Good Afternoon,

Thanks for your patience as I got responses to this.

In terms of numbers one and two below, that would be great if you would be able to start working on that. Dr. Pedati is also interested in knowing if your team has reviewed anything that uses input from the H1N1 experience in the US. She would be interested in that as well.

Numbers three and four will be the priority projects that IDPH will be most interested in, but we recognize those take a bit more time. I've forwarded your list of variables over to Dr. Pedati and team and they will take a look on Monday. After I get an email back from them, I'll get an agreement out to U of I. Hopefully we can get that signed by COB on Monday so that we can get you data by Tuesday. I know IDPH and response team would really like to see an Iowa specific model within two weeks or so (in case that impacts how much time you spend on numbers one and two).

Again, if we need to have a call or talk further on Monday - we can do that.

Thanks again very much for your partnership and for working with us through this challenging situation!

Kelsey

Kelsey Feller, MPH

Data Sharing Coordinator | Data Management and Health Equity Program | Bureau of Public Health Performance | Iowa Department of Public Health | Lucas State Office Building | **3**21 East 12th Street | Des Moines, Iowa 50319 | Phone: 515.242.5524 | <u>kelsey.feller@idph.iowa.gov</u>

Protecting and Improving the Health of Iowans

On Fri, Apr 3, 2020 at 5:34 PM Cavanaugh, Joe E <<u>joe-cavanaugh@uiowa.edu</u>> wrote:

Dear Kelsey,

Thanks very much for the prompt replies to my earlier message, including your most recent message that copied Dean Parker and Dean Jackson.

In response to your request, I've attached the variable list that features the variables our team perceives as the most pertinent and informative. Of course, we understand that not all of these variables might be available.

Our team met this afternoon. We realize that for the current wave of the pandemic, information needs to be provided expeditiously so that it can be processed and used for decision making. We wanted to put forth a brief outline of what we could potentially provide in the short term, versus what we might be able to provide (if there is the interest and need) in the long term.

First, you are probably familiar with the Institute for Health Metrics and Evaluation (IHME) model, since it seems to be guiding policy decisions at the federal level, and has the advantage of yielding state-specific projections. By Monday, we could provide the IDPH with a short, non-technical description, in the form of a white paper, of the strengths and limitations of this model as applied to the state of Iowa.

Second, we are aware of a number of models that have been proposed and developed for forecasting cases of COVID-19, as well as hospitalizations and deaths. We could provide you with a critique of the strengths and limitations of these models, along with recommendations as to which models might be most germane to the state of Iowa. These models include one that was developed by a member of our team.

Third, once we have the data available, we can determine how we might tailor statespecific forecasts based on a defensible model by using the data the state has collected thus far.

Fourth, as a more ambitious future objective, we could develop a more nuanced model, tailored for the state of Iowa, that might be of value for longer-term projections (e.g., if a second wave of the virus materializes in the fall or the winter).

Obviously, our goal would be to provide the IDPH with the information that you and your colleagues feel is most valuable and pertinent. However, I thought it might be helpful to outline what our team perceives could be of potential benefit. Thank you, Kelsey. Regards, Joe Joseph Cavanaugh, Ph.D. Departmental Executive Officer, Biostatistics Professor of Biostatistics Professor of Statistics and Actuarial Science Professor of Applied Mathematical and Computational Sciences Address: Department of Biostatistics N332A CPHB 145 N. Riverside Dr. Iowa City, Iowa 52242-2007 Phone: (319) 384-1602 Fax: (319) 384-1591 e-mail: joe-cavanaugh@uiowa.edu http://myweb.uiowa.edu/cavaaugh/ web:

From: Feller, Kelsey <<u>kelsey.feller@idph.iowa.gov</u>> Sent: Friday, April 3, 2020 4:33 PM To: Cavanaugh, Joe E <<u>joe-cavanaugh@uiowa.edu</u>> Cc: Jackson, J Brooks <<u>brooks-jackson@uiowa.edu</u>>; Parker, Edith A <<u>edith-parker@uiowa.edu</u>>; Marisa Roseberry <<u>marisa.roseberry@idph.iowa.gov</u>> Subject: Re: [External] Re: UI assistance on modeling

Good Afternoon,

We sent one last message quick to try to get a response for you. I do not yet have a response on the exact agreement terms for precisely what Dr. Pedati needs or order or prioritization (beyond what I sent to you earlier in the week). So I will not have any form of an agreement to send to you for your review until next week.

We did follow up with the question "Do we feel confident enough in moving forward that I could let U of I know so they can start reviewing literature?" And to that I was given a "Yes, please go ahead."

As I noted in an earlier email to Dr. Cavanaugh, a list of variables will be one of the first things I will need before I can get you data. Even if at this point it is just a rough draft and you're unsure if IDPH has access to the information. It may take a few days for our staff to pull the data, so getting that as early as we can will be helpful.

I apologize that I cannot give you more at this time and thank you greatly for working with us on this. Please let me know if you need anything from me on Monday. I can make myself available to discuss as needed. Thank you,

Kelsey

Kelsey Feller, MPH

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