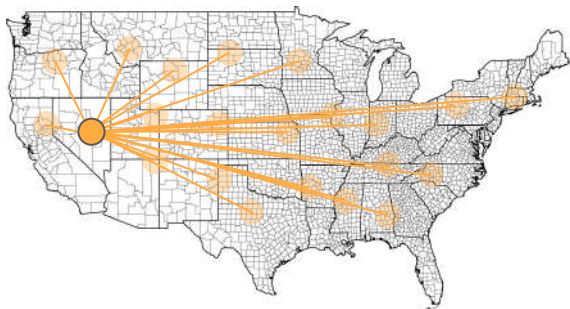


- + Age
- + ICU Beds
- + # Hospitals
- +

Ensemble predictors

We combined many different prediction approaches

4. Shared-county exponential + demographics model



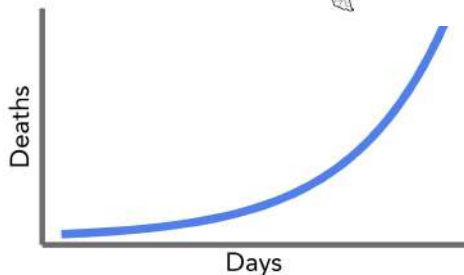
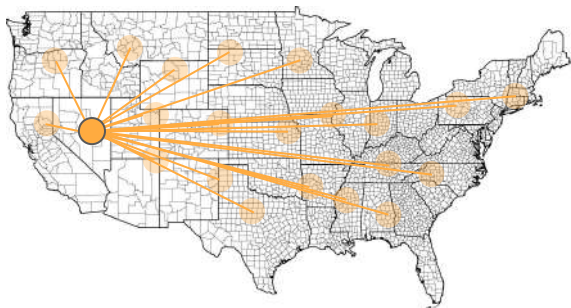
- + Age
- + ICU Beds
- + # Hospitals
- +

- County density and size
- County healthcare resources
- Demographic information

Ensemble predictors

We combined many different prediction approaches

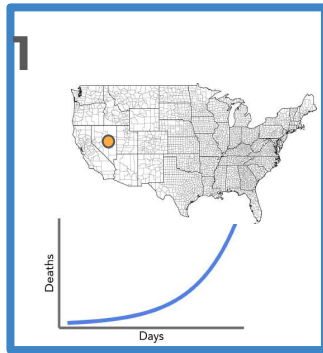
5. Expanded Shared-county exponential model



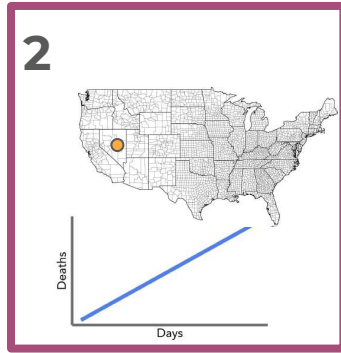
- + Cases
- + Neighboring cases
- + Neighboring deaths

- $\log(\text{Cases})$
- $\log(\text{Cases in Neighboring counties})$
- $\log(\text{Deaths in neighboring counties})$

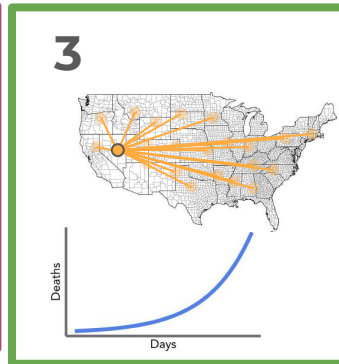
Combined Linear and Exponential Predictors (CLEP)



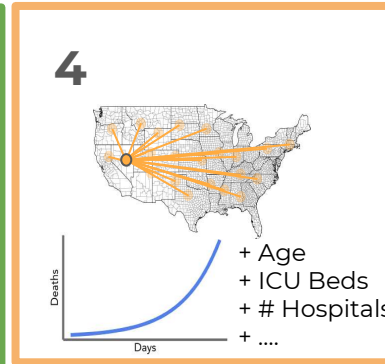
Separate-county exponential predictor



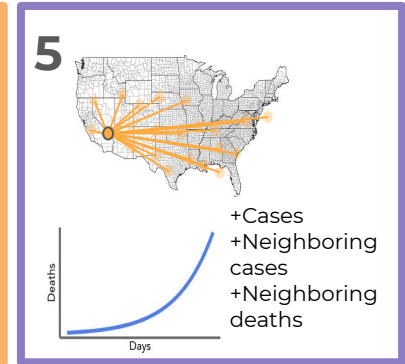
Separate-county linear predictor



Shared-county exponential predictor



Shared-county exponential predictor + demographics



Expanded Shared-county exponential predictor

Calculate a **weighted average of the predictions**: higher weight to the models with better historical performance^[2]

[2]. Schuller, Gerald DT, et al. "Perceptual audio coding using adaptive pre-and post-filters and lossless compression." *IEEE Transactions on Speech and Audio Processing* 10.6 (2002): 379-390.

Combined Linear and Exponential Predictors (CLEP)

Calculate a **weighted average of the predictions**: higher weight to the models with better historical performance^[2]

$$w_t^m \propto \exp \left(-c \sum_{i=t_0}^{t-1} \ell(\hat{y}_i^m, y_i) \right)$$

[2]. Schuller, Gerald DT, et al. "Perceptual audio coding using adaptive pre-and post-filters and lossless compression." *IEEE Transactions on Speech and Audio Processing* 10.6 (2002): 379-390.

Combined Linear and Exponential Predictors (CLEP)

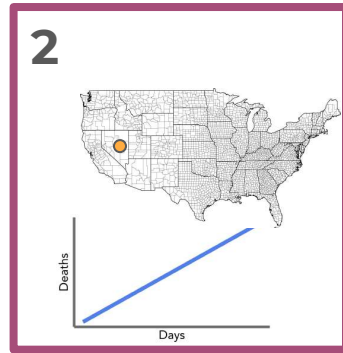
Calculate a **weighted average of the predictions**: higher weight to the models with better historical performance^[2]

$$w_t^m \propto \exp \left(-c(1 - \mu) \sum_{i=t_0}^{t-1} \mu^{t-i} \ell(\hat{y}_i^m, y_i) \right)$$

[2]. Schuller, Gerald DT, et al. "Perceptual audio coding using adaptive pre-and post-filters and lossless compression." *IEEE Transactions on Speech and Audio Processing* 10.6 (2002): 379-390.

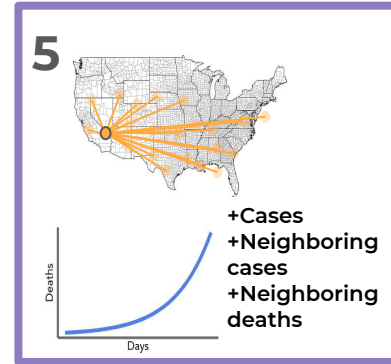
Combined Linear and Exponential Predictors (CLEP)

A smaller combination performed better in practice:



Separate-county
linear predictor

+



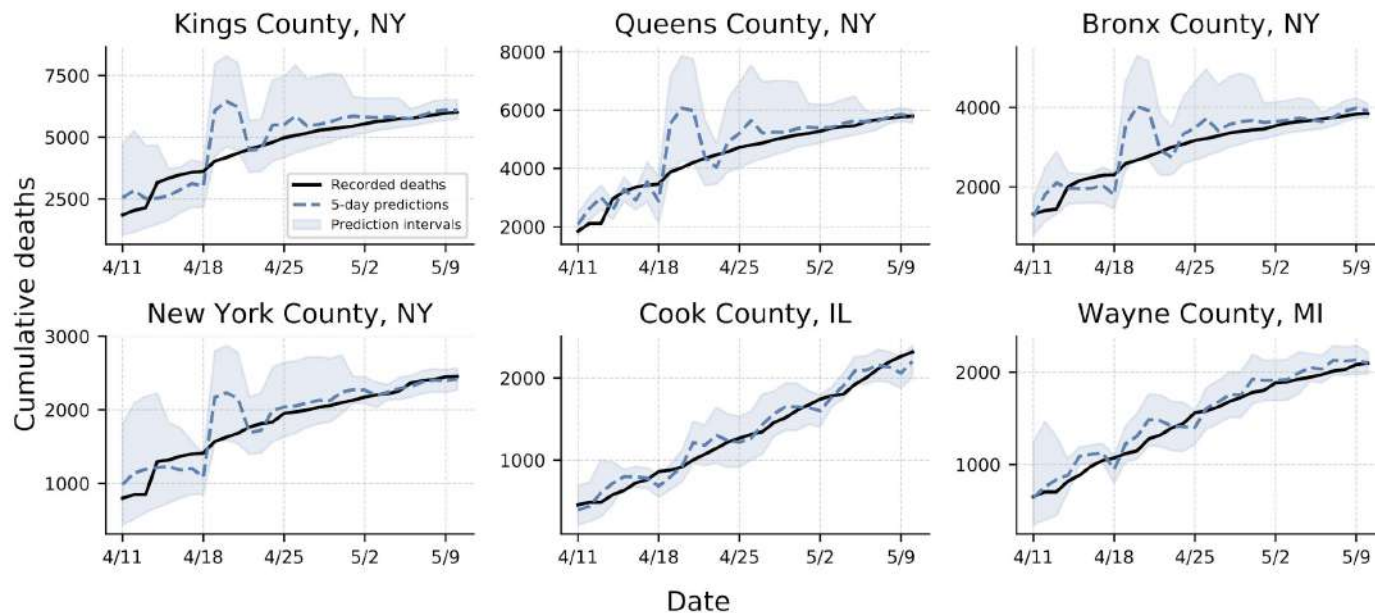
Expanded
Shared-county
exponential predictor

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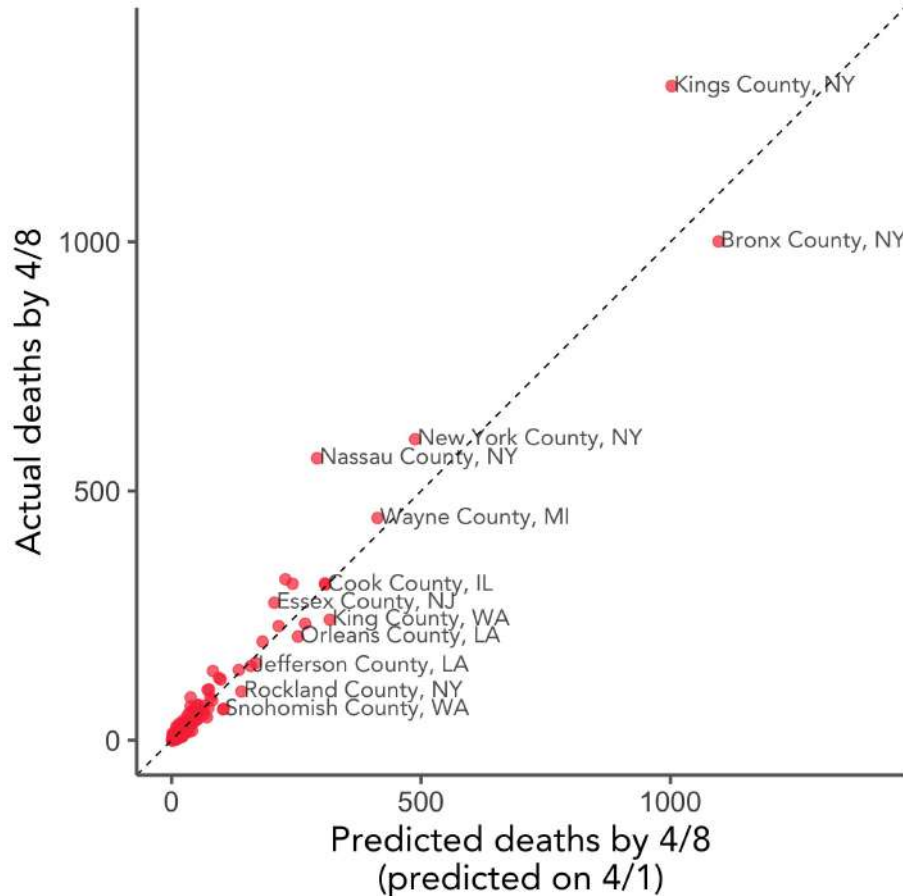
Our county-level 7-day predictive performance

Focusing on 6 of the worst-affected counties



*Based on 4/8 data

Our county-level 7-day predictive performance



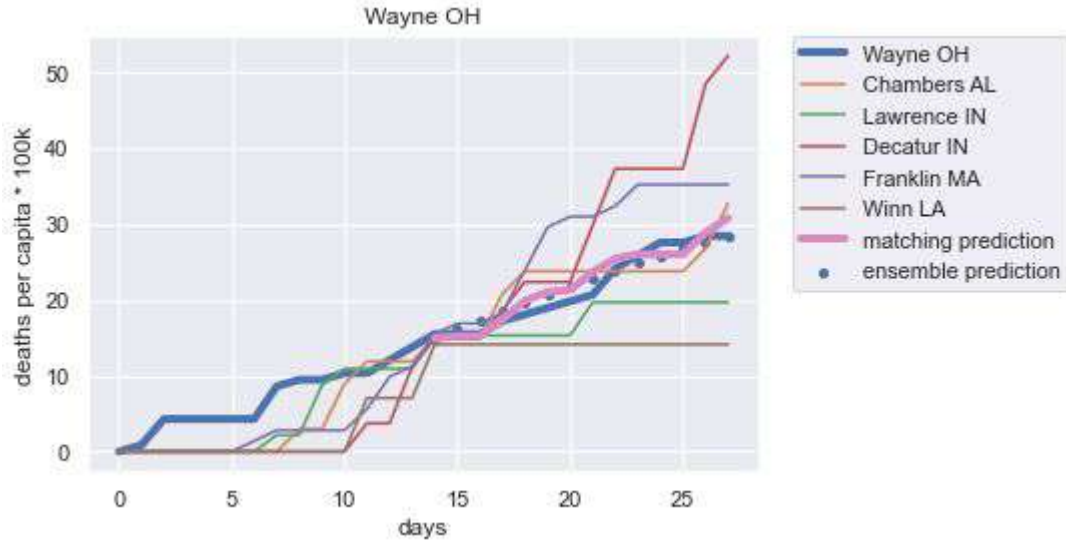
Takeaway:
The 7-day forecasted
predictions are fairly accurate

"Actual deaths" : recorded deaths by a given day

Ongoing Work:

County Matching

Matching Counties:

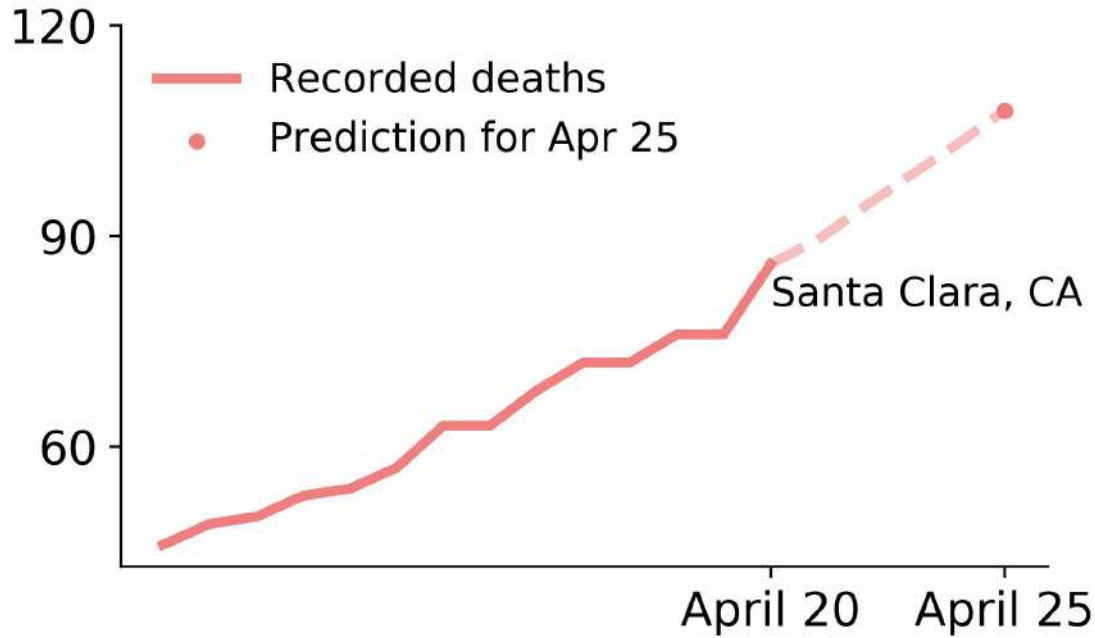


Find similar counties and use these to predict trajectory

Prediction Intervals:

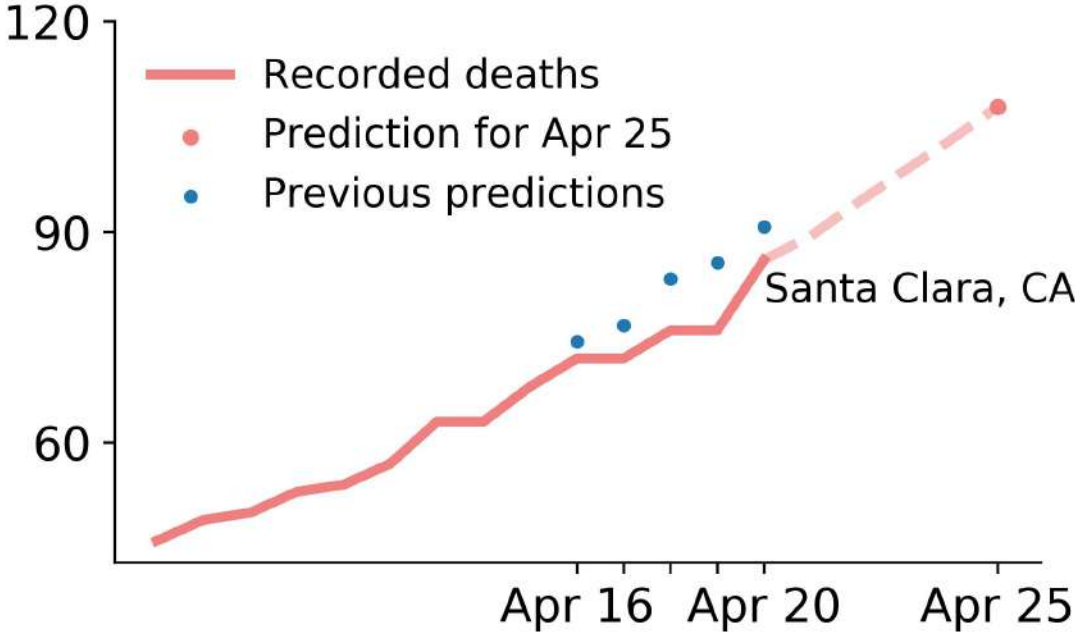
How confident should we be about our predictions?

Prediction Intervals:



How confident are we with the prediction for April 25?

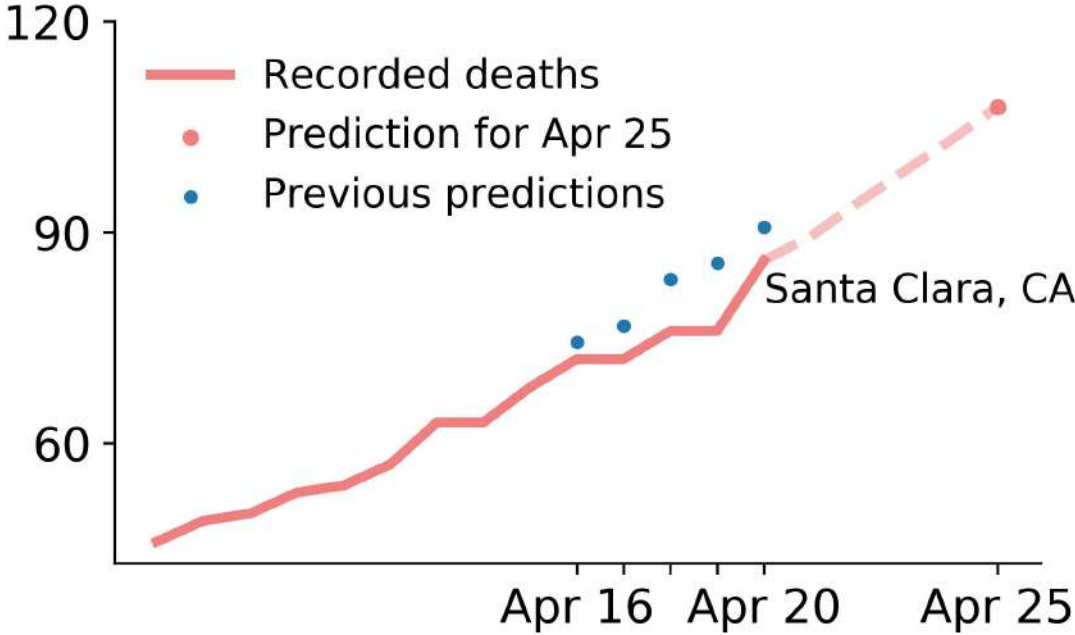
Prediction Intervals:



How confident are we with this prediction for April 25?

Use **past experience** to determine confidence in new predictions.

Prediction Intervals:

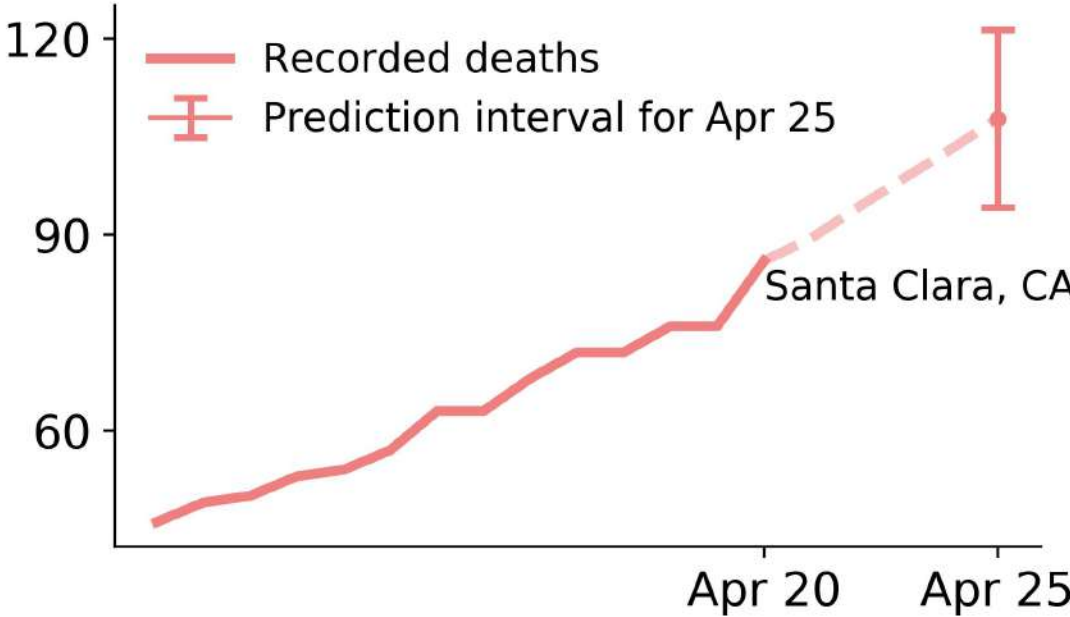


Previous 5-day-ahead prediction errors (%)

Apr 16	3.3%
Apr 17	6.5%
Apr 18	9.6%
Apr 19	12.6%
Apr 20	5.5%
Apr 25	?

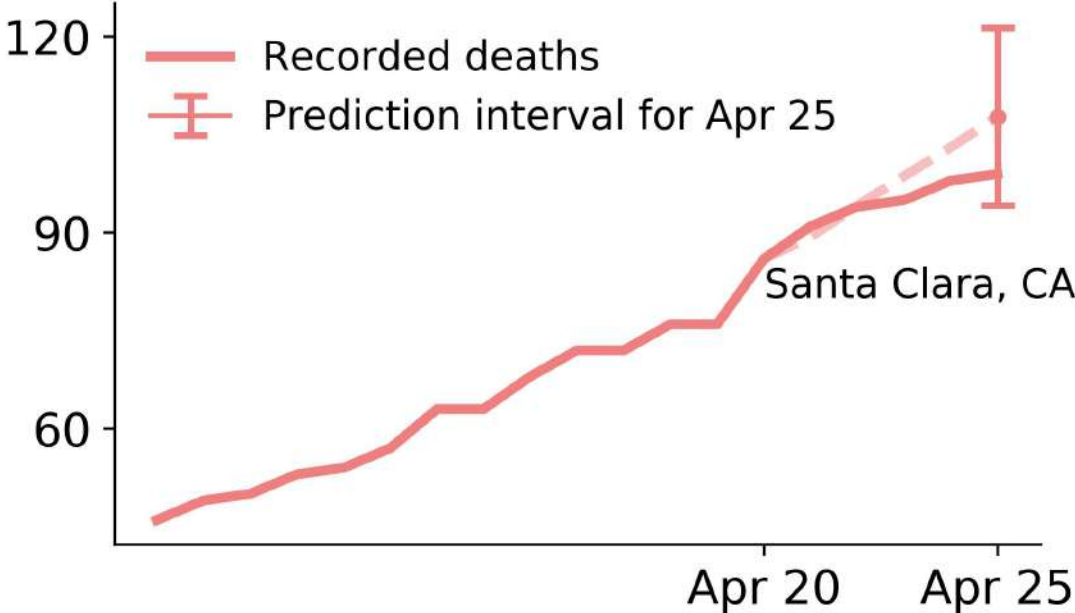
Take the max

Prediction Intervals:



Predicted range of error
Apr 25 **[-12.6%, 12.6%]**

Prediction Intervals:



Predicted range of error
Apr 25 **[-12.6%, 12.6%]**

Actual error:
Apr 25 **8.8%**

Maximum (absolute) error prediction intervals (MEPI)

Step 1

Find normalized error of our predictor in the past.

$$\Delta_{\tau} := |y_{\tau} - \hat{y}_{\tau}| / |\hat{y}_{\tau}|.$$

Step 2

Find maximum error of past 5 days.

$$\Delta_{\max} := \max_{0 \leq j \leq 4} \Delta_{t-j}.$$

Step 3

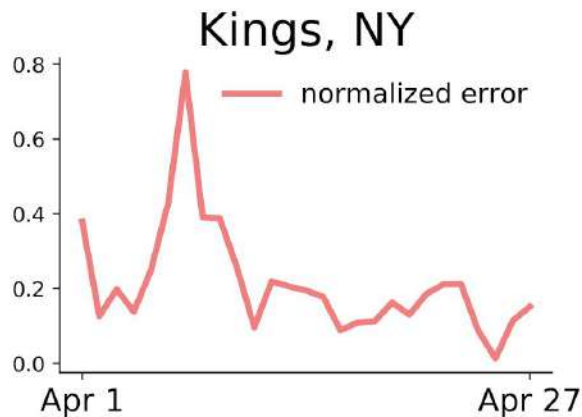
$$\widehat{\text{PI}}_{t+k} := [\max \{ \hat{y}_{t+k}(1 - \Delta_{\max}), y_t \}, \hat{y}_{t+k}(1 + \Delta_{\max})]$$

Can be applied to any ML model!

Connection to conformal inference^{[1], [2]}

General conformal inference recipe: **95% percentile of all past errors**

MEPI: **max of past 5 errors**



[1] G. Shafer and V. Vovk. A tutorial on conformal prediction. *Journal of Machine Learning Research*, 9(Mar):371–421, 2008.

[2] V. Vovk, A. Gammerman, and G. Shafer. *Algorithmic learning in a random world*. Springer Science & Business Media, 2005

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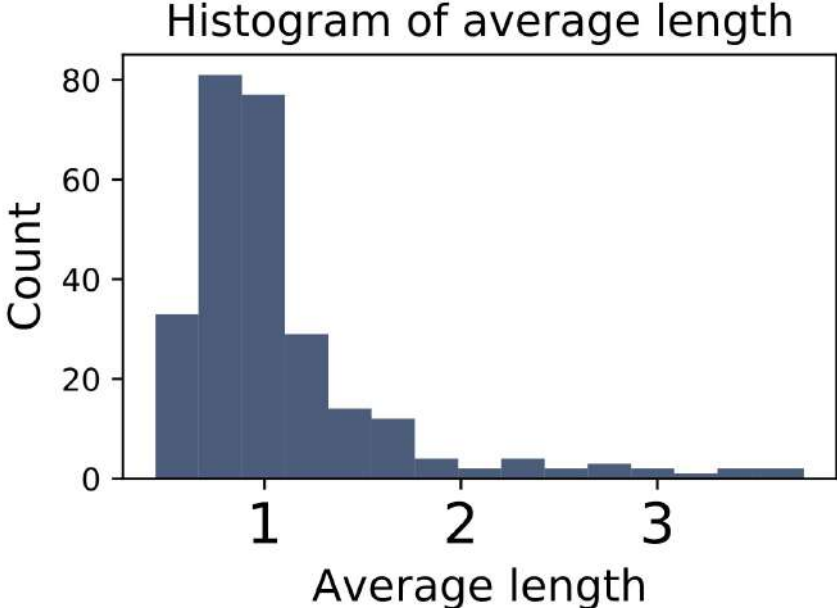
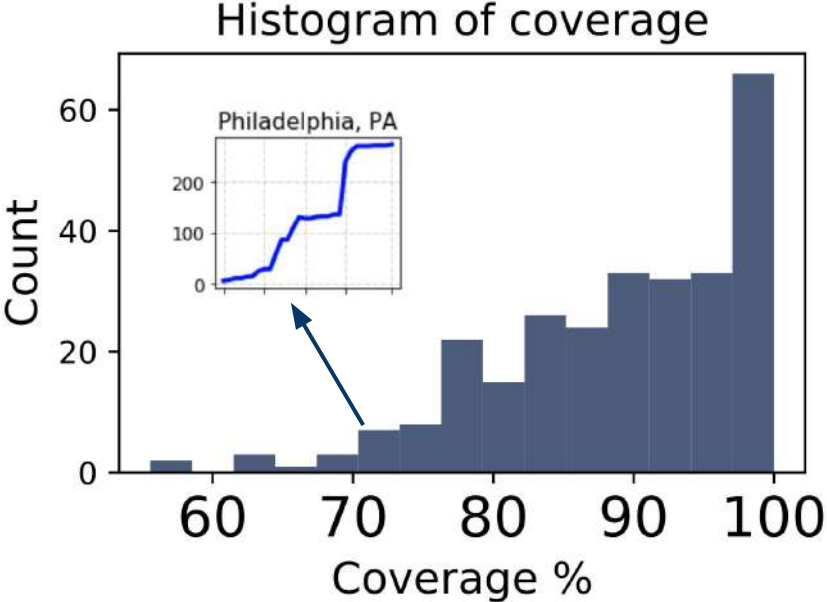
If the errors $\{\Delta_{t+k}, \Delta_t, \Delta_{t-1}, \Delta_{t-2}, \Delta_{t-3}, \Delta_{t-4}\}$ are **exchangeable**, then

$$\mathbb{P}\left(y_{t+k} \in \widehat{\text{PI}}_{t+k}\right) = \mathbb{P}(\Delta_{t+k} < \Delta_{\max}) = 1 - \mathbb{P}(\Delta_{t+k} = \Delta_{\max}) = \frac{5}{6} \approx 0.83.$$

[1] G. Shafer and V. Vovk. A tutorial on conformal prediction. Journal of Machine Learning Research, 9(Mar):371–421, 2008.

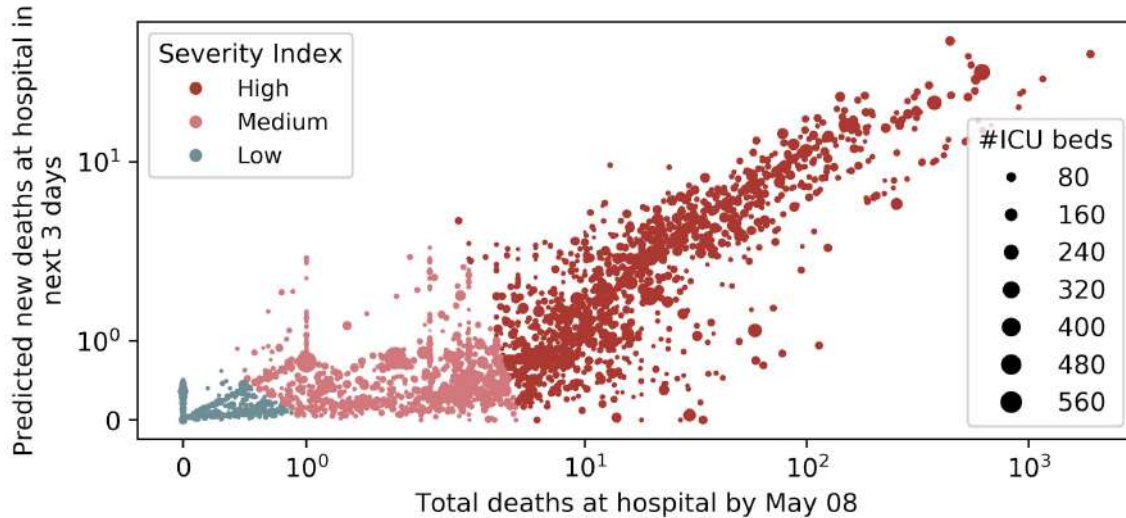
[2] V. Vovk, A. Gammerman, and G. Shafer. Algorithmic learning in a random world. Springer Science & Business Media, 2005

Empirical performance of MEPI



Evaluation period: March 28--April 27. Only include days since the county has 10 deaths. Having a normalized length of 0.8 means the PI is roughly $(0.6 \hat{y}_{t+k}, 1.4 \hat{y}_{t+k})$.

Severity Index



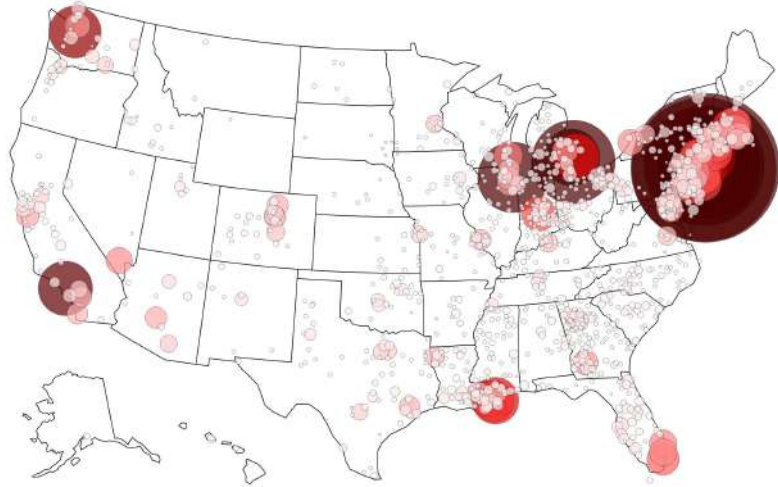
A score* for each hospital based on:

1. Predicted cumulative deaths
2. Predicted daily deaths

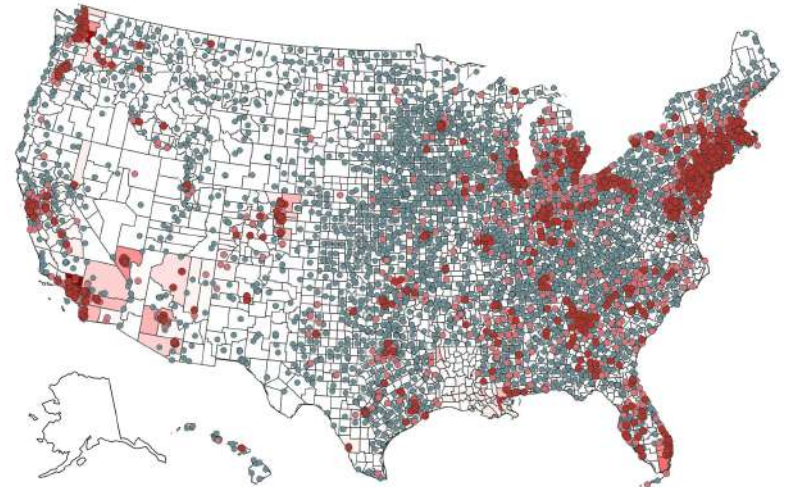
* county level predicted deaths are distributed to hospitals proportional to #employees

(Interactive) map visualizations

County-level predicted cumulative # of deaths*



Hospital severity index*



*Maps for 04/15

Paper available at tinyurl.com/yugroup-covid19

Curating a COVID-19 data repository and forecasting county-level death counts in the United States

Nick Altieri^{1, †}, Rebecca Barter¹, James Duncan⁶, Raaz Dwivedi², Karl Kumbier³,
Xiao Li¹, Robert Netzorg², Briton Park¹, Chandan Singh^{*2}, Yan Shuo Tan¹,
Tiffany Tang¹, Yu Wang¹, Bin Yu^{*1, 2, 4, 5, 6}

¹Department of Statistics, University of California, Berkeley

²Department of EECS, University of California, Berkeley

³Department of Pharmaceutical Chemistry, University of California, San Francisco

⁴Chan Zuckerberg Biohub, San Francisco

⁵Center for Computational Biology, University of California, Berkeley

⁶Division of Biostatistics, University of California, Berkeley

April 29, 2020

†Authors ordered alphabetically. All authors contributed significantly to this work.

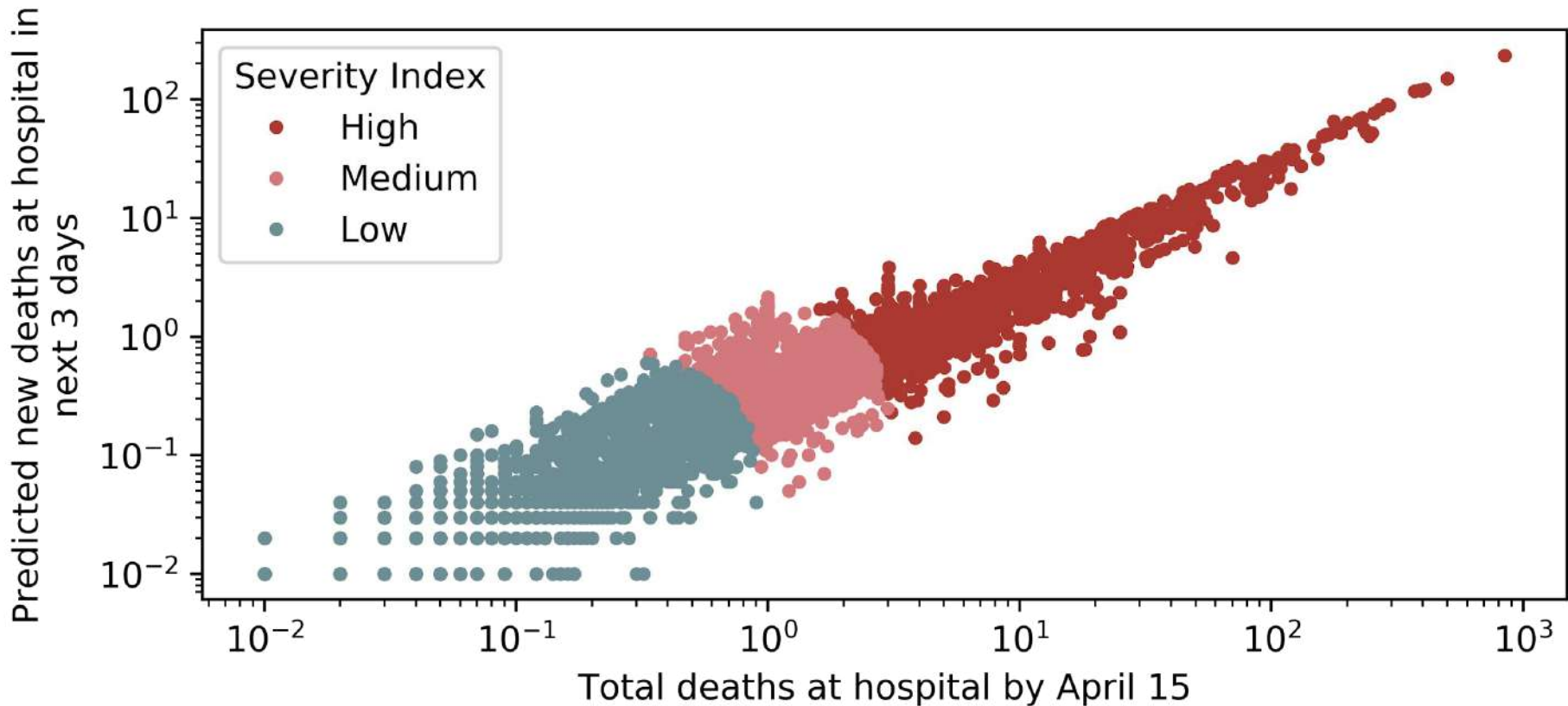
*Corresponding authors

This project was initiated on March 21, 2020, with the goal of helping aid the allocation of supplies to different hospitals in the U.S., in partnership with the non-profit Response4Life.

Thank you!

Misc

Assign severity index to hospital based on predicted cumulative deaths



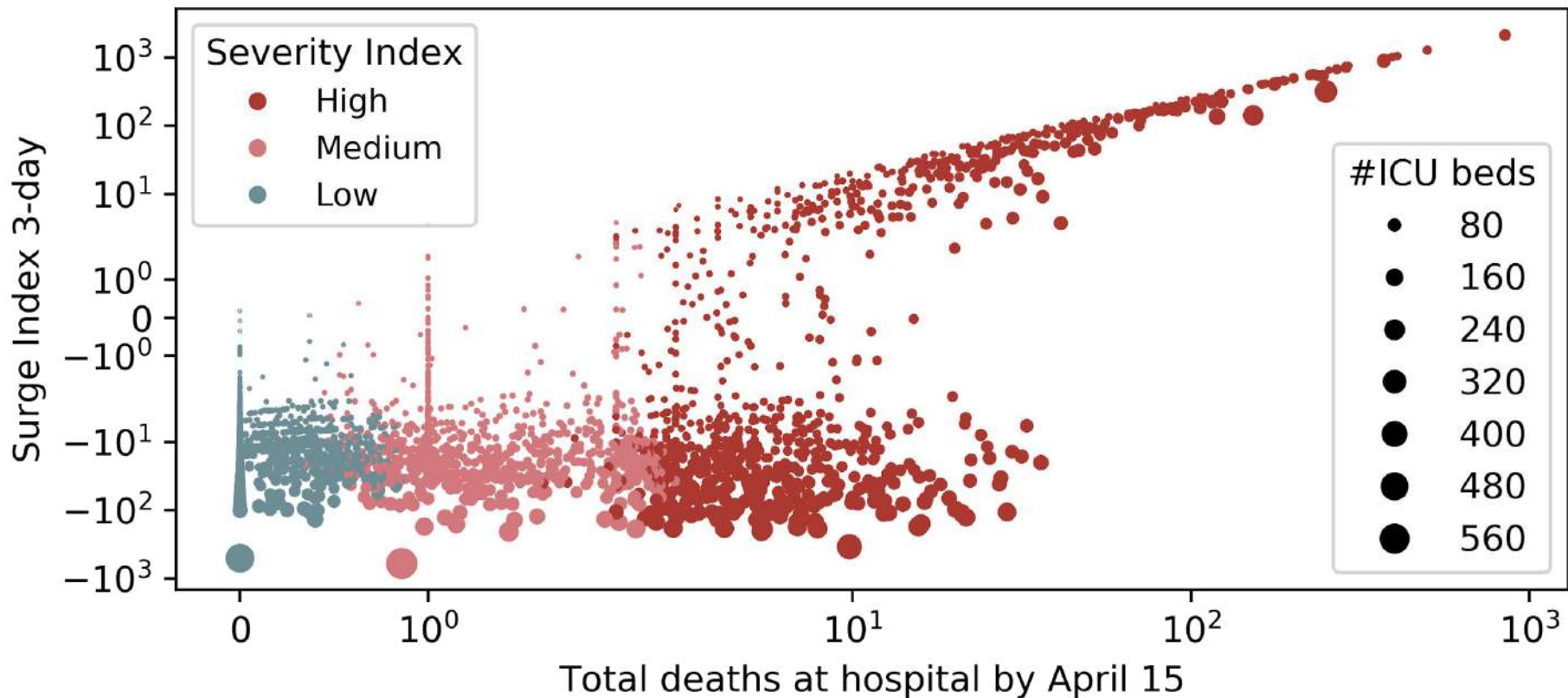
Surge Index

A score for each hospital based on:

(Estimated # ICU beds needed*) - (# ICU beds available)

*2x predicted cumulative number of deaths

Assign surge index based on #ICU beds



Volunteer Team: Local News and Emerging Hotspots



Hospital	Severity	Deaths as of April 10
Beaumont Health (Ohio County) Michigan	3	328

10-12 volunteers find local news and gather hard to find on-the-ground data

Compare collected data against predicted severity

Other works -- at state or country level

Curve fitting epi. Modeling (e.g. IHME -- dominant in the US)

Compartment epi. modeling (e.g. ICL -- dominant in UK and Europe)

Both have parameters that are tuned based on data mostly from other countries

No comparisons yet on prediction with US data ...

Current & Future Directions

Continue to update predictors

Look at long-term trajectories

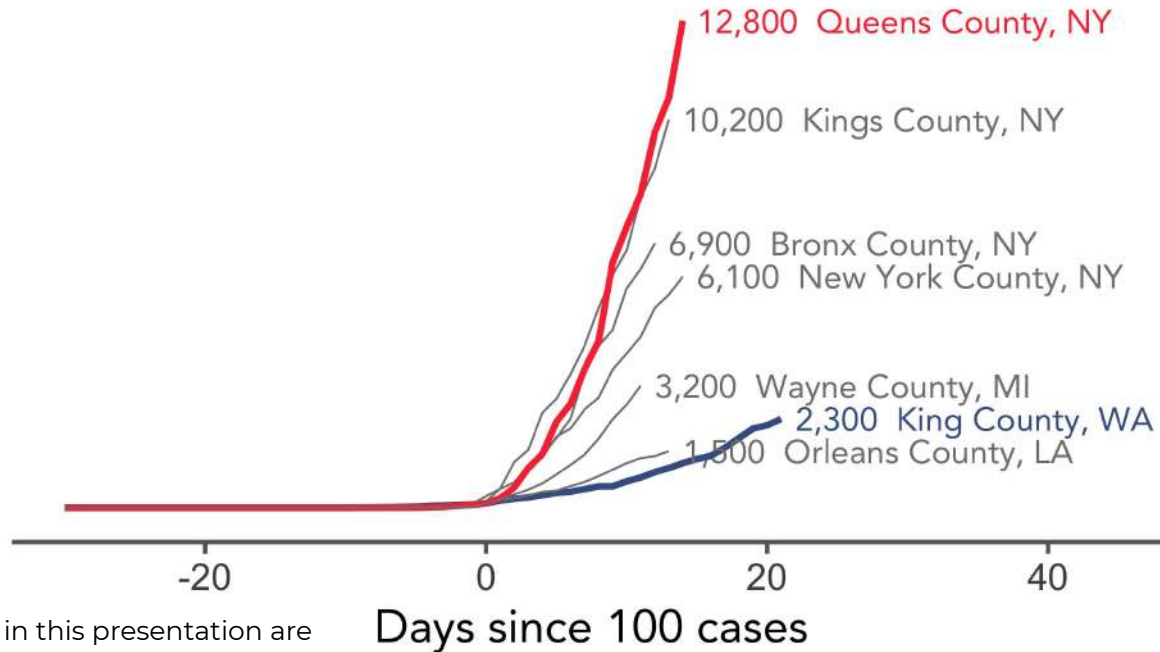
Incorporate epidemiology models

Concentrate on rural areas

Current situation: Exponential growth of COVID-19

Cumulative number of cases by county

Focusing on 6 of the worst-affected counties



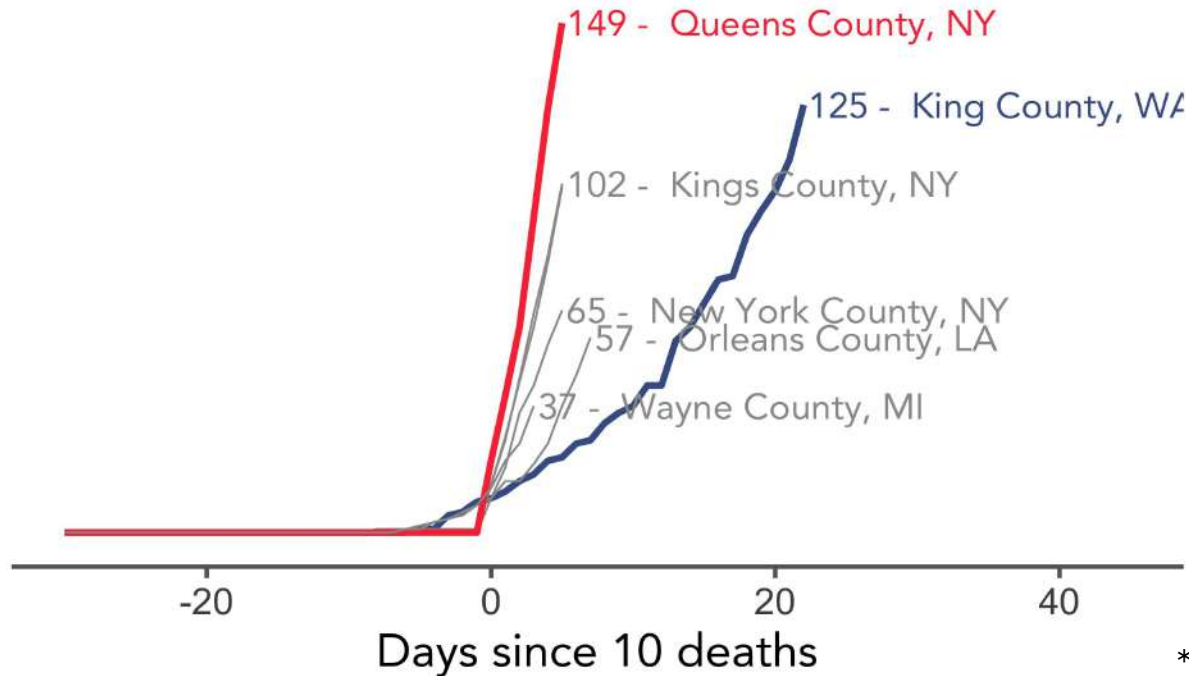
*"Cases" and "deaths" in this presentation are recorded cases and deaths. Data source: <https://usafacts.org>.

*Based on 3/30 data

Current situation: Exponential growth of COVID-19

Cumulative number of **deaths** by county

Focusing on 6
of the
worst-affected
counties

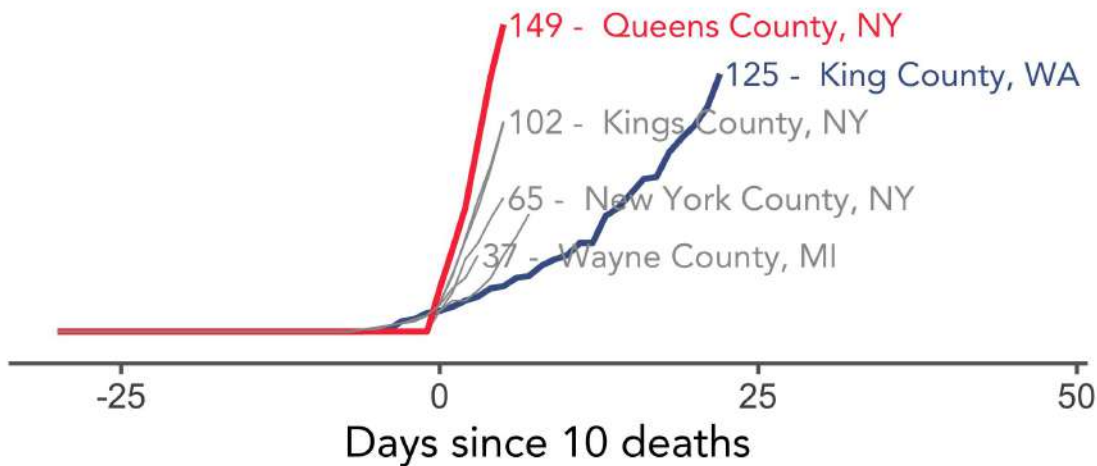


*Based on 3/27 data

Goal: **Predict** COVID-19 at the county level

Our goal: predict COVID-19 at the county level

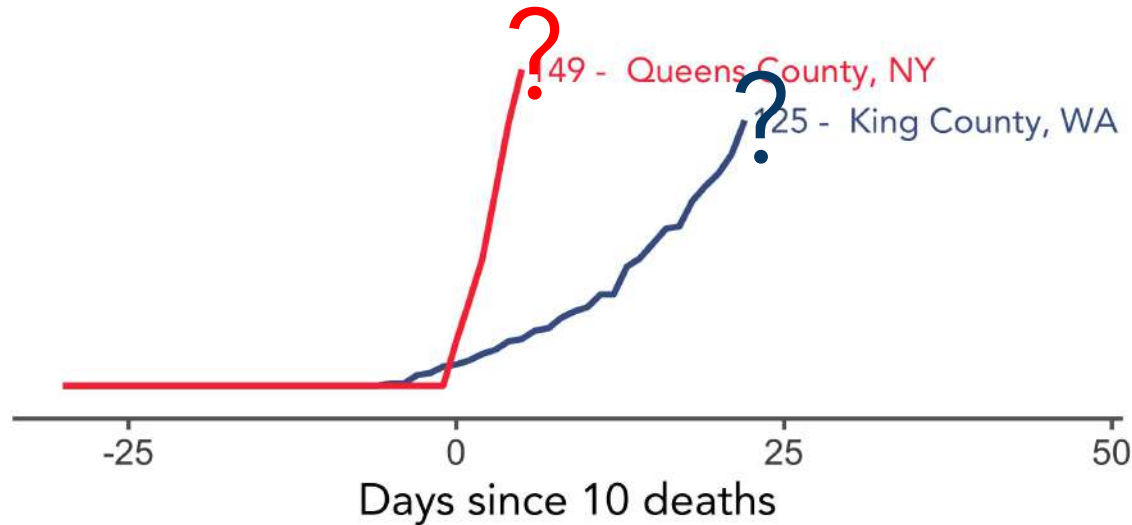
Cumulative number of **deaths** by county



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Goal: Predict COVID-19 at the county level

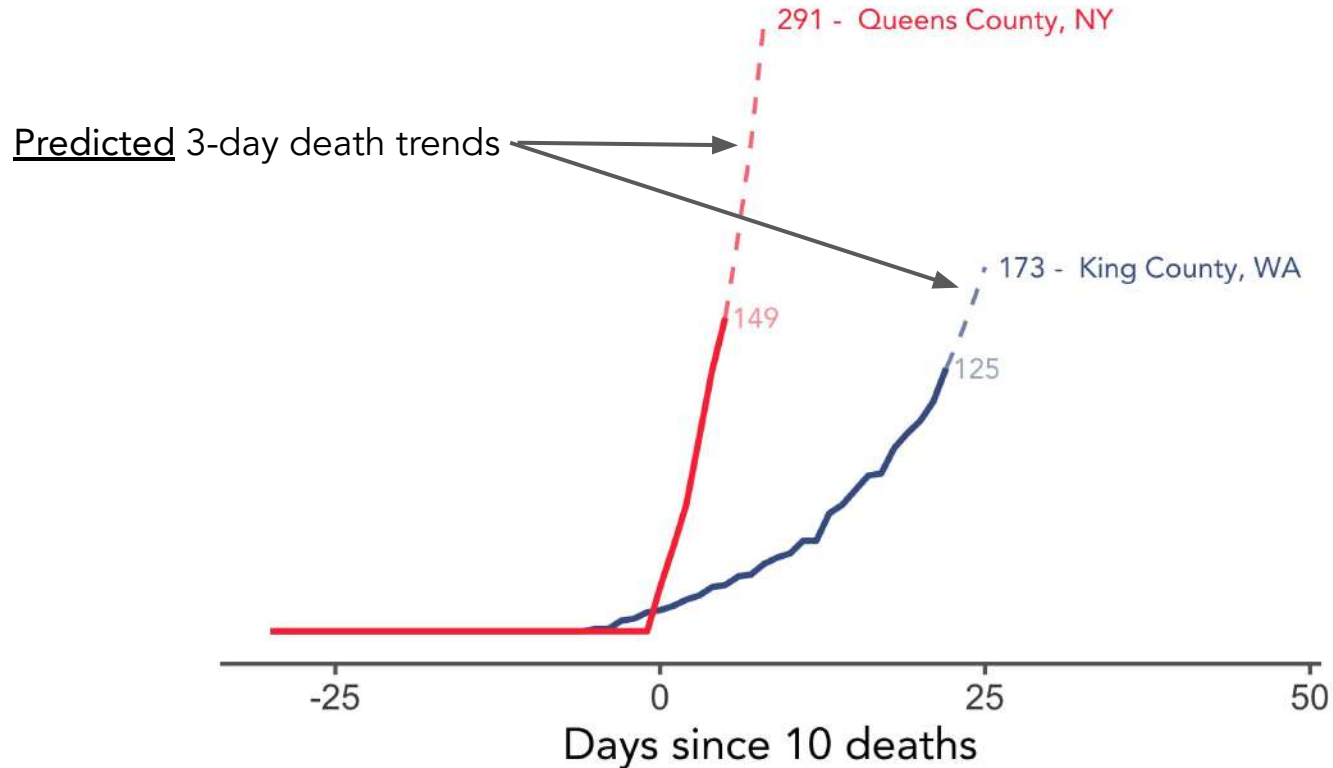
Cumulative number of **deaths** by county



*Based on 3/27 data

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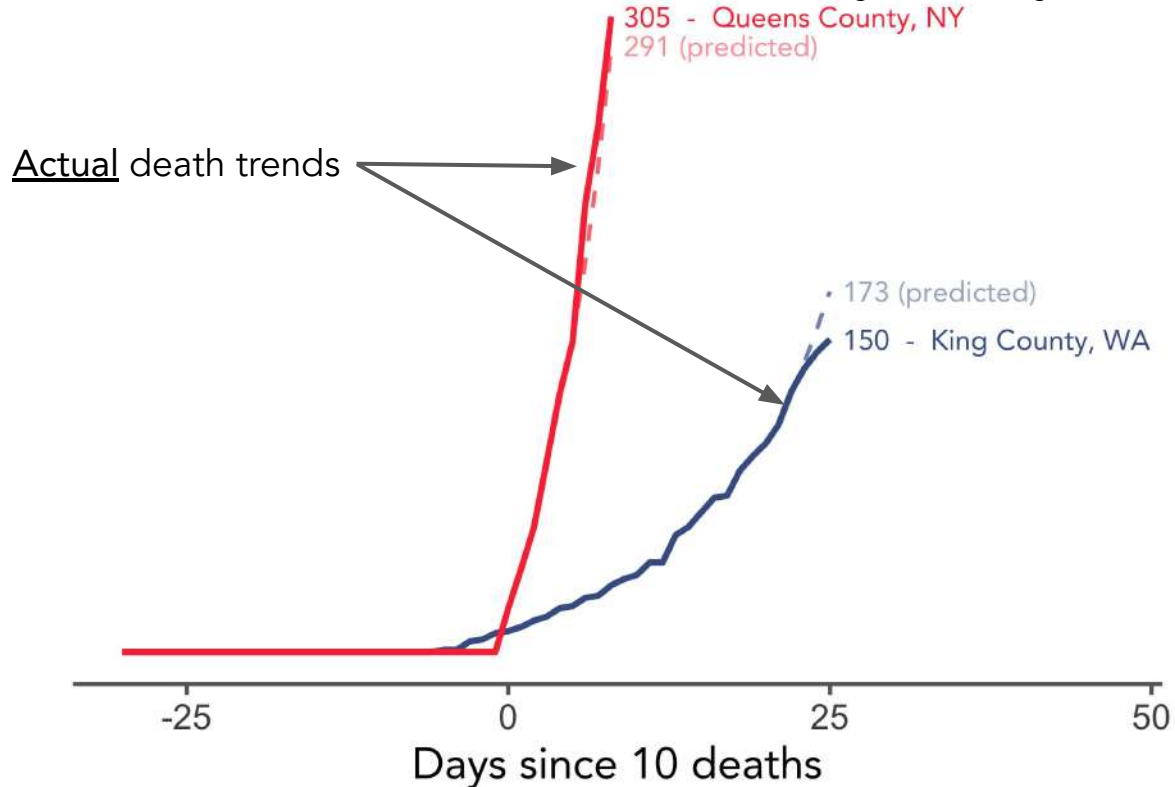
Cumulative number of **deaths** by county



*Based on 3/27 data

Goal: Predict COVID-19 at the county level

Cumulative number of **deaths** by county



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