



Flu Scenario Modeling Hub Report

13 December, 2022

Scenario Modeling Hub Team¹

Key Takeaways

In Round 2, we assessed the impact of reduced residual immunity coming into the 2022-2023 influenza season as a result of reduced transmission during the last two influenza seasons because of the COVID-19 pandemic. We also assessed the impact of low versus high vaccine effectiveness. Ensemble projections are based on contributions from 11 teams (9 nationally) and cover the period from Nov 13, 2022 to June 3, 2023. Full scenario specifications can be found [here](#).

Key Takeaways from the Second Round

- Under the assumption of 50% reduced immunity at the start of the season, and as compared to the typical level of immunity pre-COVID-19 pandemic, a 40-50% higher hospitalization and death burden is expected based on median national projections.
- Increased vaccine effectiveness is expected to substantially decrease both the peak and cumulative hospitalizations regardless of existing population immunity, reducing hospitalization by 19.5% in low immunity scenarios and by 30.4% in high immunity scenarios.
- In the worst case scenario, with low vaccine effectiveness and low existing immunity, weekly hospitalizations are projected to peak at 38,000 hospitalizations nationally (50% 33,000-46,500). In this scenario, peak hospitalizations have a substantial likelihood to exceed the peak of the severe 2017-18 season. Observed hospitalizations and deaths are most closely tracking with the worst case scenario at the time of this report, though other scenarios remain plausible.
- Irrespective of scenario, ensemble hospitalizations are projected to peak in mid- to late-December, 2022. The worst case scenario of low prior immunity and low VE projects a peak in the week of December 24 nationally (50% PI December 10 - December 31), though there is substantial variability between states.
- There is substantial agreement in the trajectory of individual models in this round.

A few caveats are worth noting:

- Some teams had issues calibrating the average pre-season immunity scenarios (A and C), sometimes leading to unrealistically high values of R_0 to be consistent with the fast and early rise of the epidemic in the South-East. Further, some teams had trouble making projections for some of the smaller states that had a later epidemic start and lacked informative data for calibration. Recent observations indicate a sharp rise in these states in weeks 46-48. This led us to initiate a third round of influenza projections that will include calibration data until week 48 and will be released later in December.
- The amount of calibration data available for the new HHS influenza dataset remains limited, and testing practices could change between and within seasons. Similarly, the amount of death data available for calibration is limited.

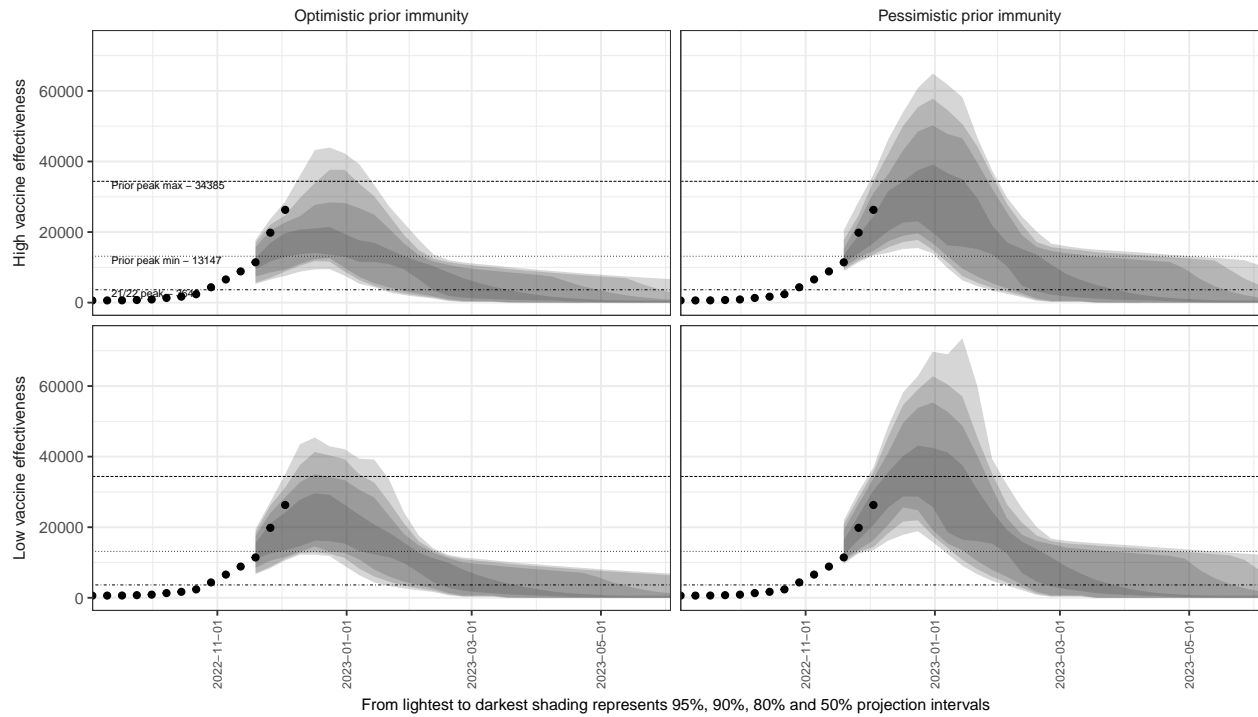
¹Compiled by Sara Loo, Shaun Truelove, Cecile Viboud, Lucie Contamin.

Round 2 Scenario Specifications

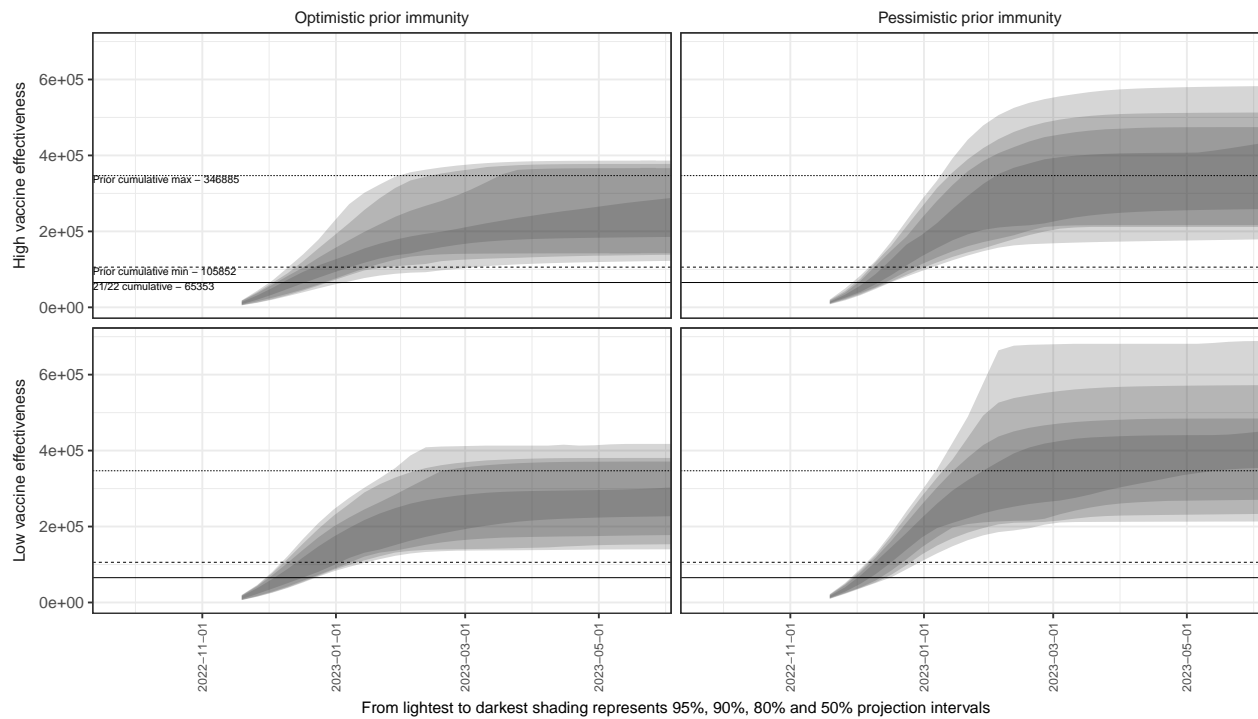
	Optimistic flu prior immunity No impact of missed flu seasons due to the COVID-19 pandemic on prior immunity.* <i>Same amount of prior immunity as in a typical, pre-COVID19 pandemic prior season</i>	Pessimistic flu prior immunity Substantial impact of missed flu seasons due to the COVID-19 pandemic on prior immunity.* <i>50% lower immunity than a typical, pre-COVID19 pandemic season</i>
High Vaccine Effectiveness <ul style="list-style-type: none"> • VE = 50% against medically attended influenza illnesses and hospitalizations (comparable to 2015-16 season) 	Scenario A	Scenario B
Low Vaccine Effectiveness <ul style="list-style-type: none"> • VE = 30% against medically attended influenza illnesses and hospitalizations (comparable to 2018-19 season) 	Scenario C	Scenario D

Ensemble projection intervals

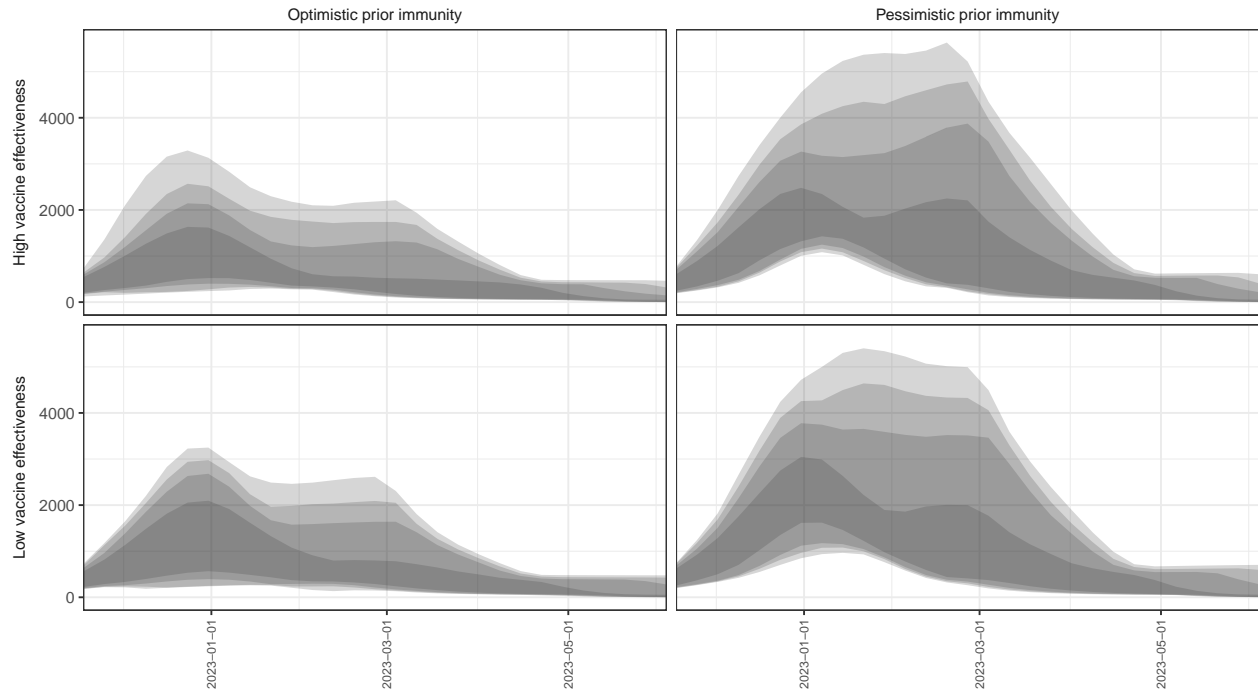
National ensemble projection intervals – Hospitalizations



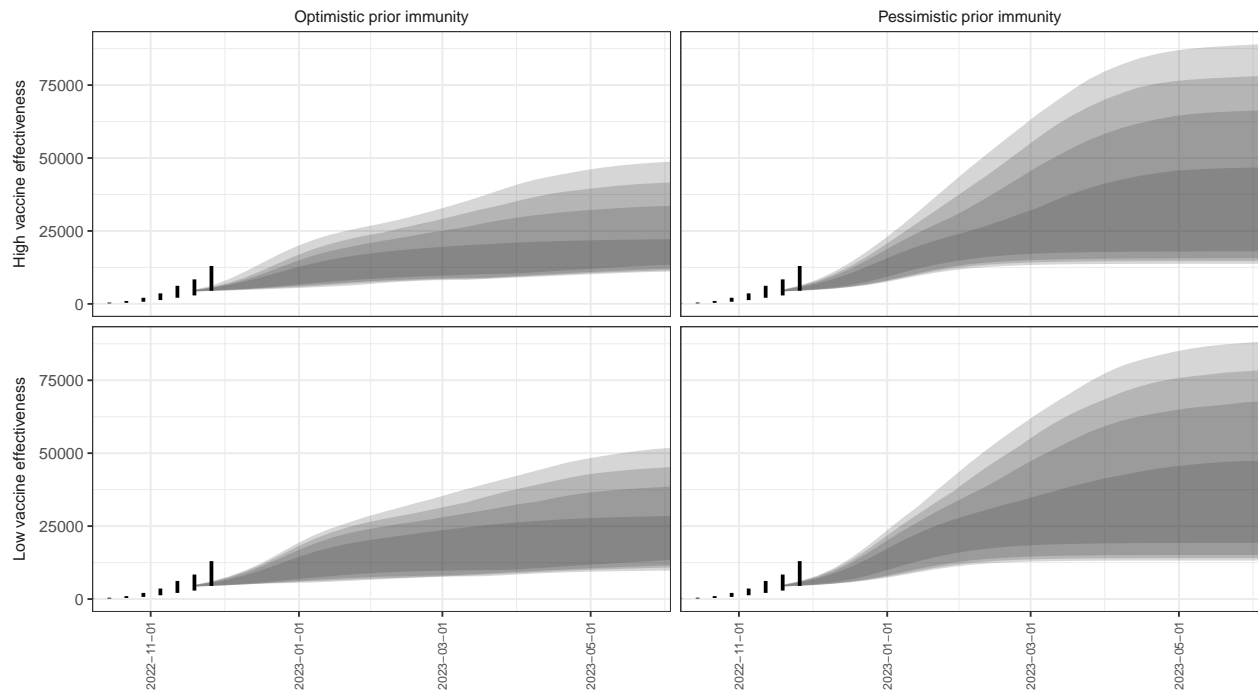
National ensemble projection intervals – Cumulative Hospitalizations



National ensemble projection intervals – Deaths



From lightest to darkest shading represents 95%, 90%, 80% and 50% projection intervals
National ensemble projection intervals – Cumulative Deaths



Horizontal lines are given for prior peak incident and cumulative hospitalizations, from seasons from 2012-13 to 2019-20. The minimum and maximum peaks across these seasons are taken from FluSurv-NET (which is used as a proxy for hospitalizations). Nationally, the highest value is from the 2017-18 season, and the lowest from 2015-16. The 2021-22 flu season based on HHS data is also included to mark a small season.

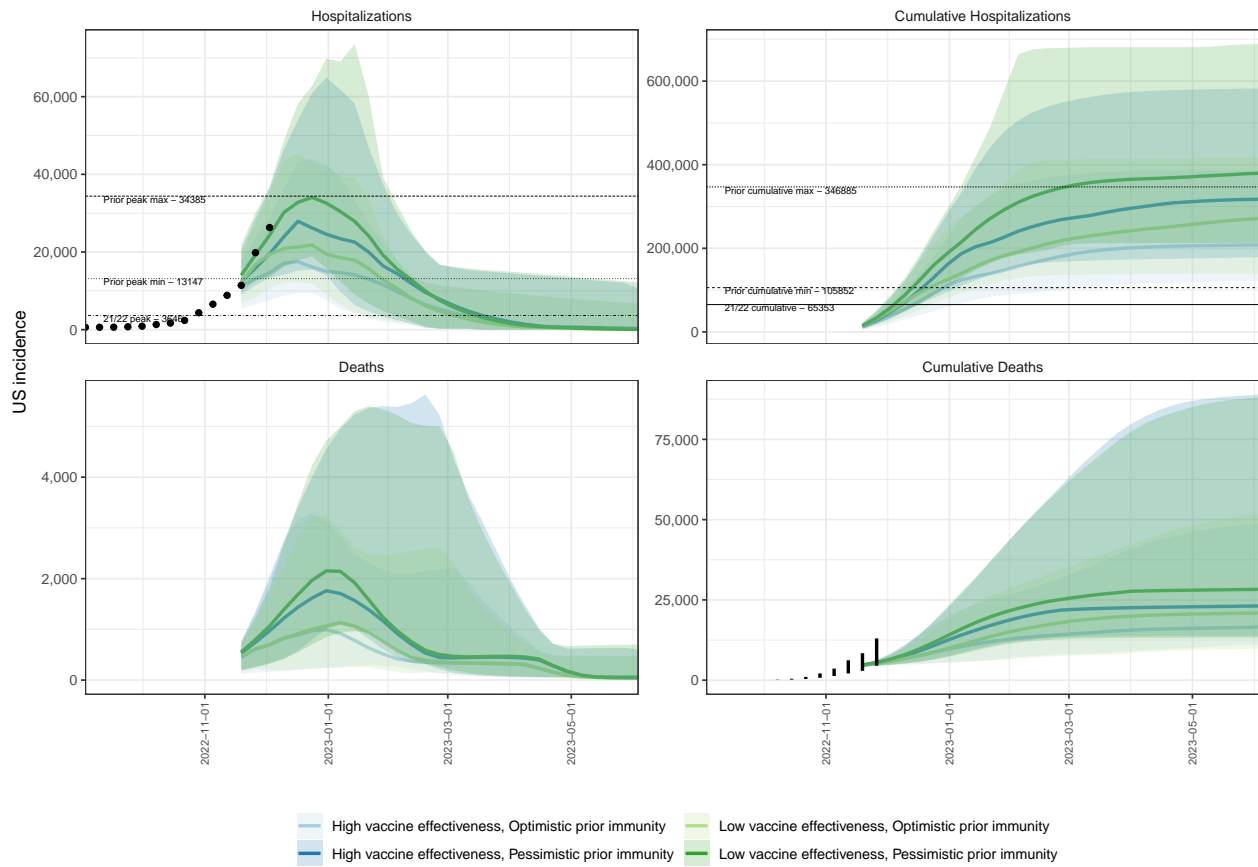
Cumulative death observations are visualized as vertical bars, and are based on in-season death estimates provided by the CDC multiplier approach, which takes into account in-hospital flu deaths reported to

FluSurv-NET, propensity to test for flu in the hospital, and risk of dying of flu outside of the hospital. Bars represent 95% uncertainty intervals. Cumulative estimates are shown since the start of the flu season on Oct 1, 2022.

National ensemble projections

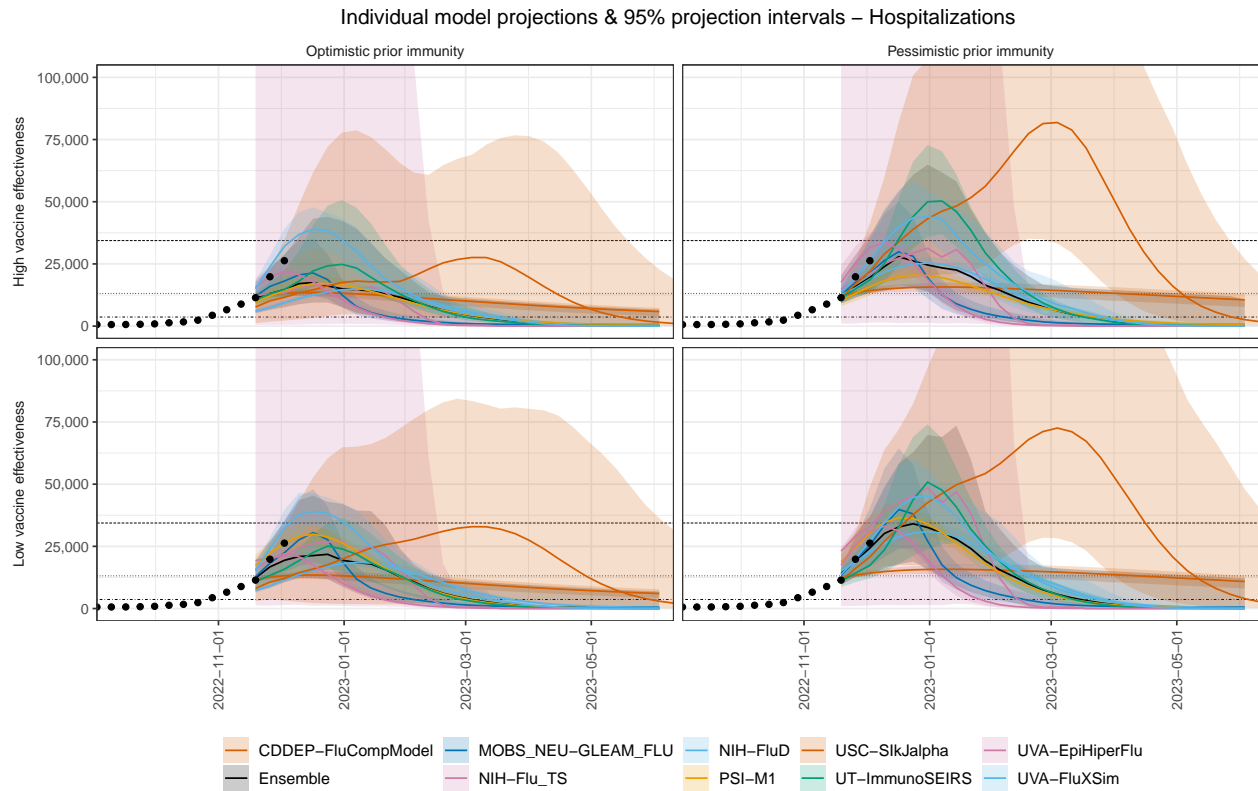
Ensemble projections for national incident and cumulative hospitalizations and deaths separated by scenario.

US ensemble projections & 95% projection intervals

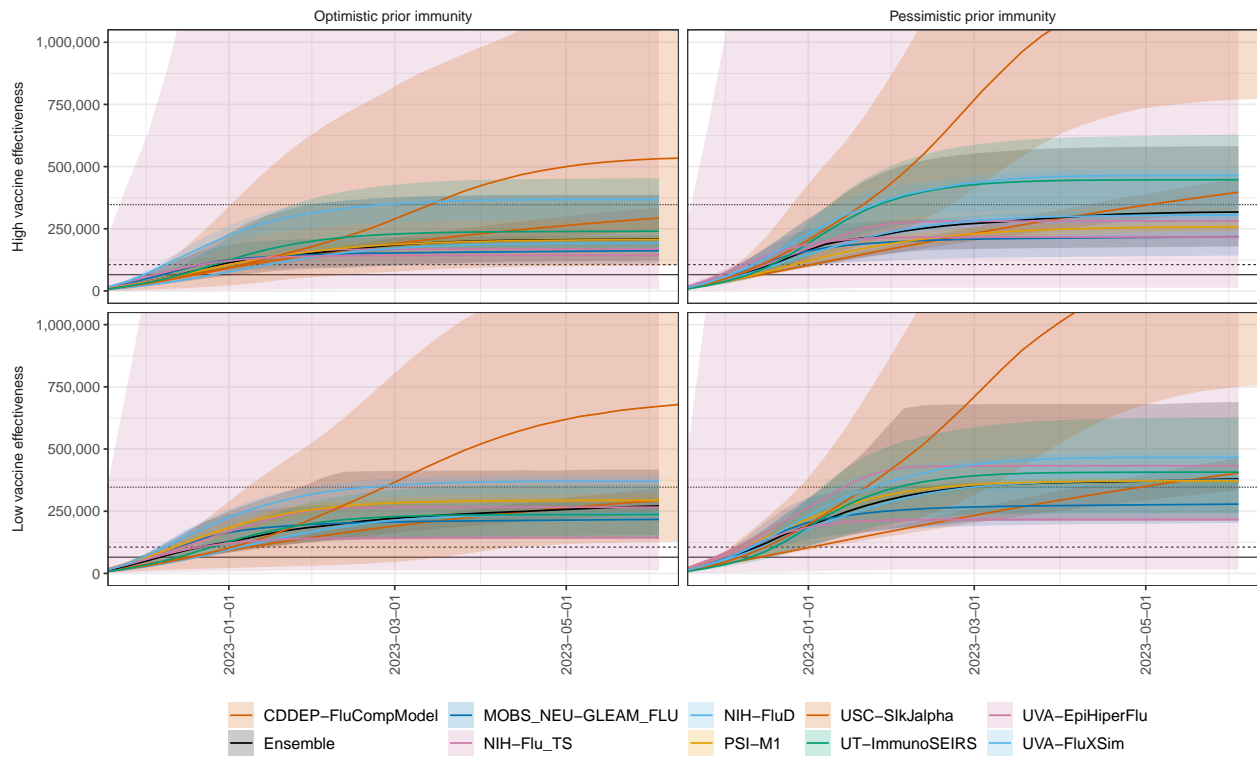


National individual model projections

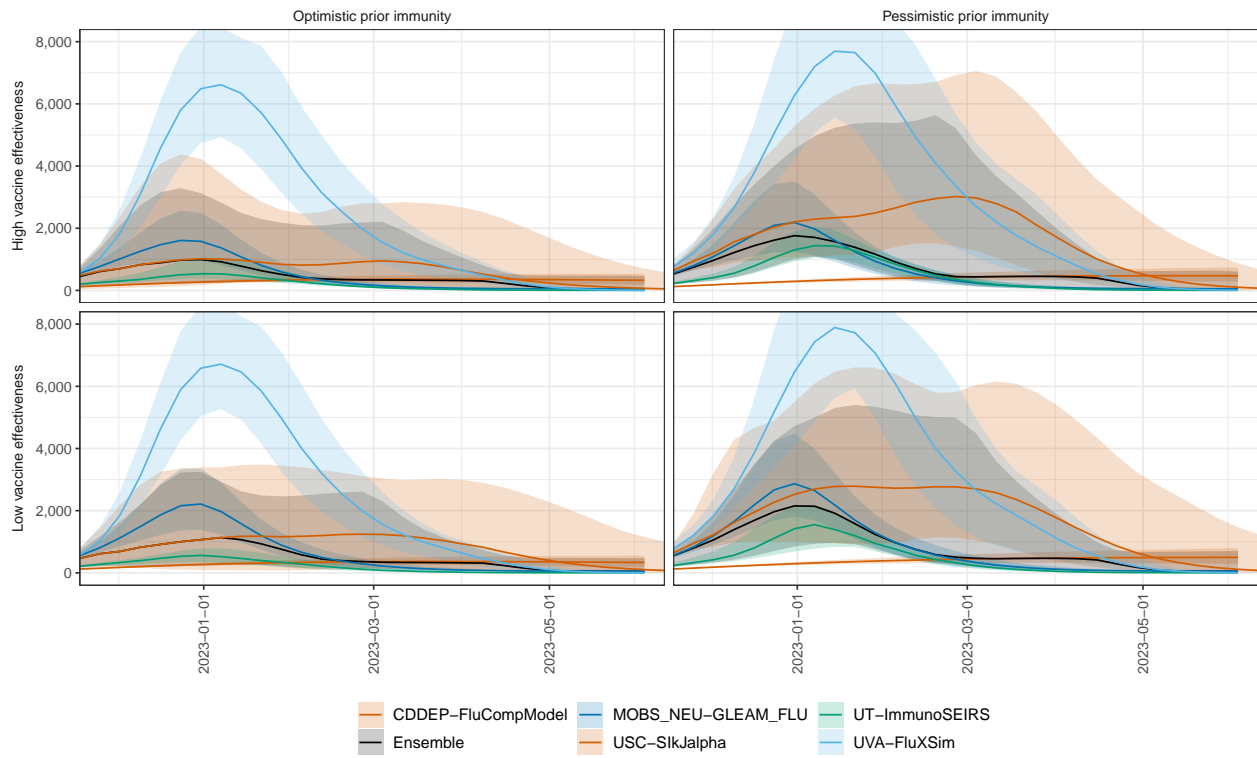
Individual model projections and ensemble by scenario for national hospitalizations, deaths and cumulative hospitalizations. For visualization we set axes limits; full confidence intervals are shown as a supplemental plot on page 17-18.



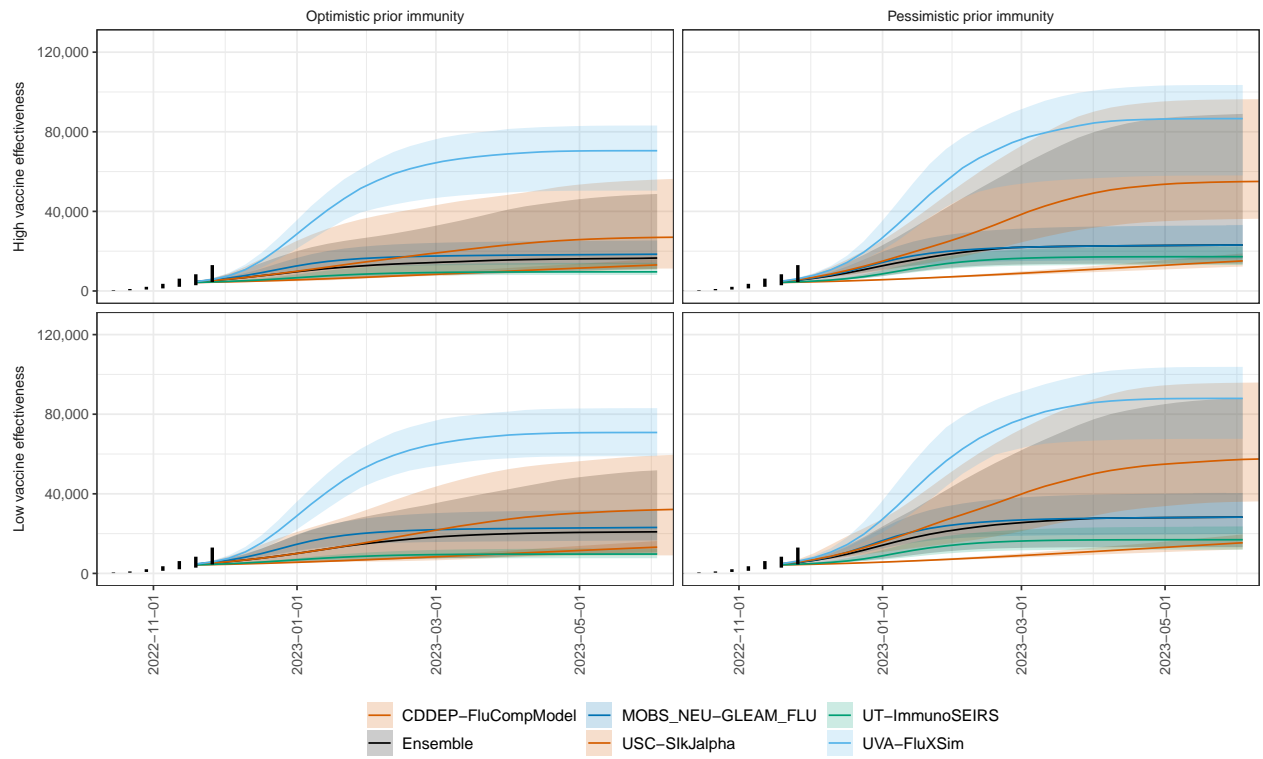
Individual model projections & 95% projection intervals – Cumulative Hospitalizations



Individual model projections & 95% projection intervals – Deaths

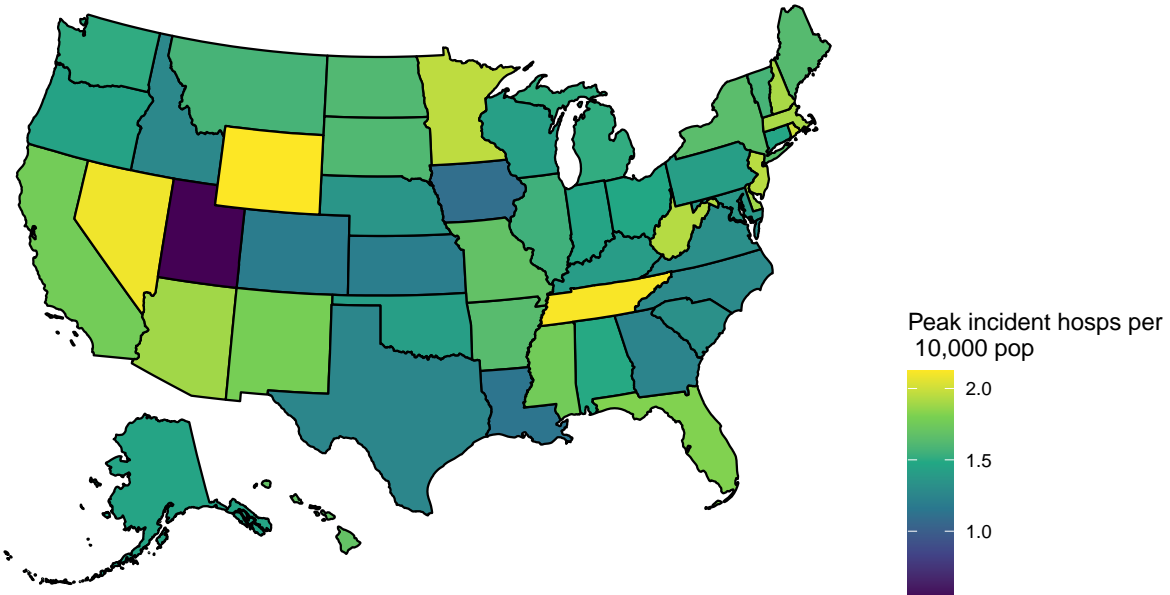


Individual model projections & 95% projection intervals – Cumulative Deaths

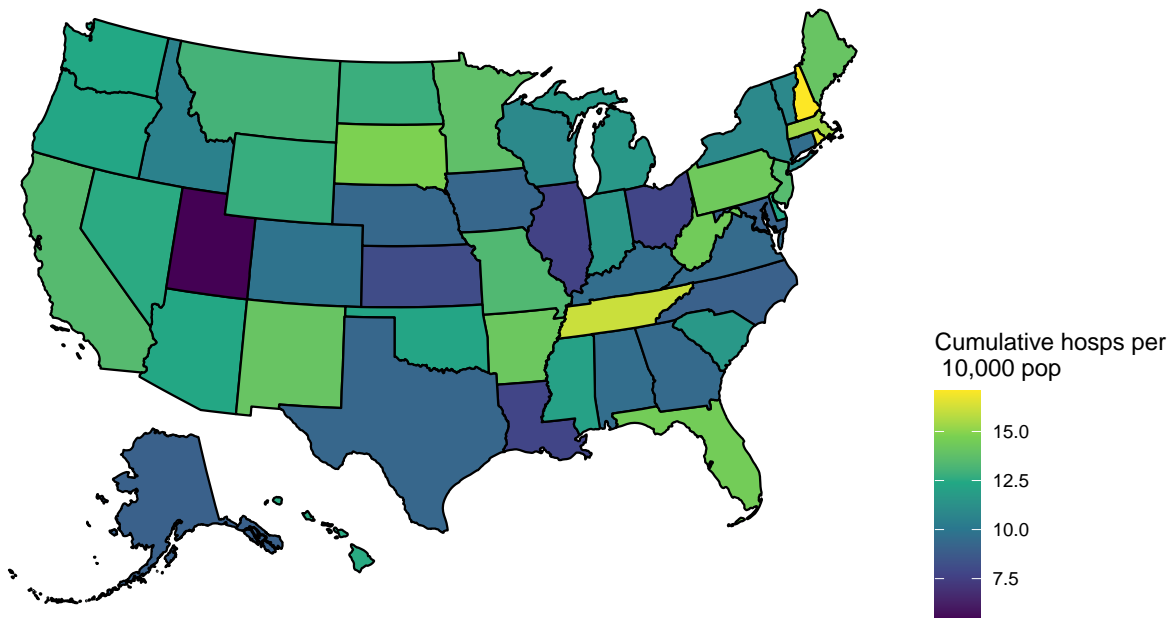


Risk maps

Peak incident reported hospitalizations per 10,000 population in scenario with low vaccination, and pessimistic immunity: November 13, 2022 to June 03, 2023

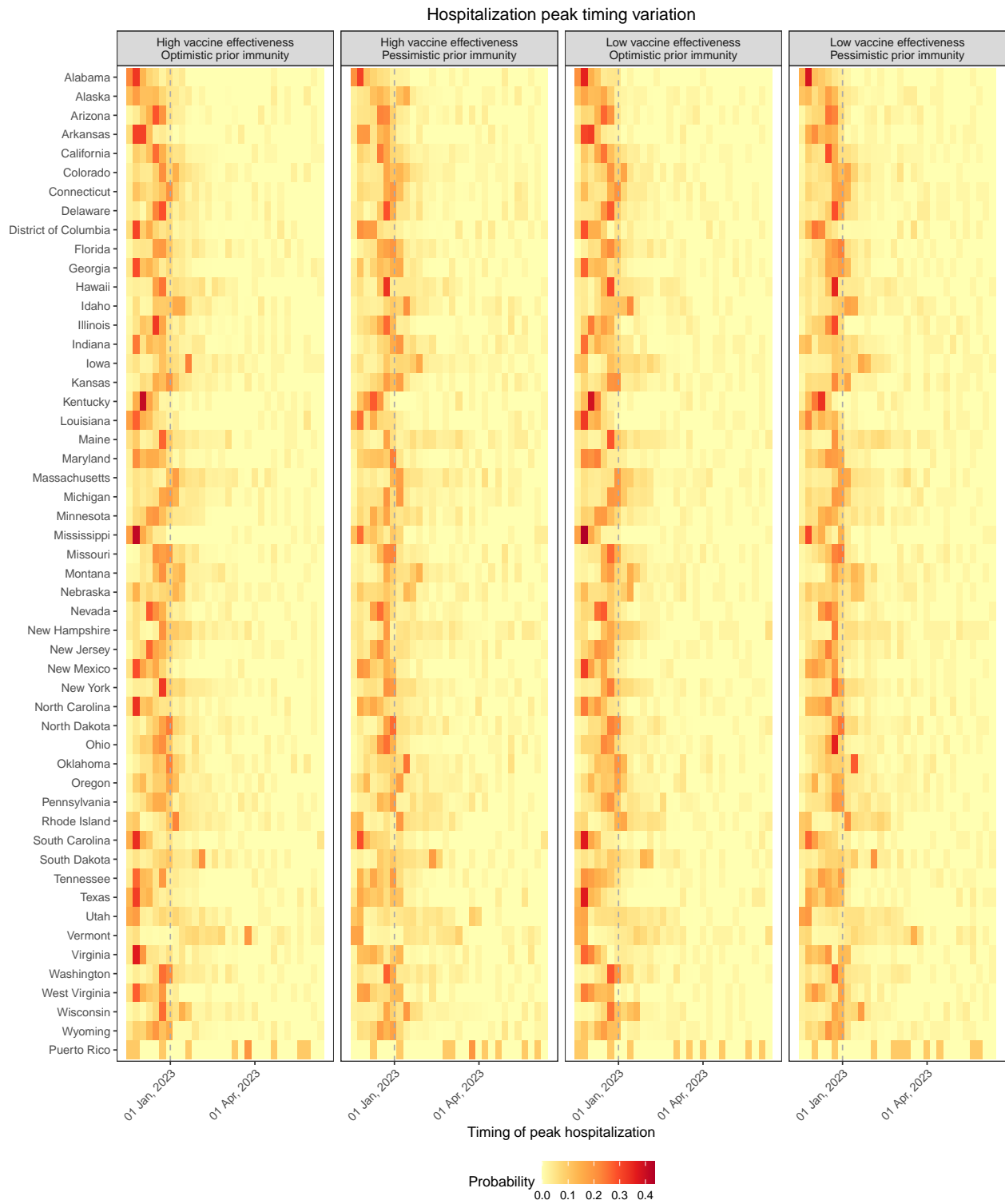


Cumulative reported hospitalizations per 10,000 population in scenario with low vaccination, and pessimistic immunity: November 13, 2022 to June 03, 2023



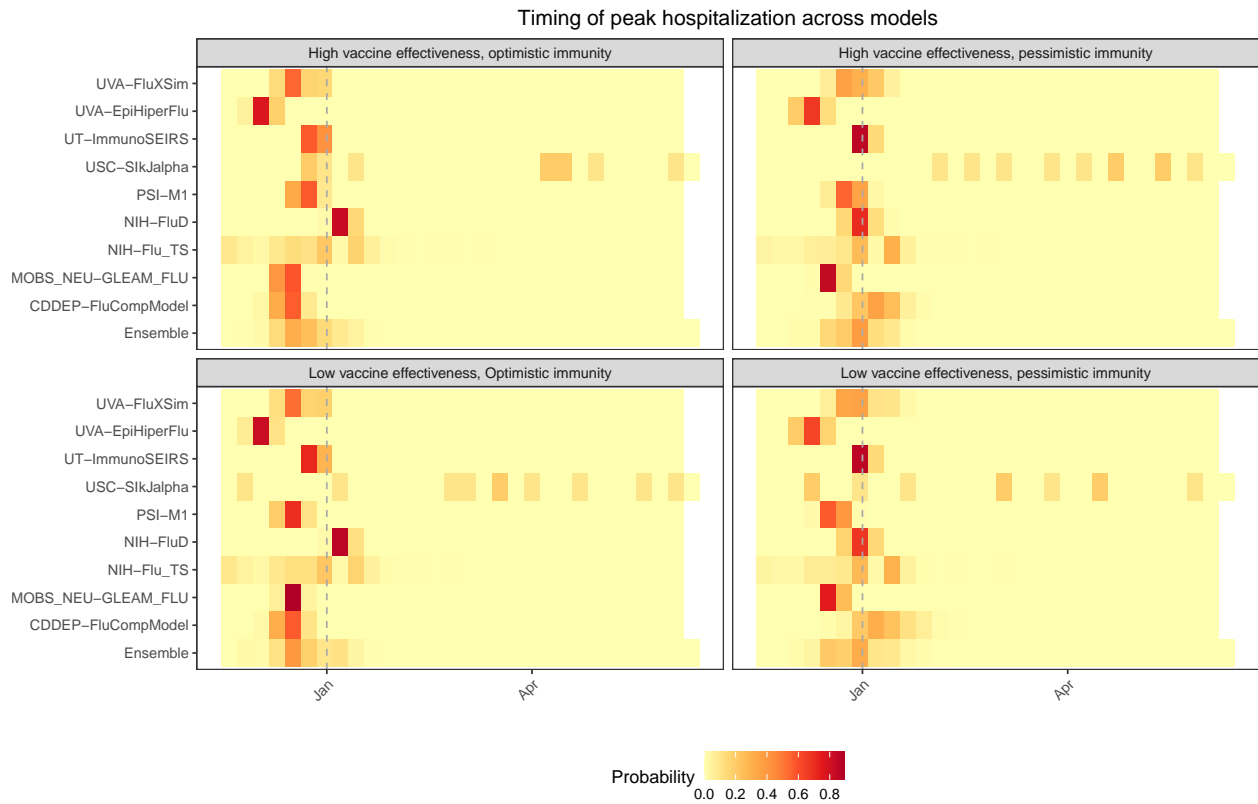
State variability in peak timing

Ensembles projections for state-level timing of peak hospitalization incidence.



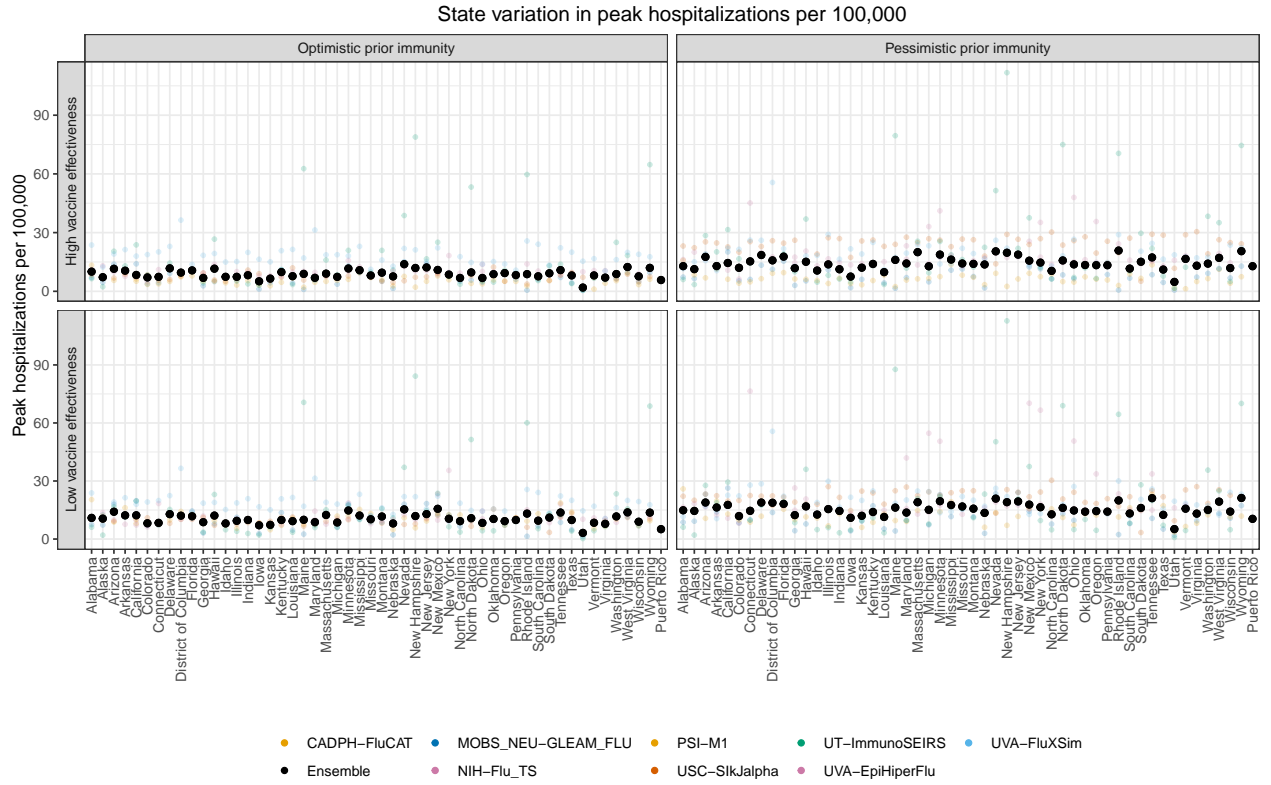
Peak hospitalizations timing

Individual model probabilities for national timing of peak hospitalizations.

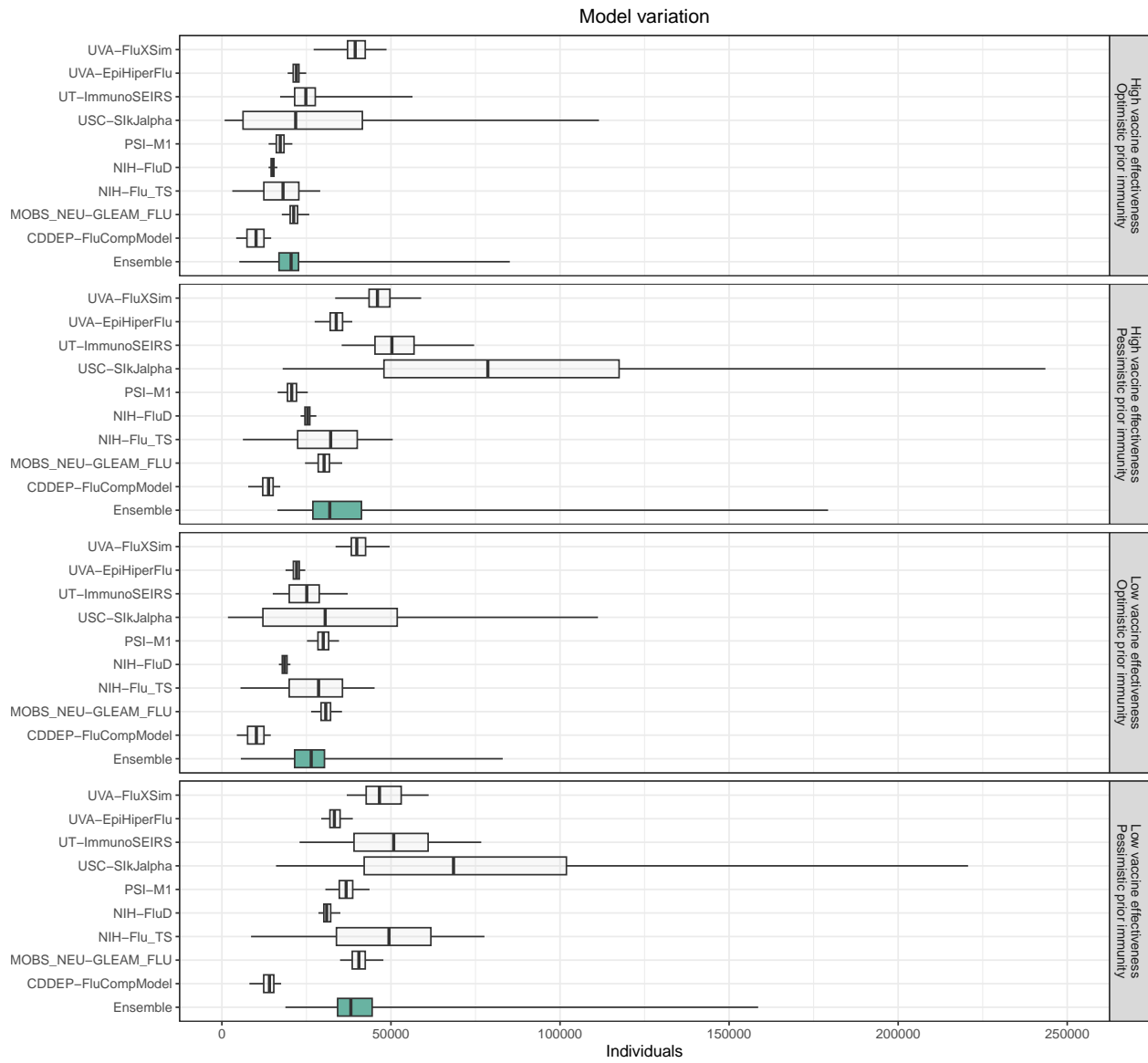


State-level deviation in hospitalization incidence

Individual model and ensembles projections for state-level peak hospitalization incidence.

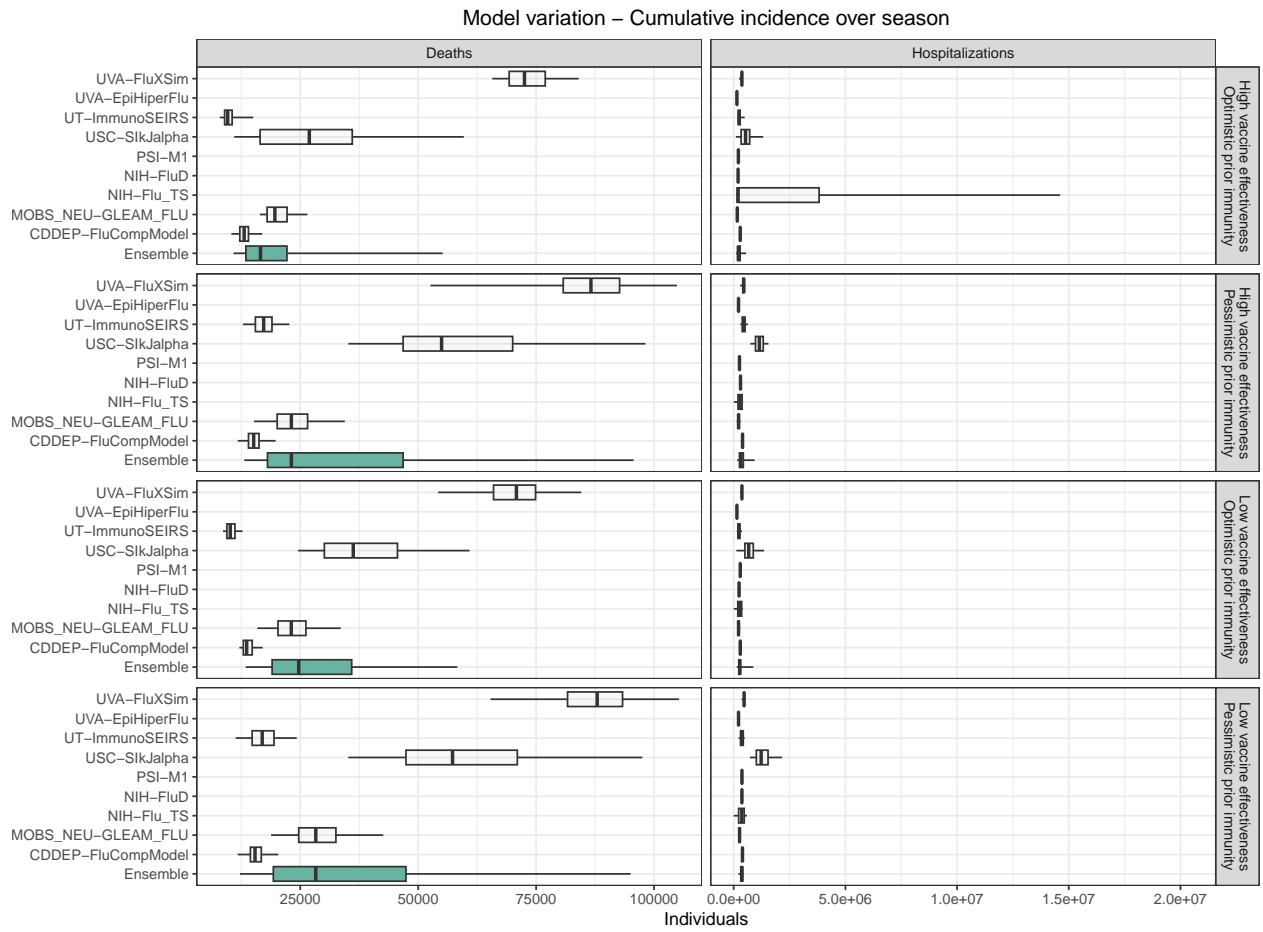


Model Variation in National Peak Size

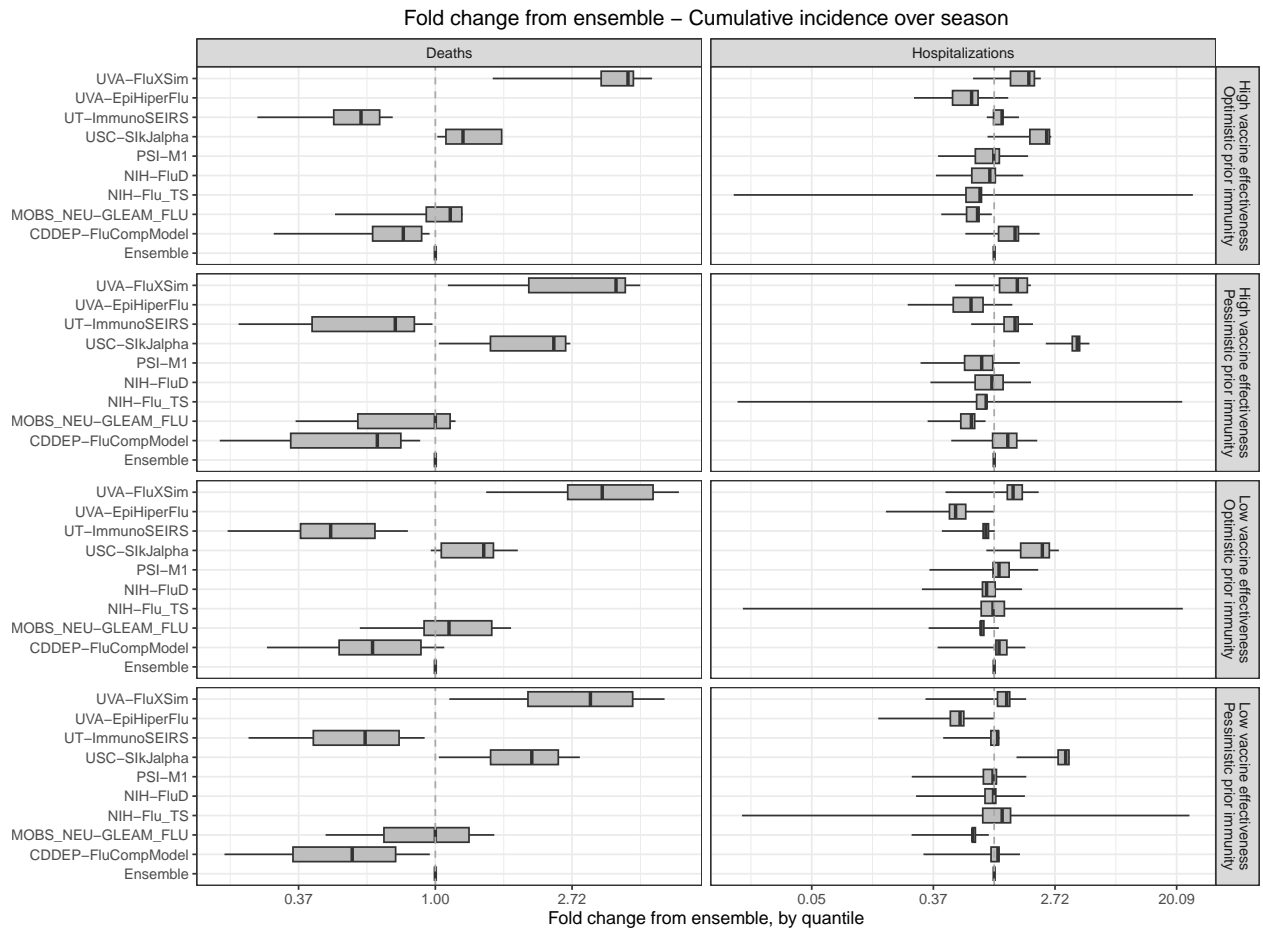


Outliers are removed from boxplots for visualization.

Cumulative incidence over season by model

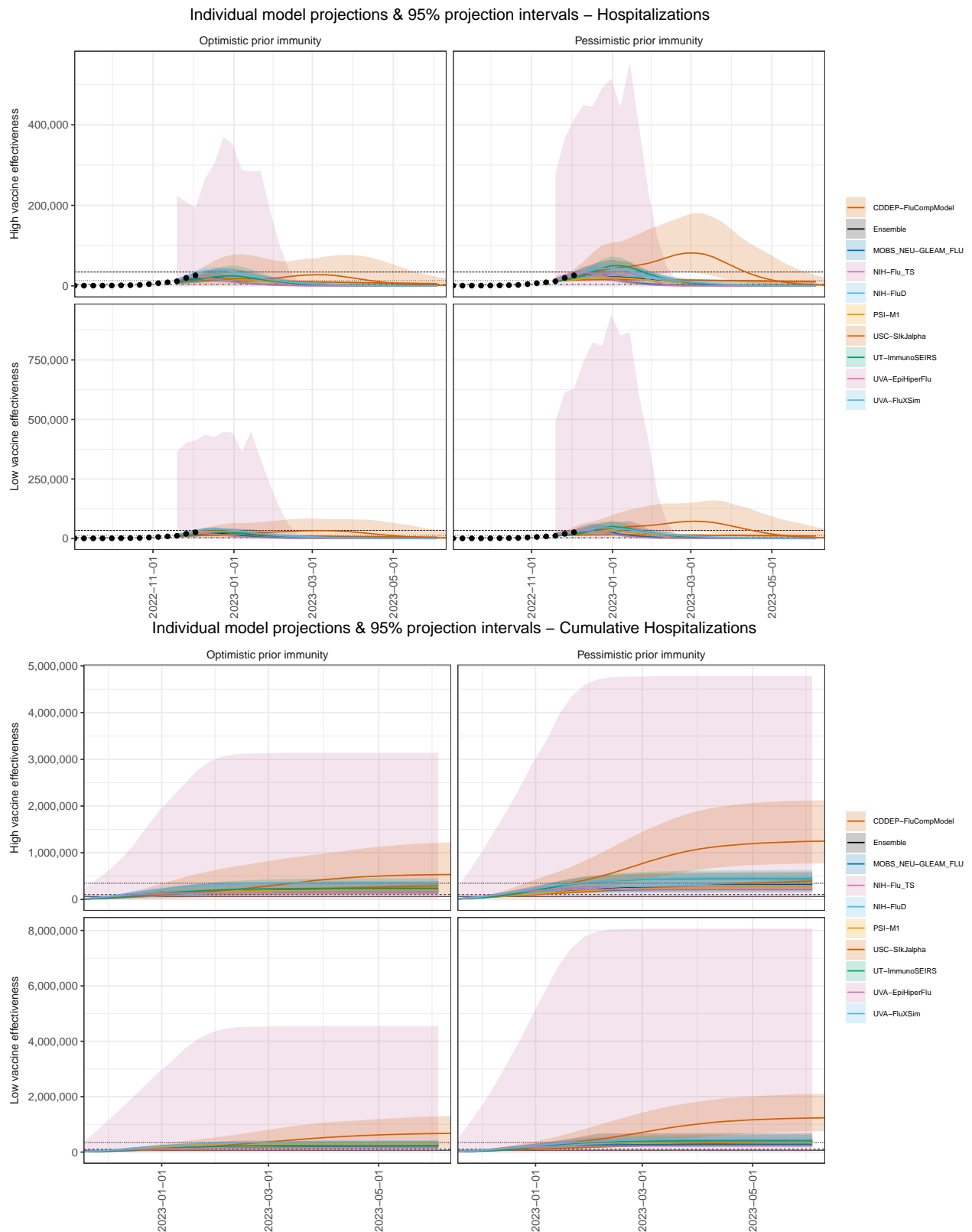


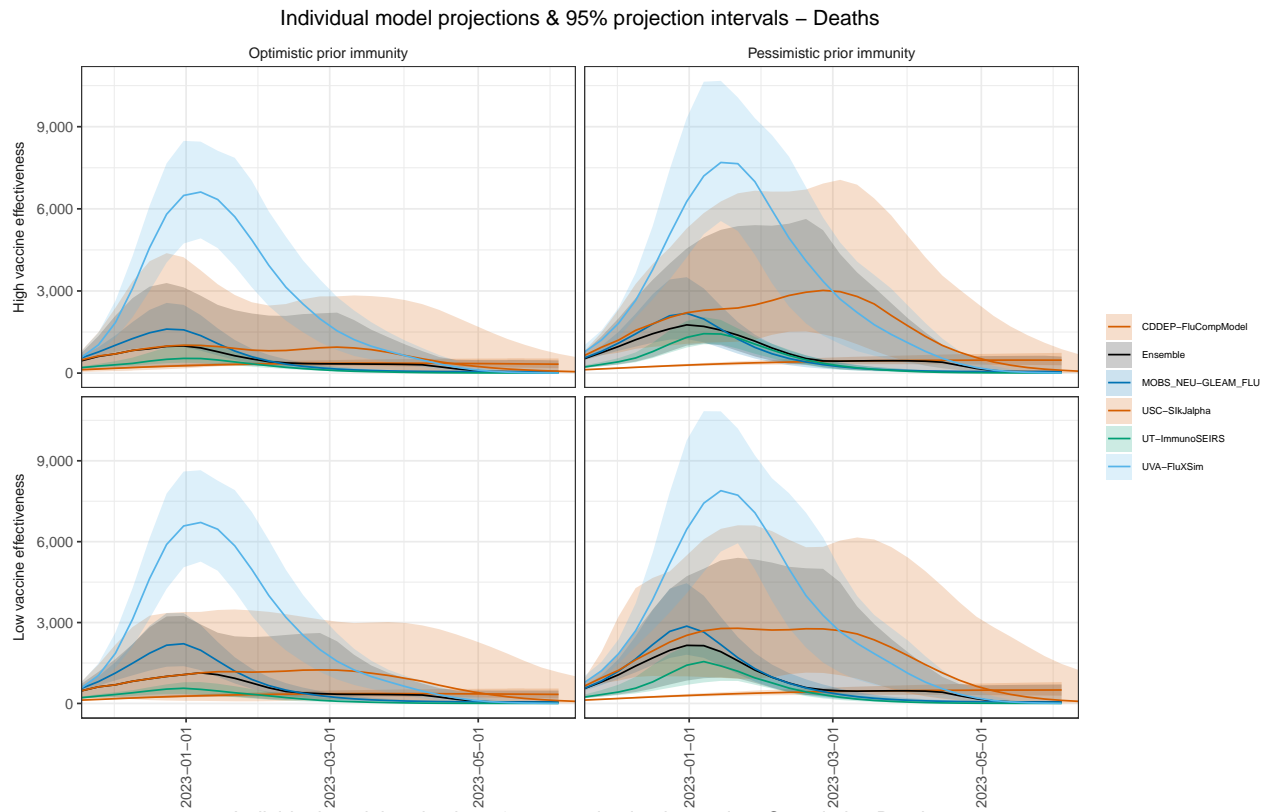
Difference between model and ensemble distributions



Supplemental Plots

National individual model projections - full confidence intervals

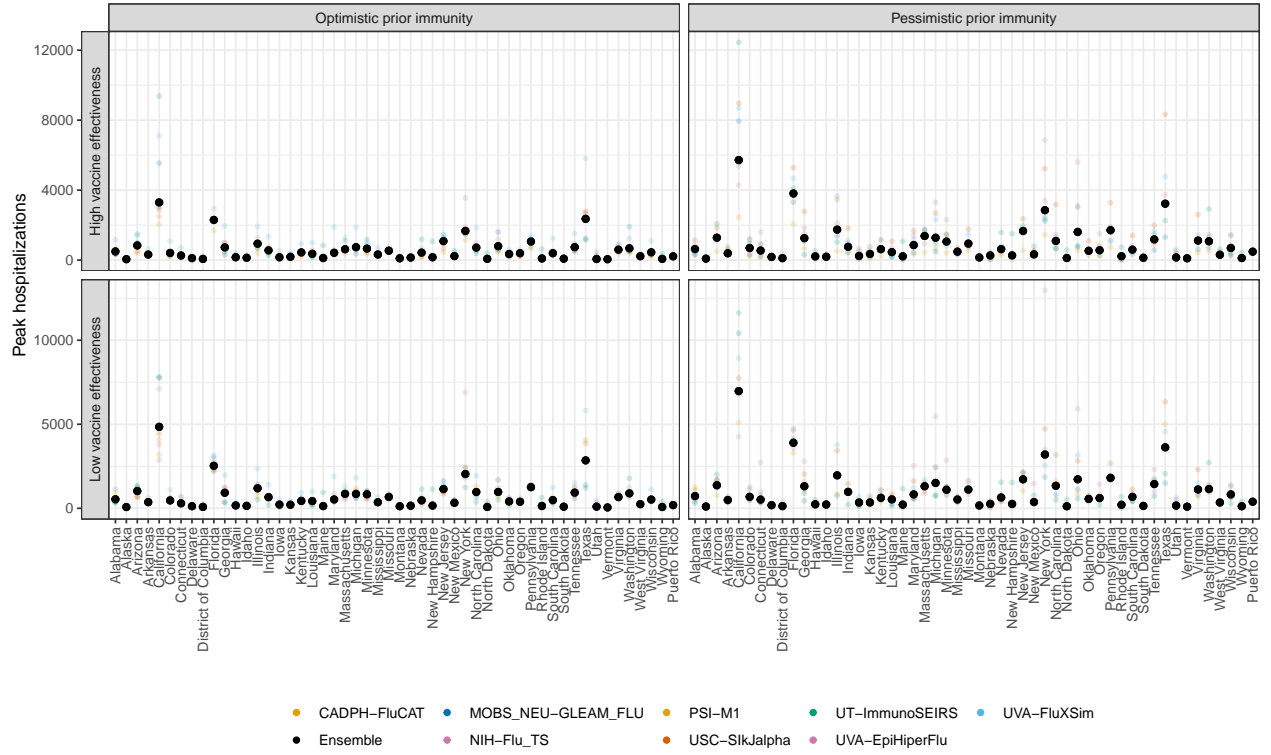




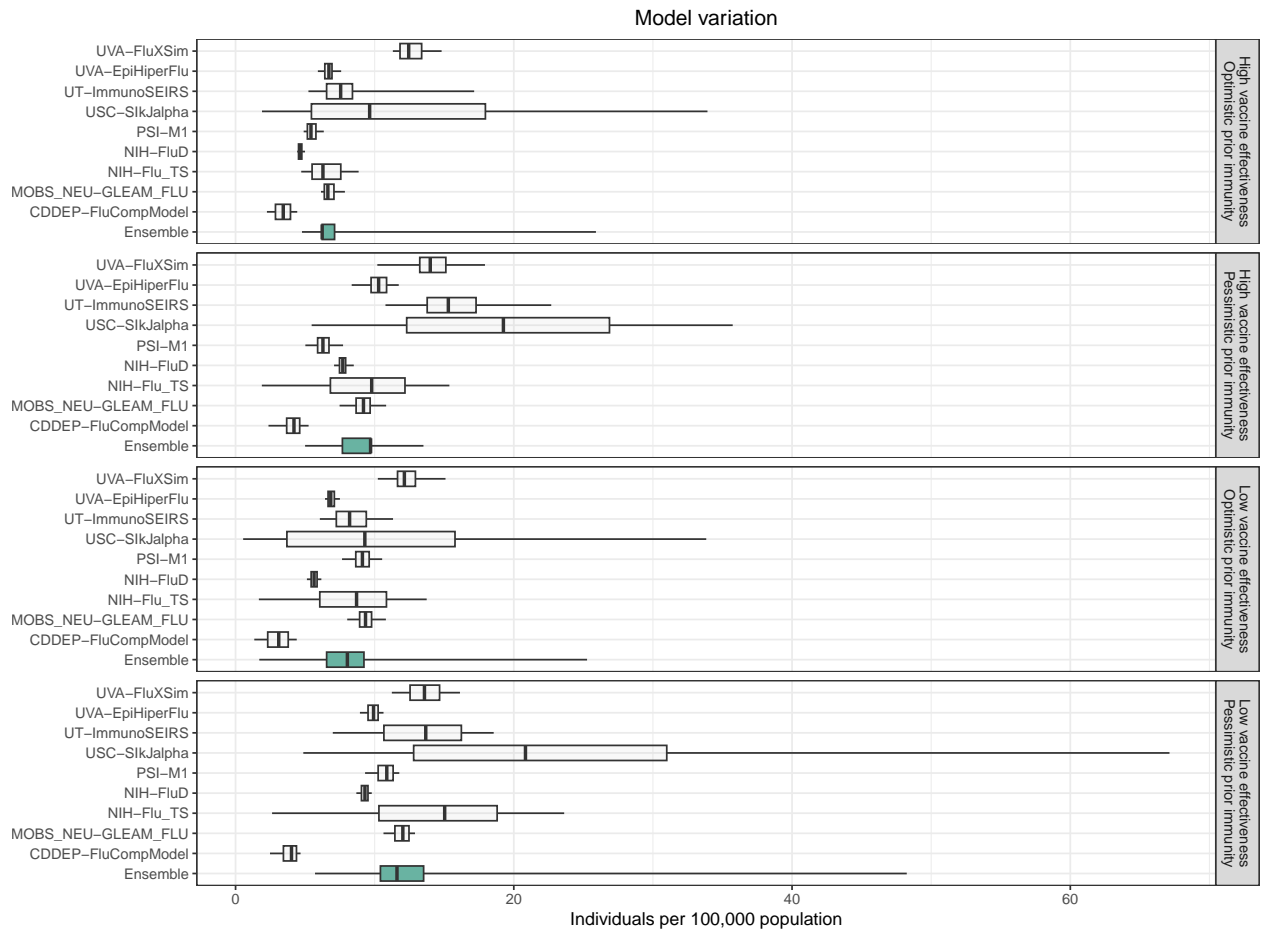
State-level deviation in hospitalization incidence

Individual model and ensembles projections for state-level peak hospitalization incidence.

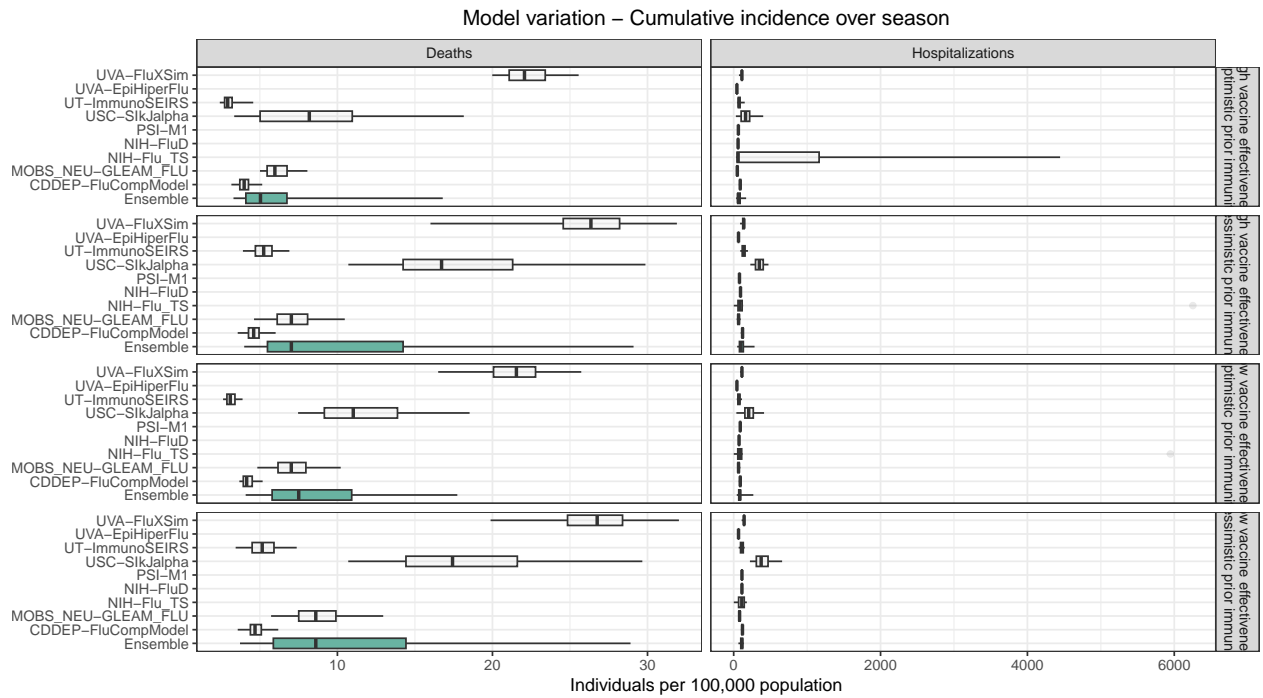
State variation in peak hospitalizations



Model Variation in National Peak Size - rates per 100,000 population

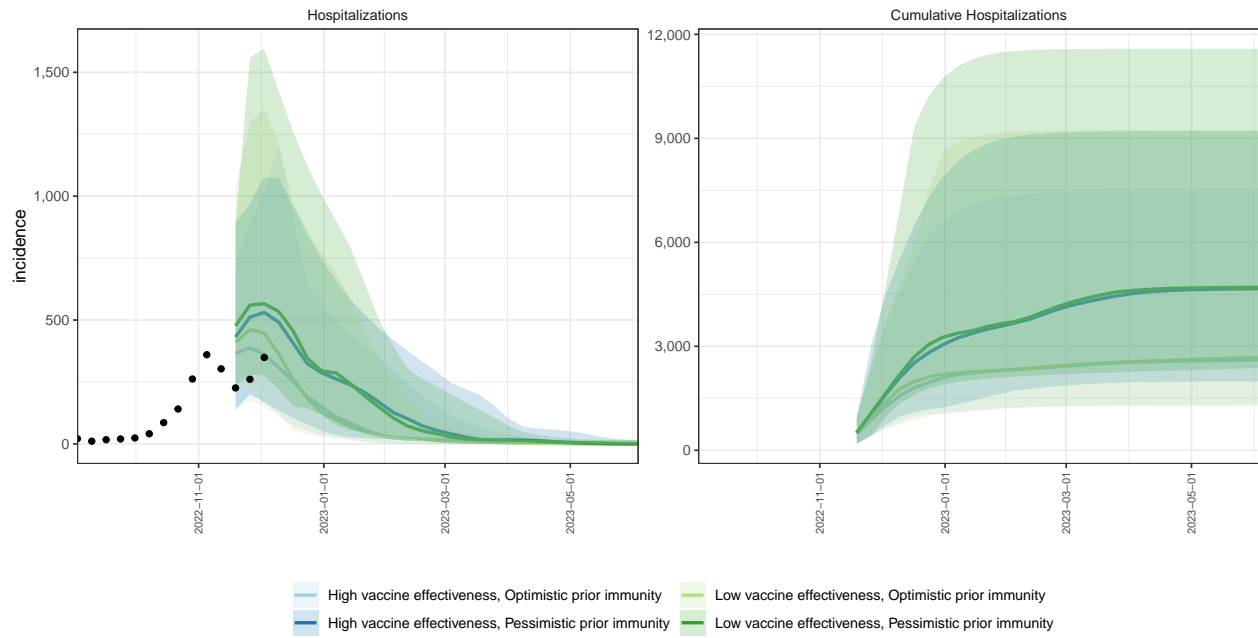


Cumulative incidence over season - rates per 100,000 population

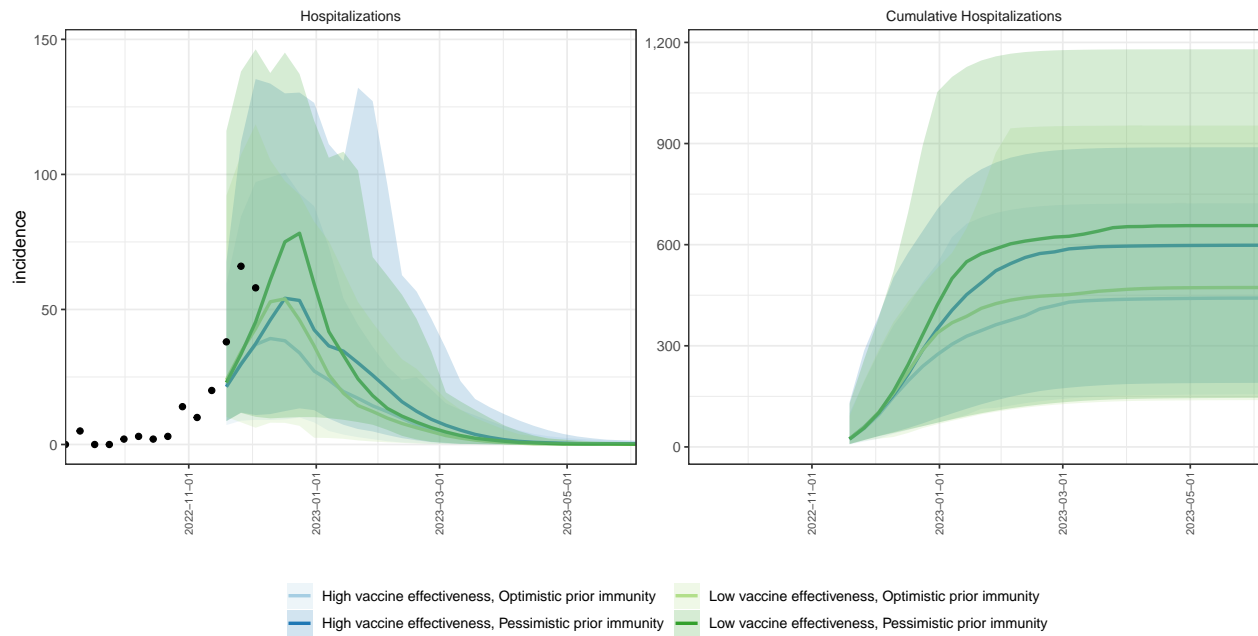


State-level ensemble plots

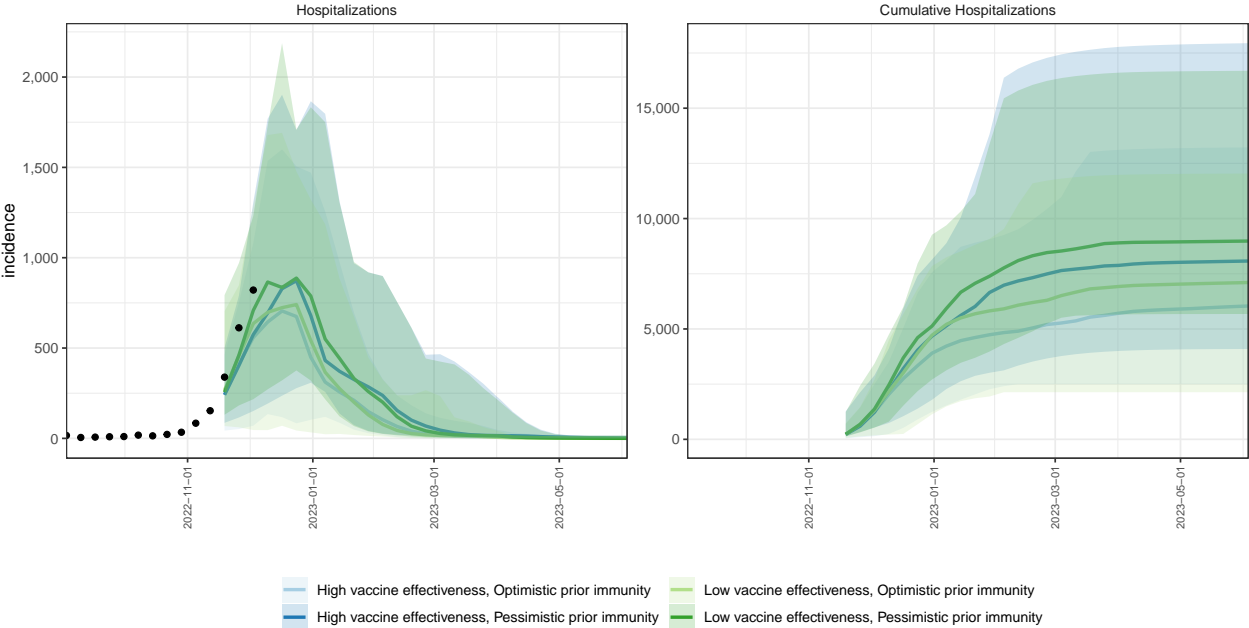
AL ensemble projections & 95% projection intervals



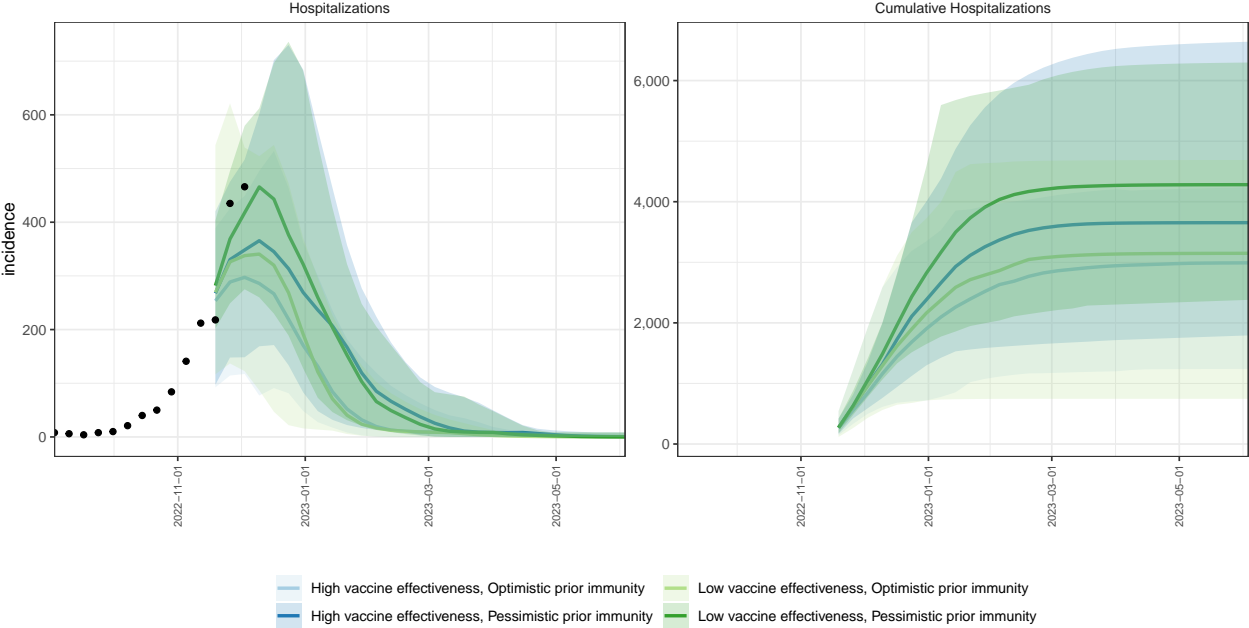
AK ensemble projections & 95% projection intervals



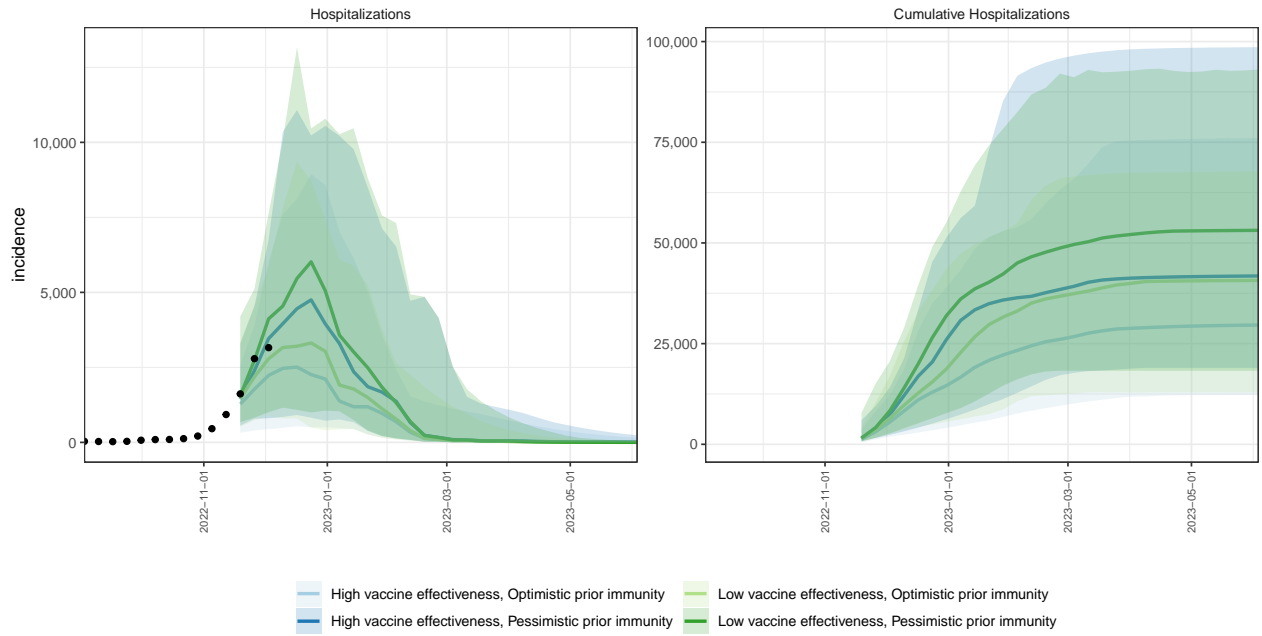
AZ ensemble projections & 95% projection intervals



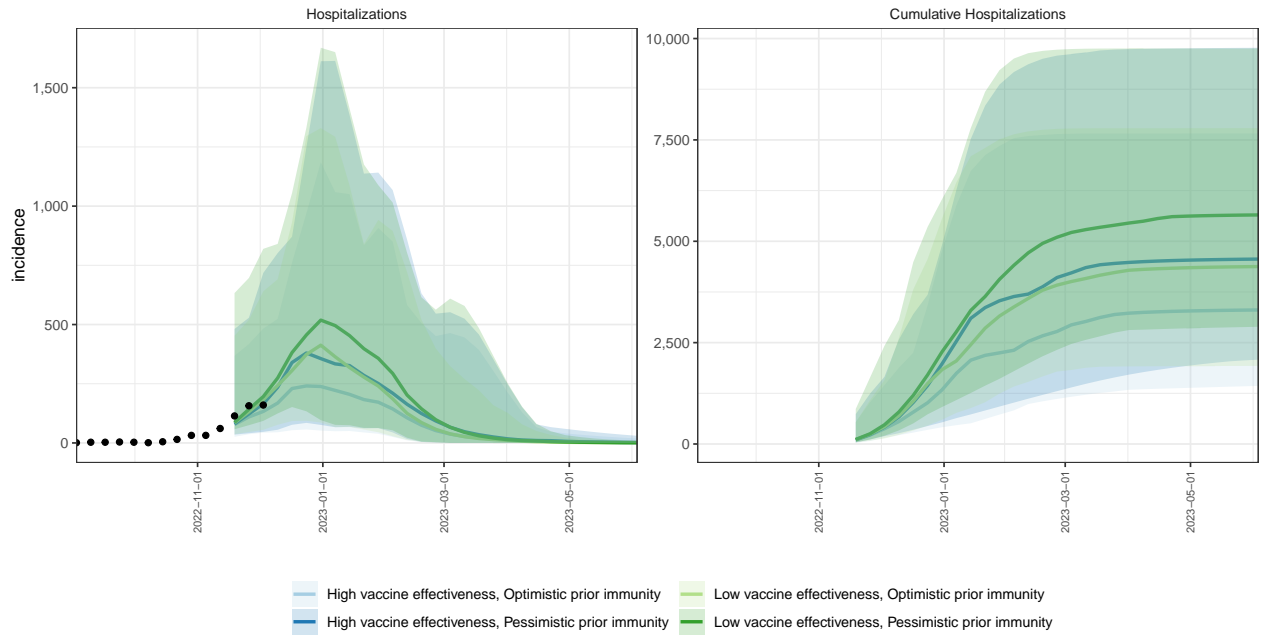
AR ensemble projections & 95% projection intervals



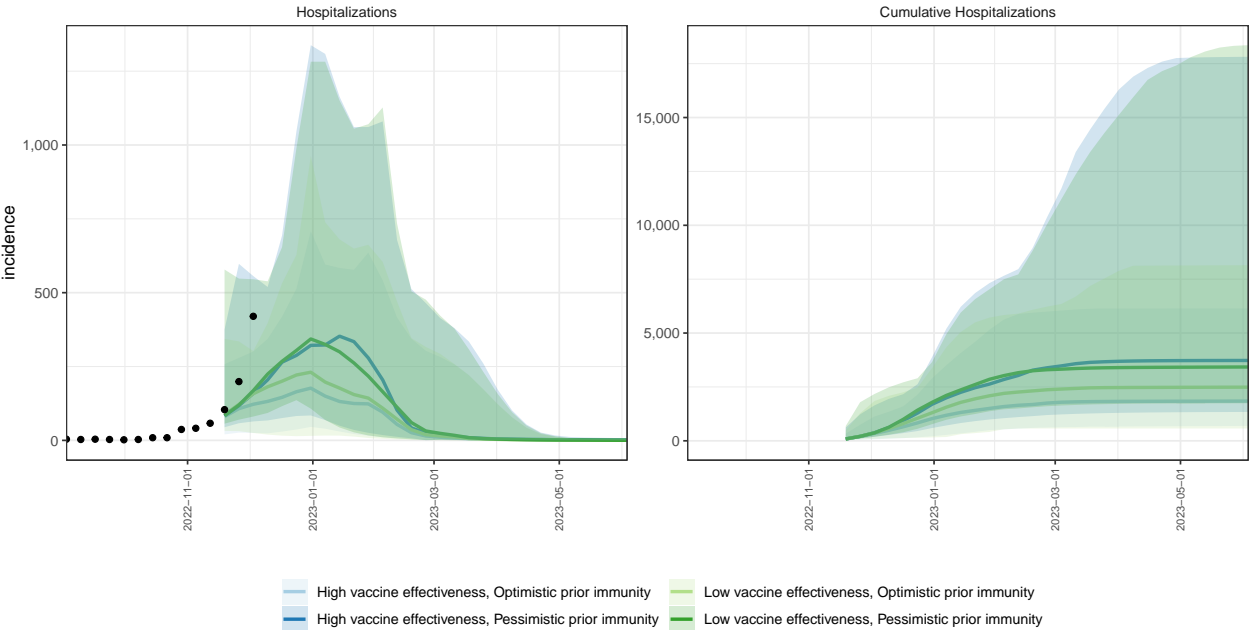
CA ensemble projections & 95% projection intervals



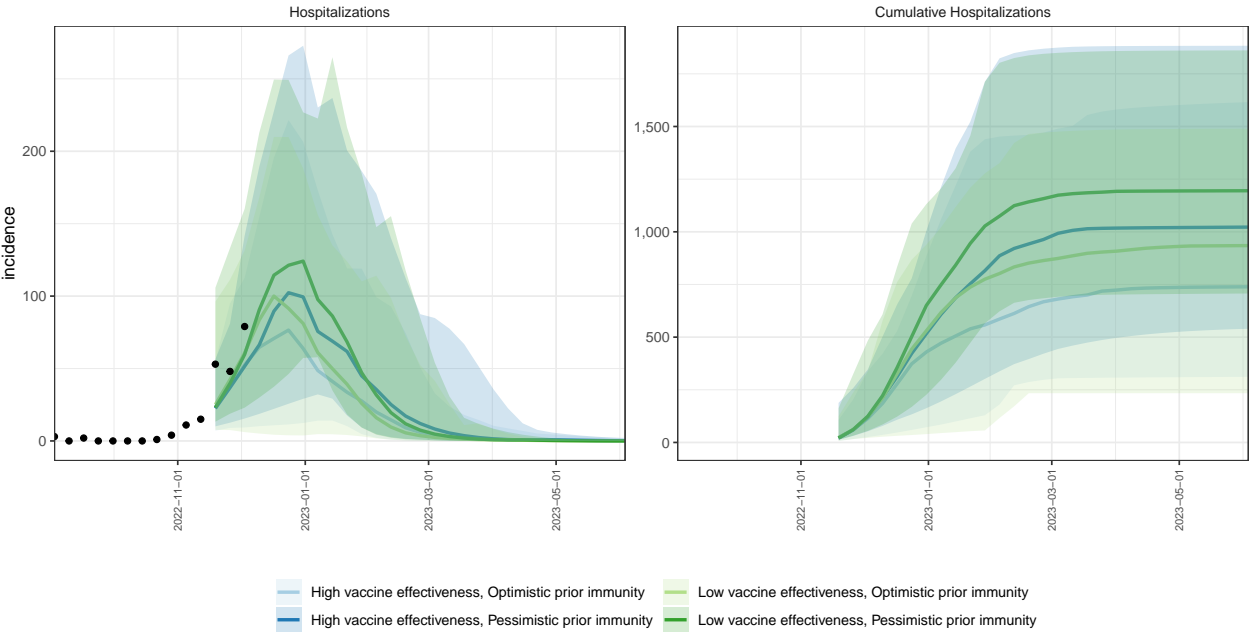
CO ensemble projections & 95% projection intervals



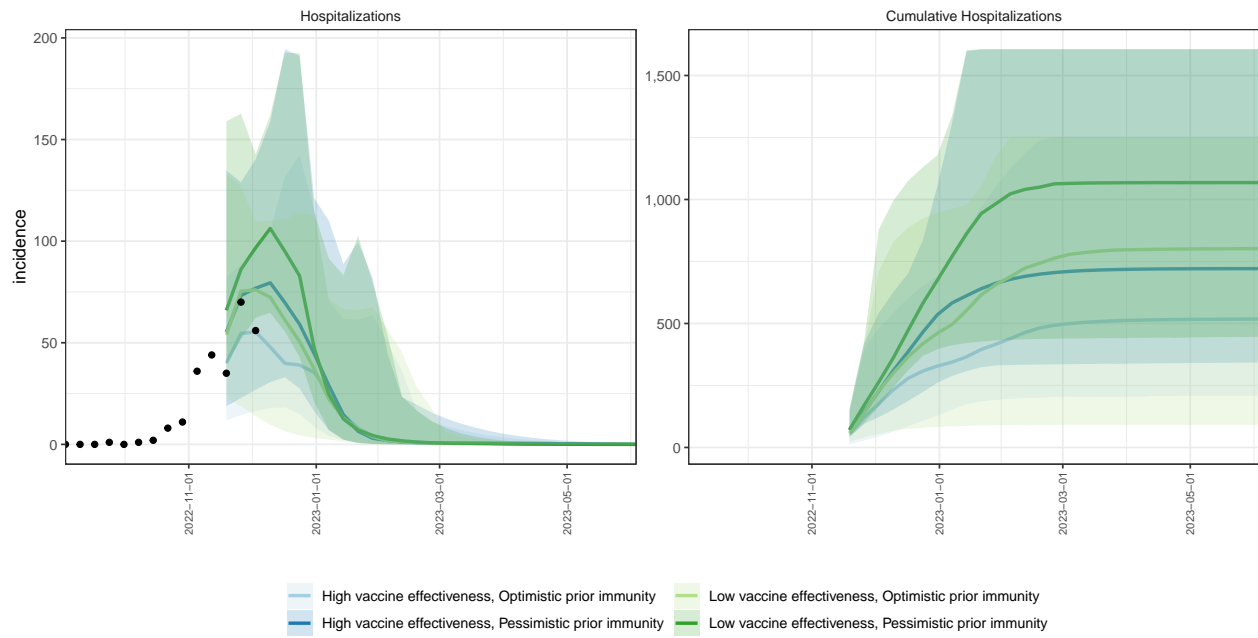
CT ensemble projections & 95% projection intervals



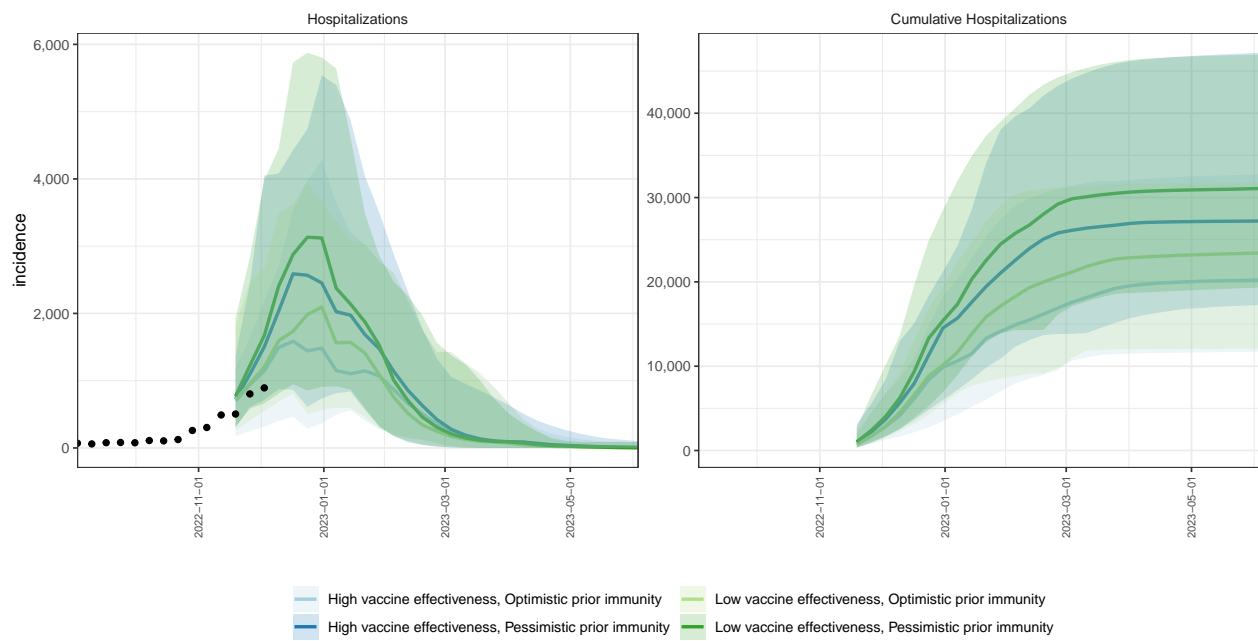
DE ensemble projections & 95% projection intervals



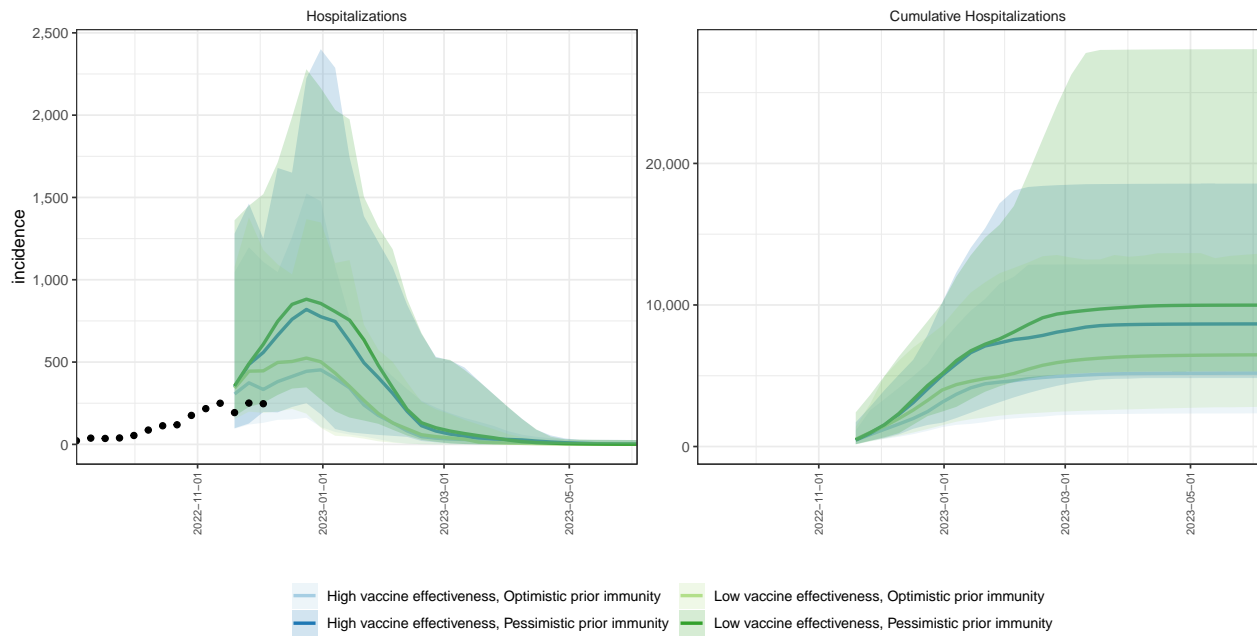
DC ensemble projections & 95% projection intervals



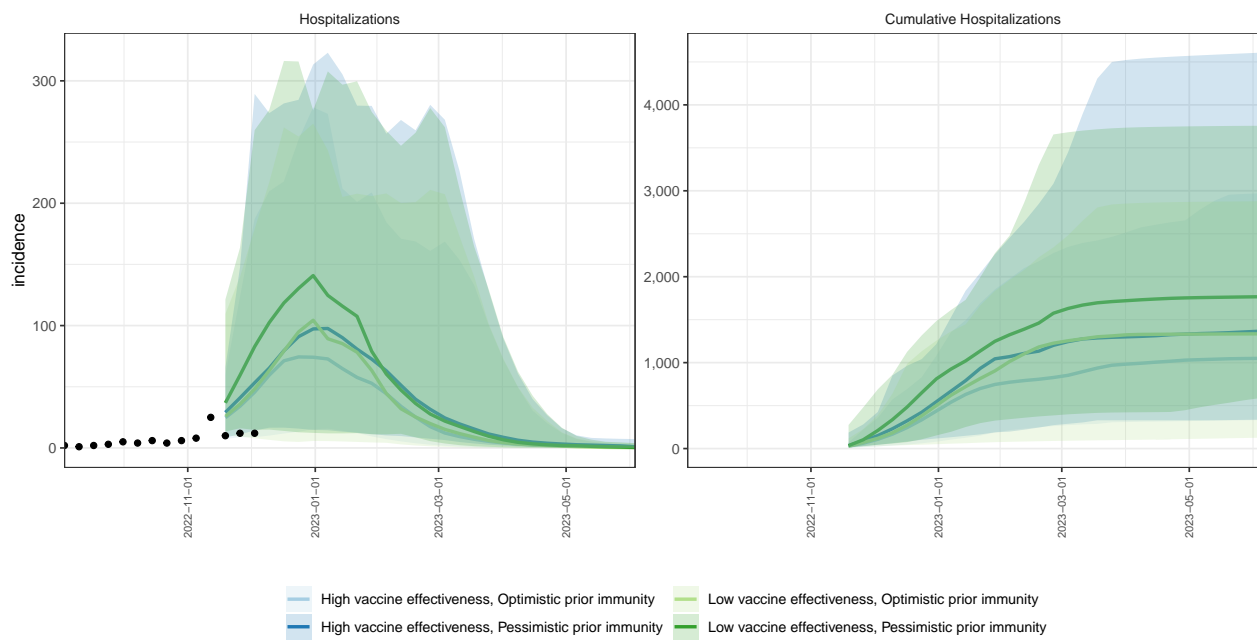
FL ensemble projections & 95% projection intervals



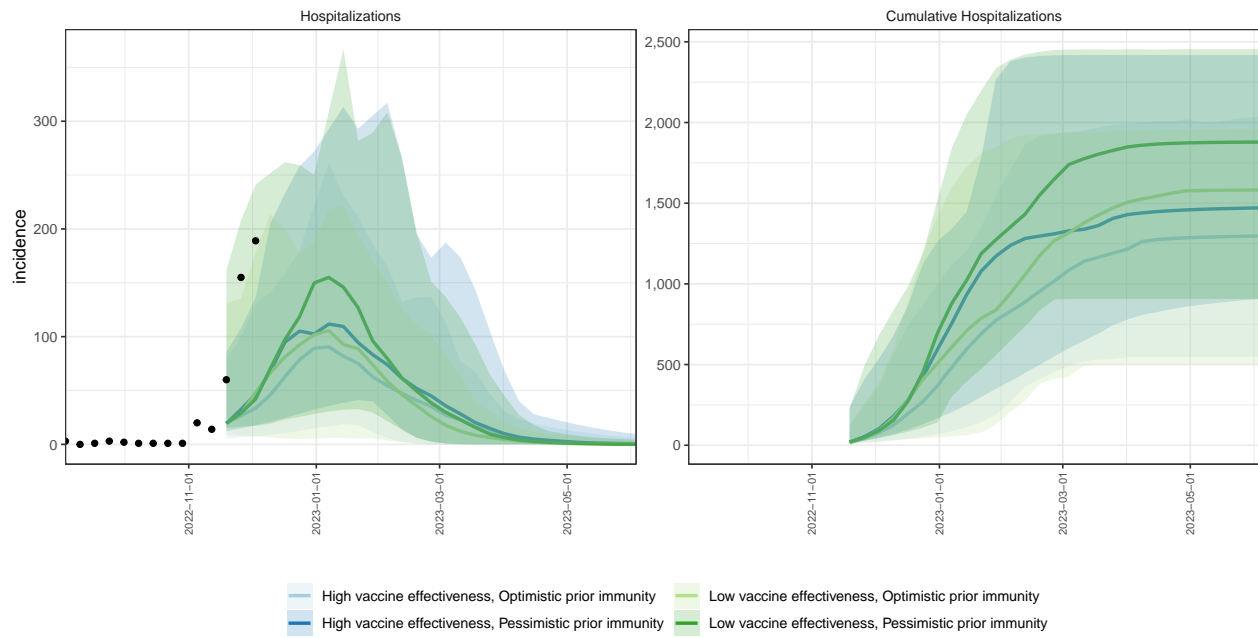
GA ensemble projections & 95% projection intervals



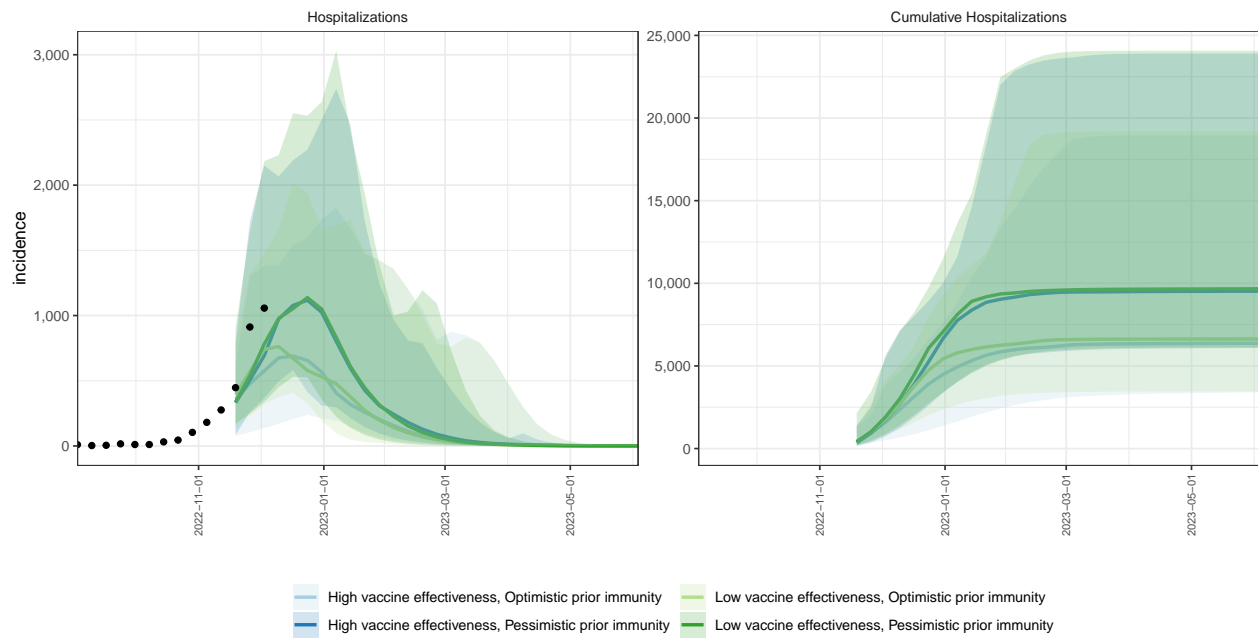
HI ensemble projections & 95% projection intervals



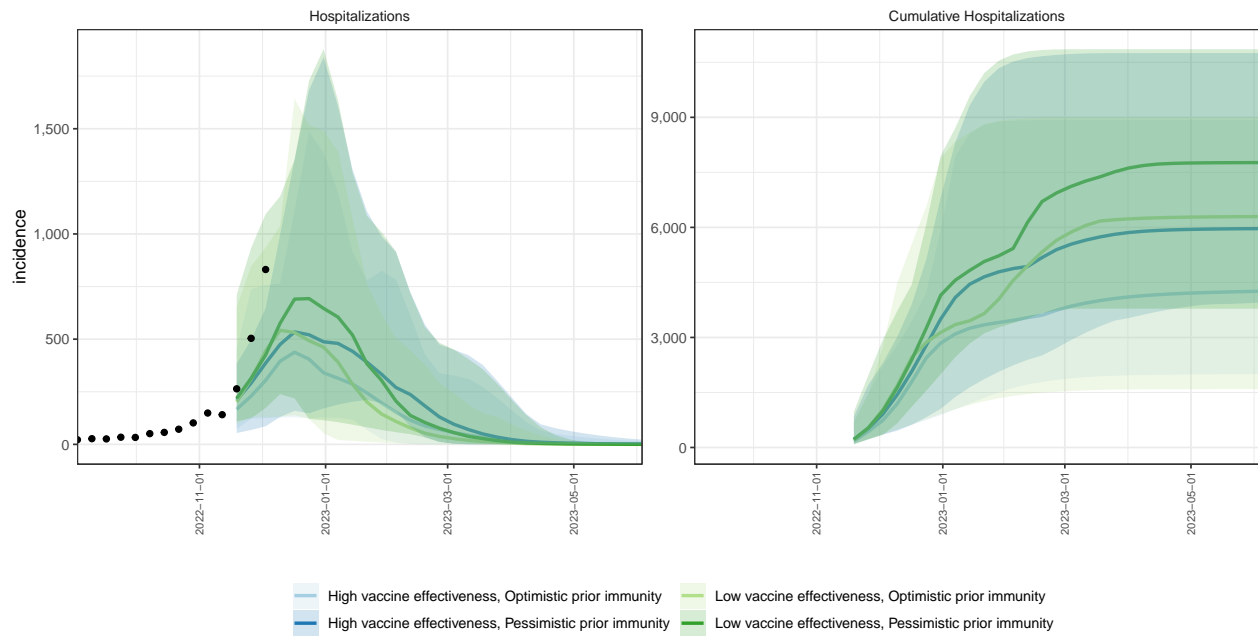
ID ensemble projections & 95% projection intervals



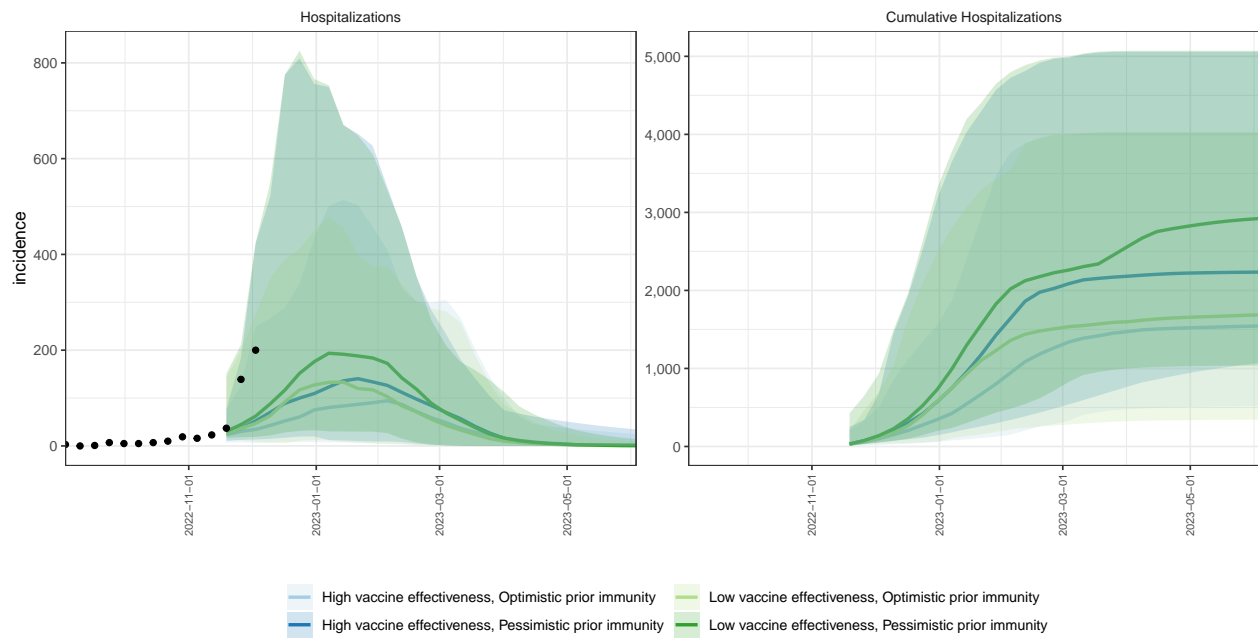
IL ensemble projections & 95% projection intervals



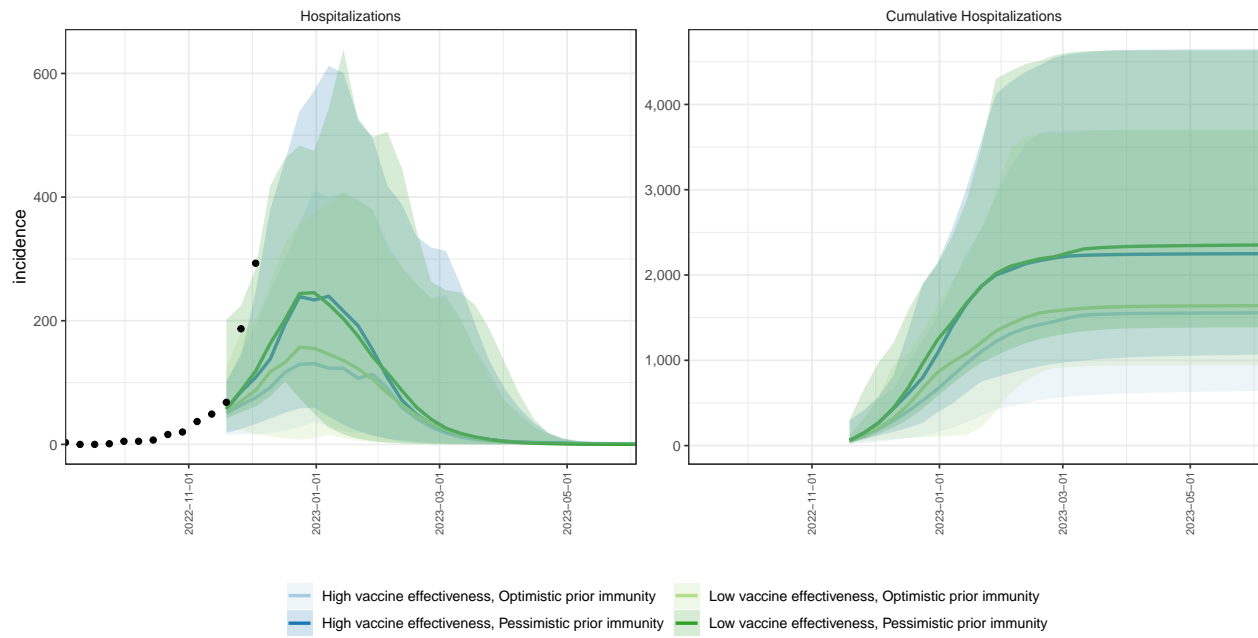
IN ensemble projections & 95% projection intervals



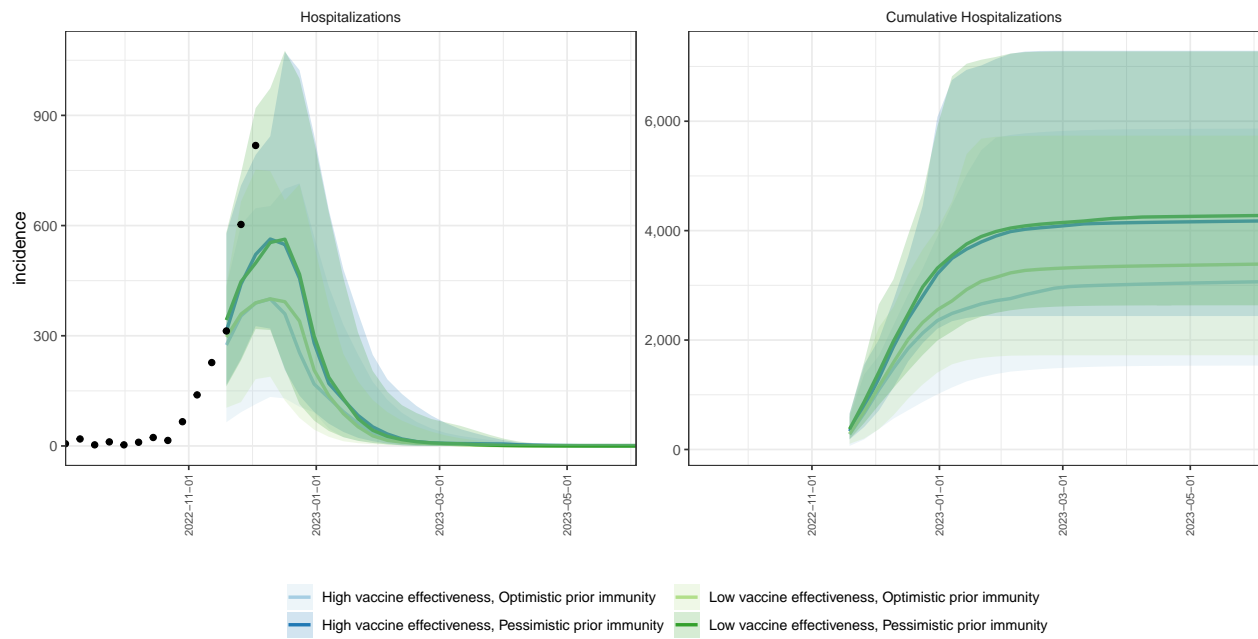
IA ensemble projections & 95% projection intervals



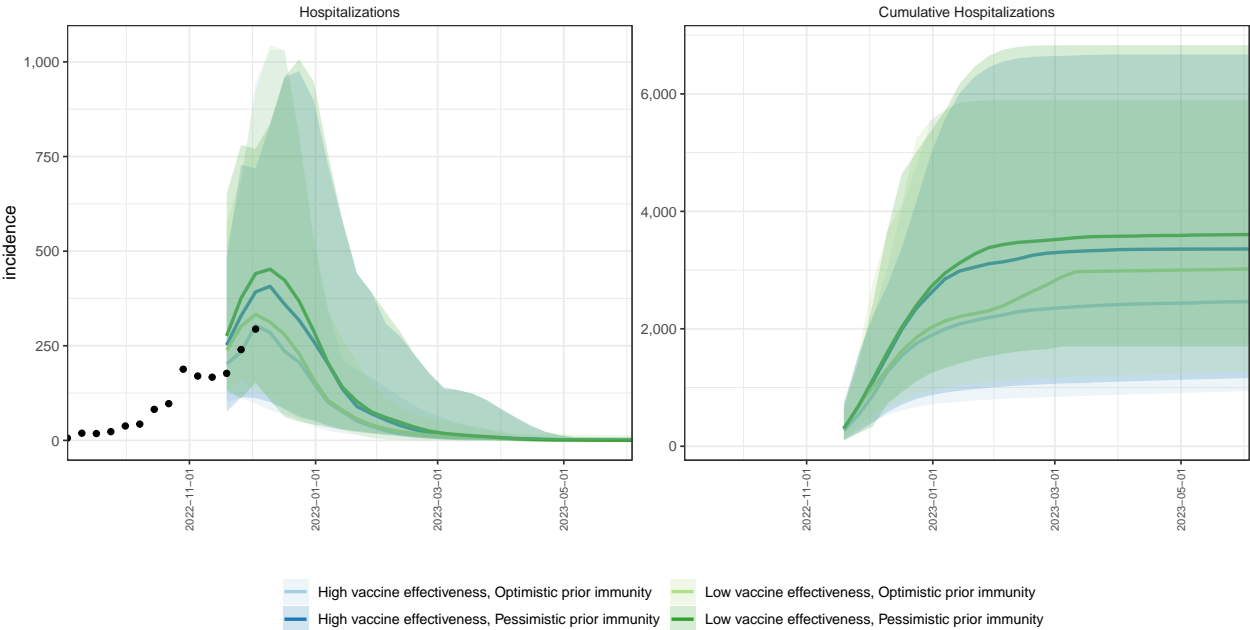
KS ensemble projections & 95% projection intervals



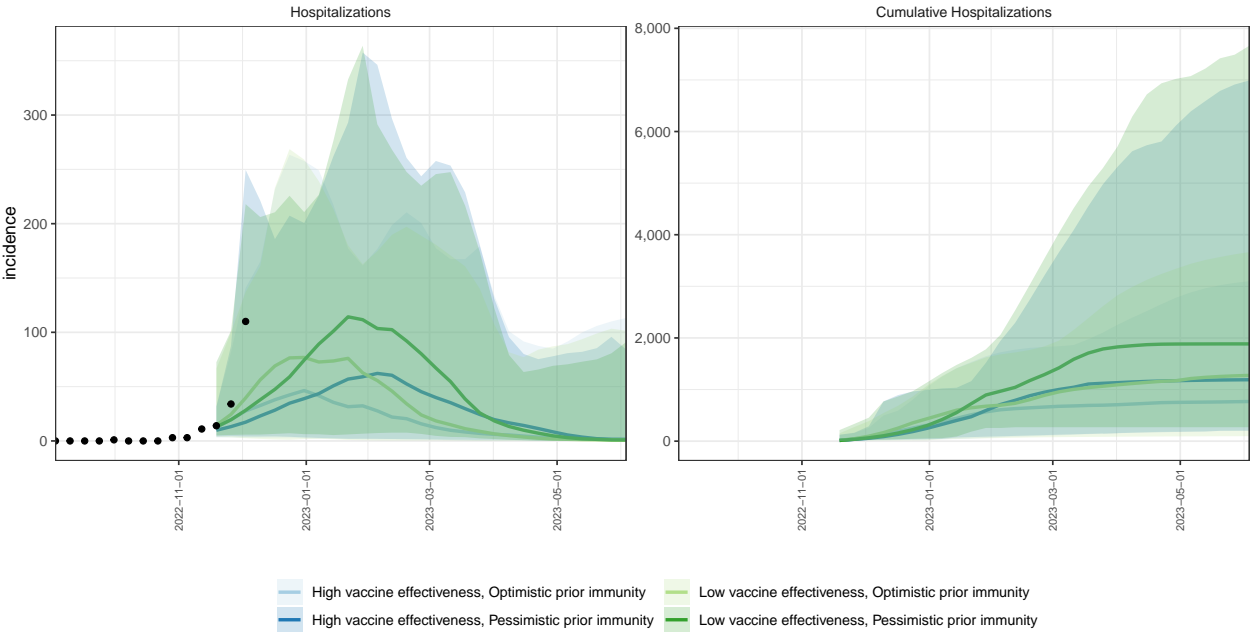
KY ensemble projections & 95% projection intervals



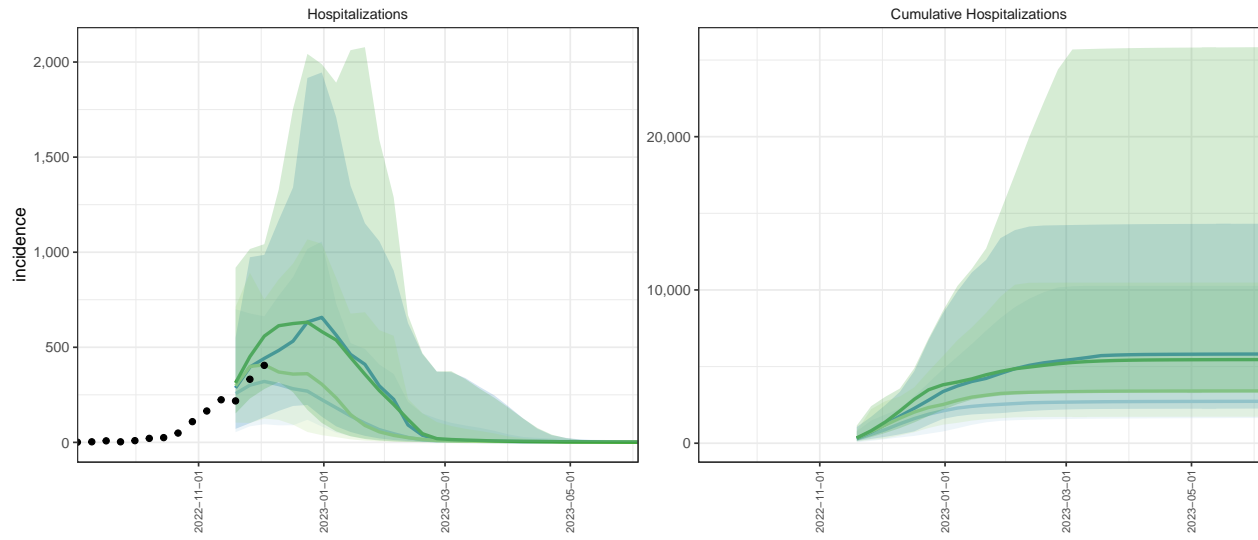
LA ensemble projections & 95% projection intervals



ME ensemble projections & 95% projection intervals

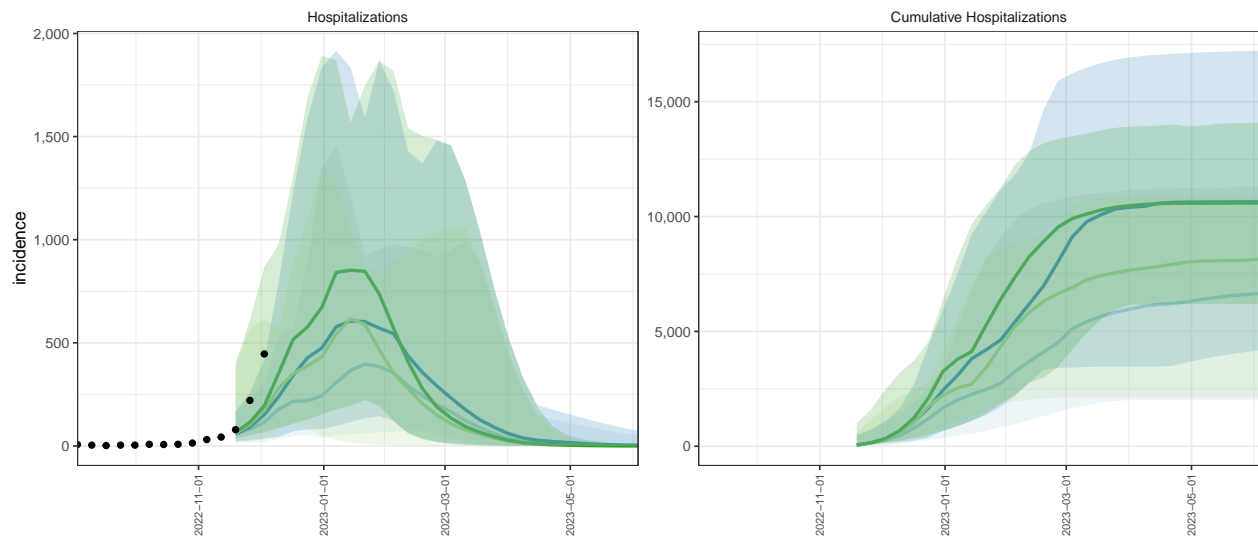


MD ensemble projections & 95% projection intervals



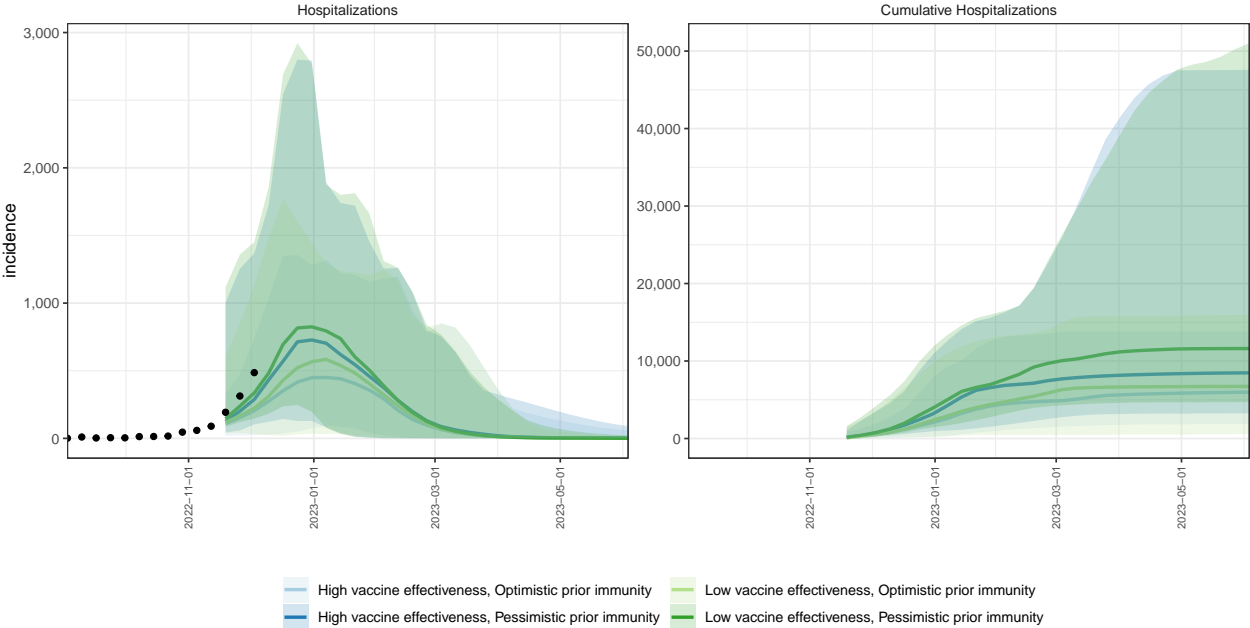
— High vaccine effectiveness, Optimistic prior immunity — Low vaccine effectiveness, Optimistic prior immunity
— High vaccine effectiveness, Pessimistic prior immunity — Low vaccine effectiveness, Pessimistic prior immunity

MA ensemble projections & 95% projection intervals

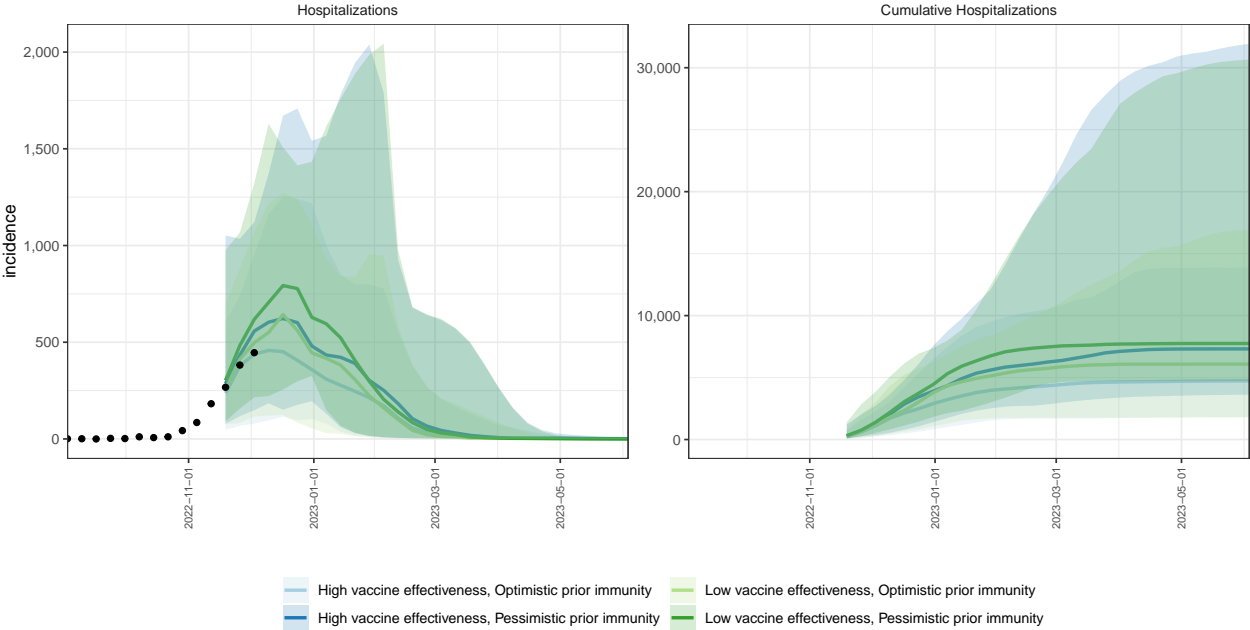


— High vaccine effectiveness, Optimistic prior immunity — Low vaccine effectiveness, Optimistic prior immunity
— High vaccine effectiveness, Pessimistic prior immunity — Low vaccine effectiveness, Pessimistic prior immunity

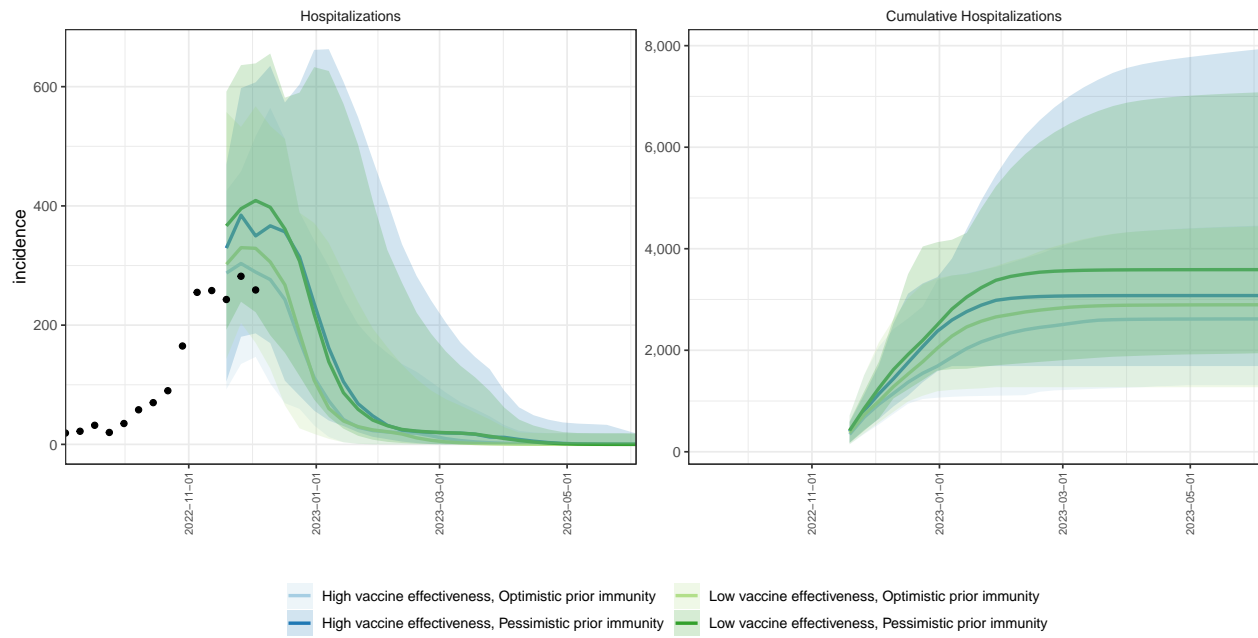
MI ensemble projections & 95% projection intervals



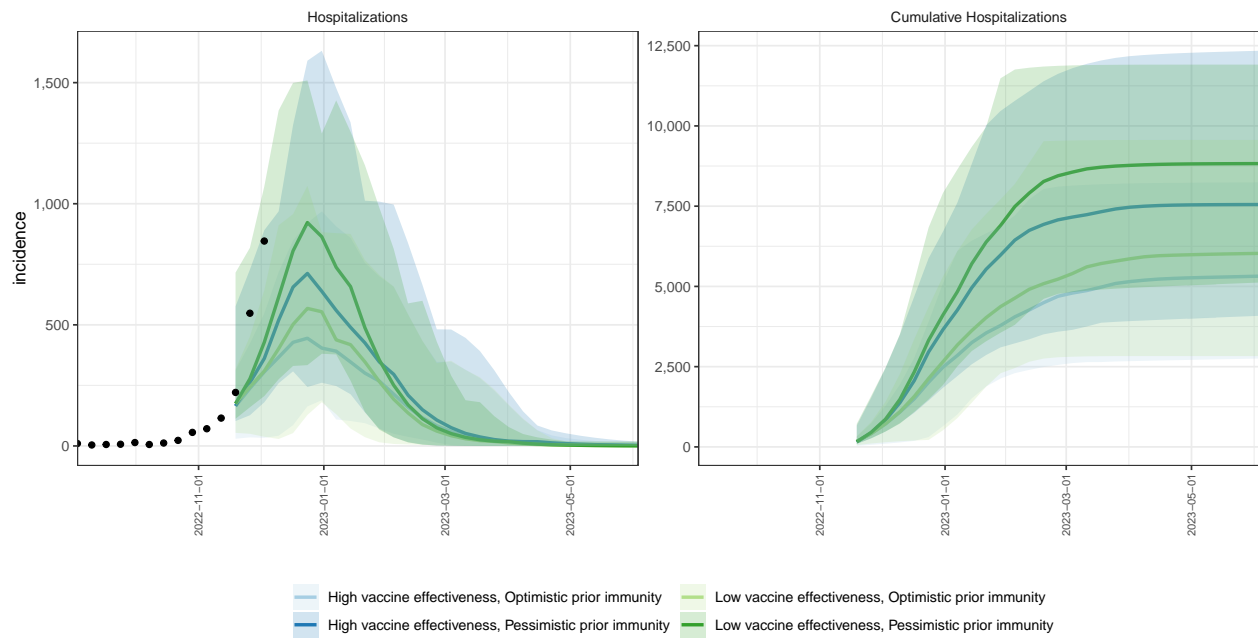
MN ensemble projections & 95% projection intervals



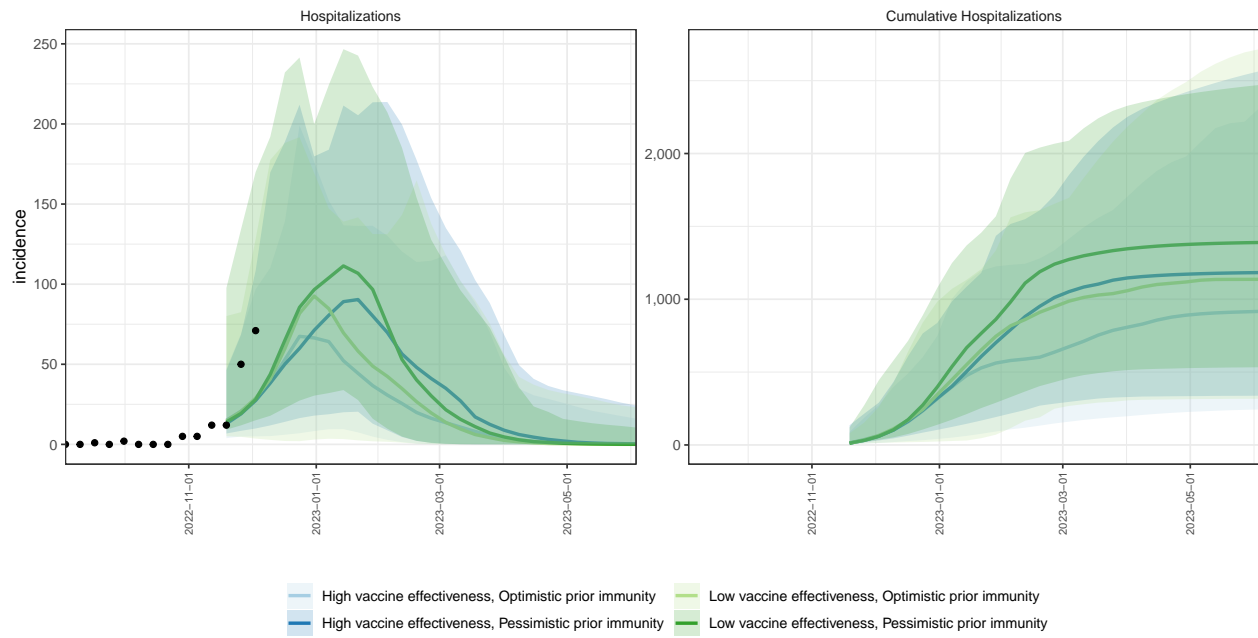
MS ensemble projections & 95% projection intervals



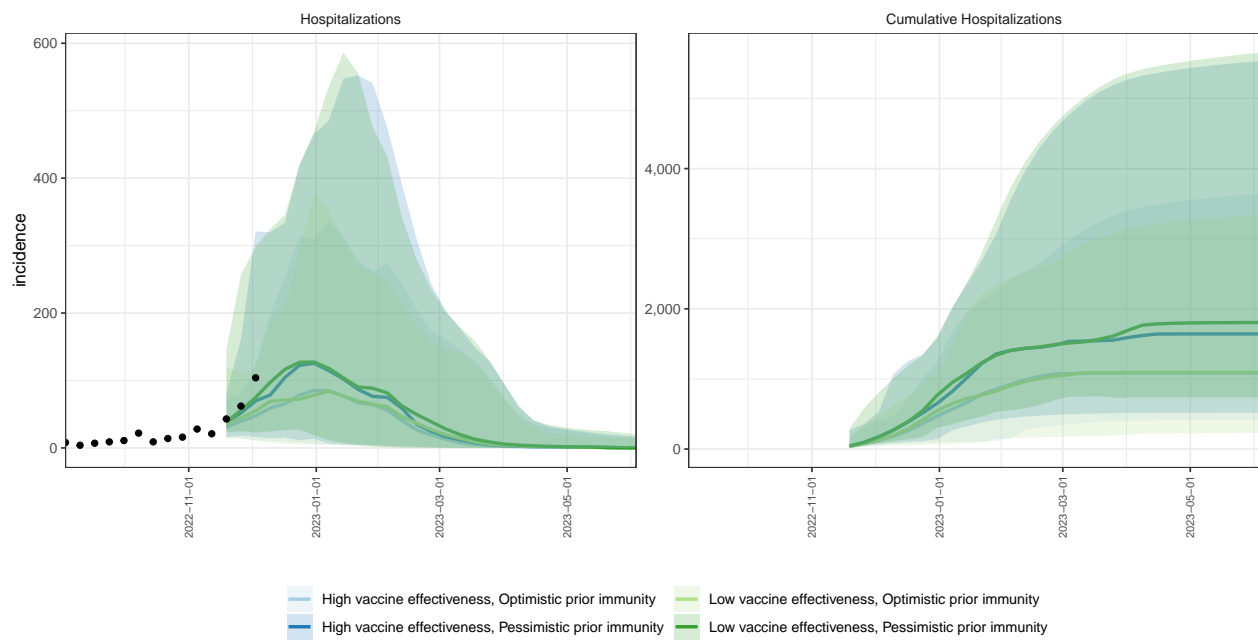
MO ensemble projections & 95% projection intervals



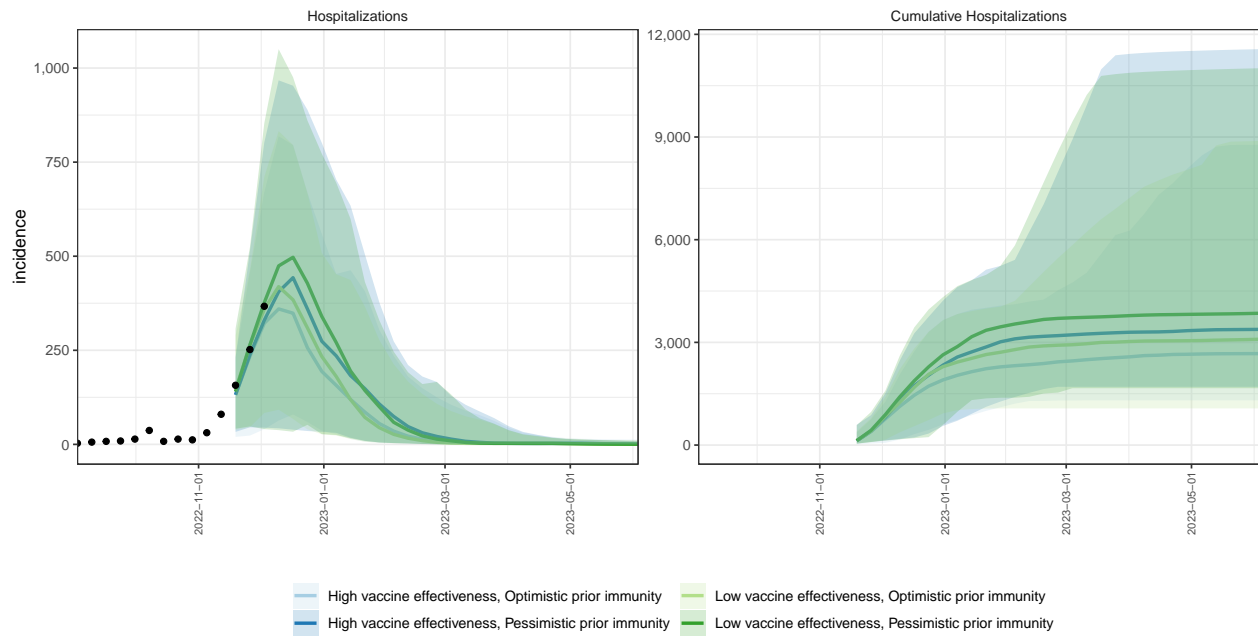
MT ensemble projections & 95% projection intervals



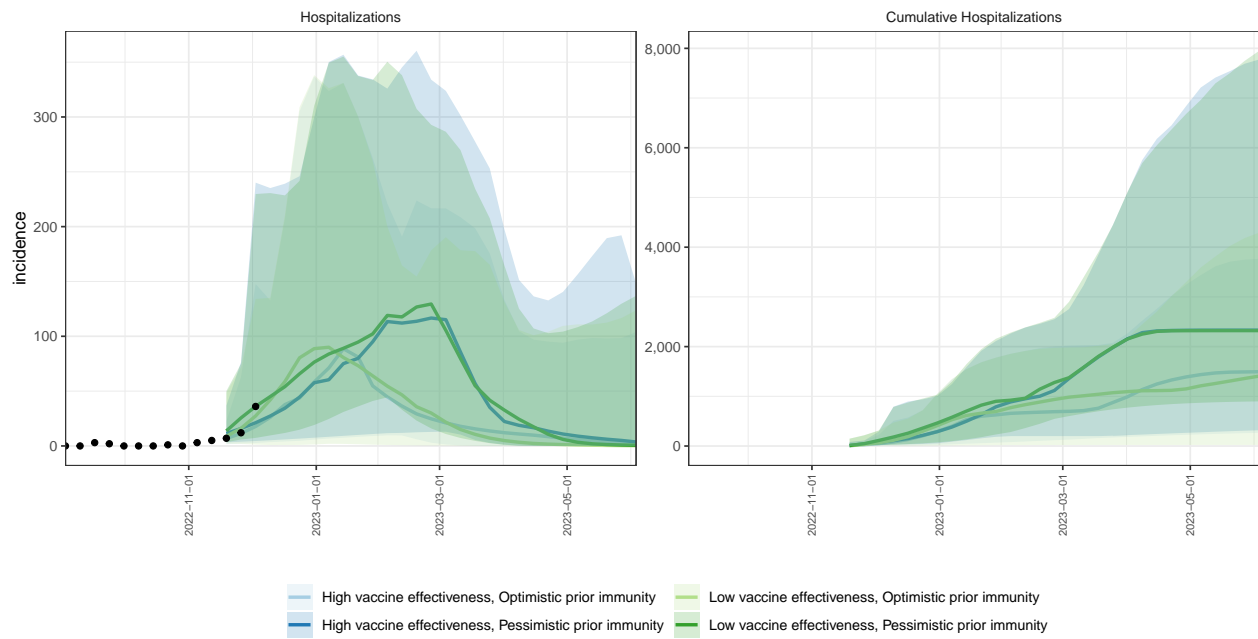
NE ensemble projections & 95% projection intervals



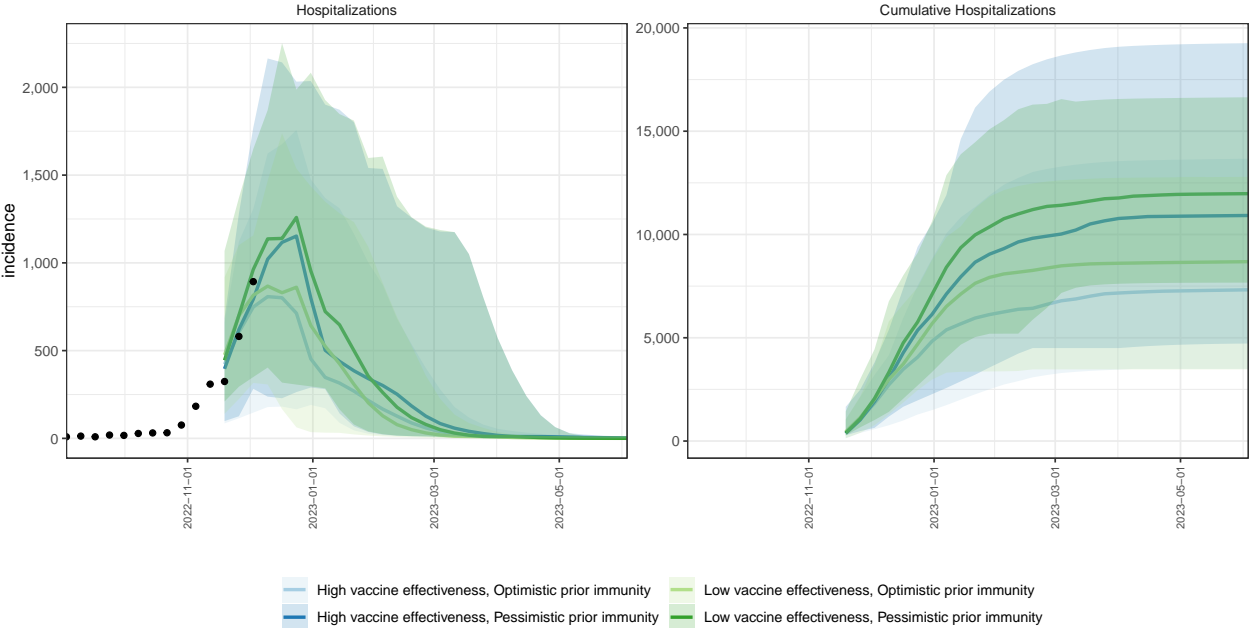
NV ensemble projections & 95% projection intervals



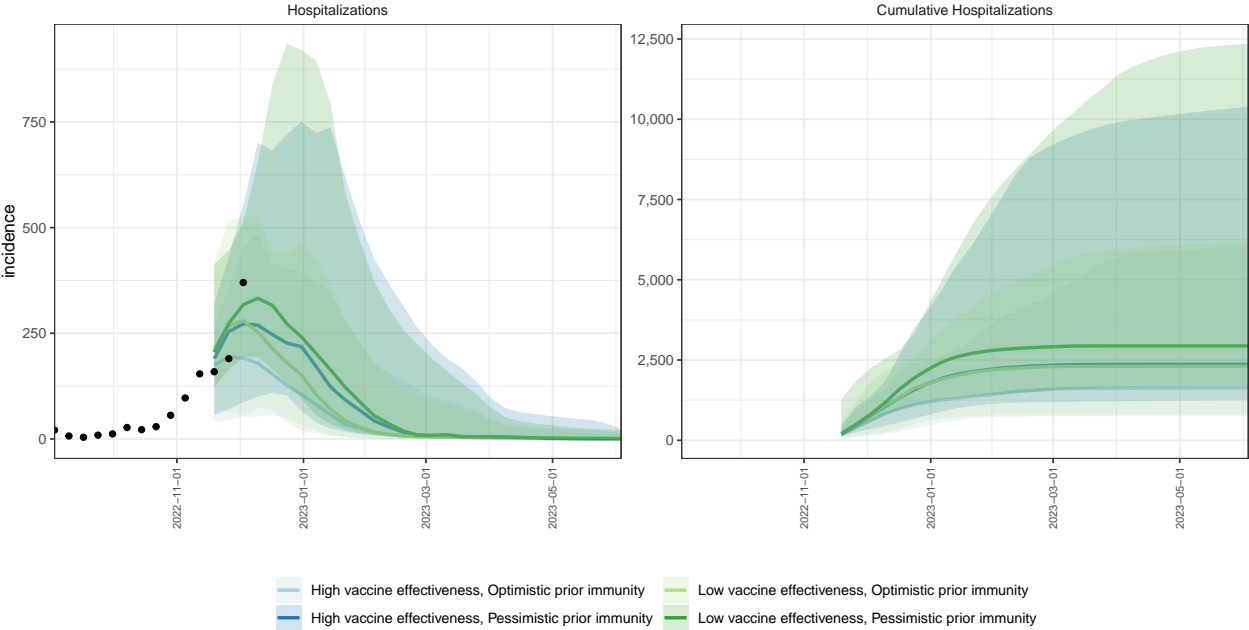
NH ensemble projections & 95% projection intervals



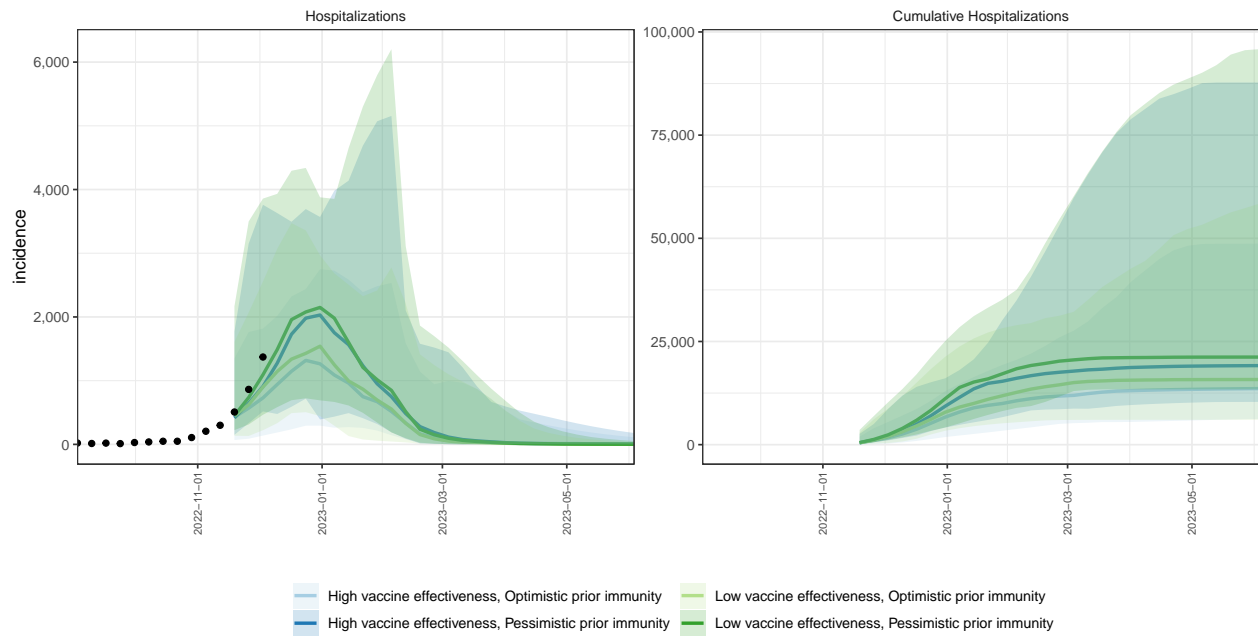
NJ ensemble projections & 95% projection intervals



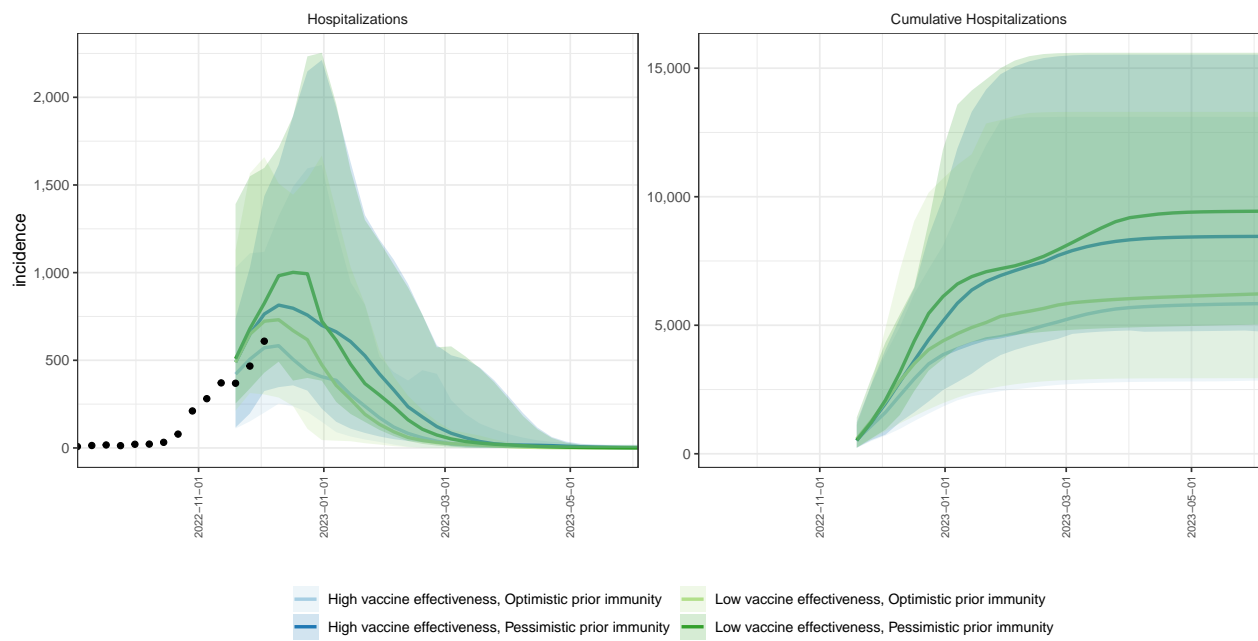
NM ensemble projections & 95% projection intervals



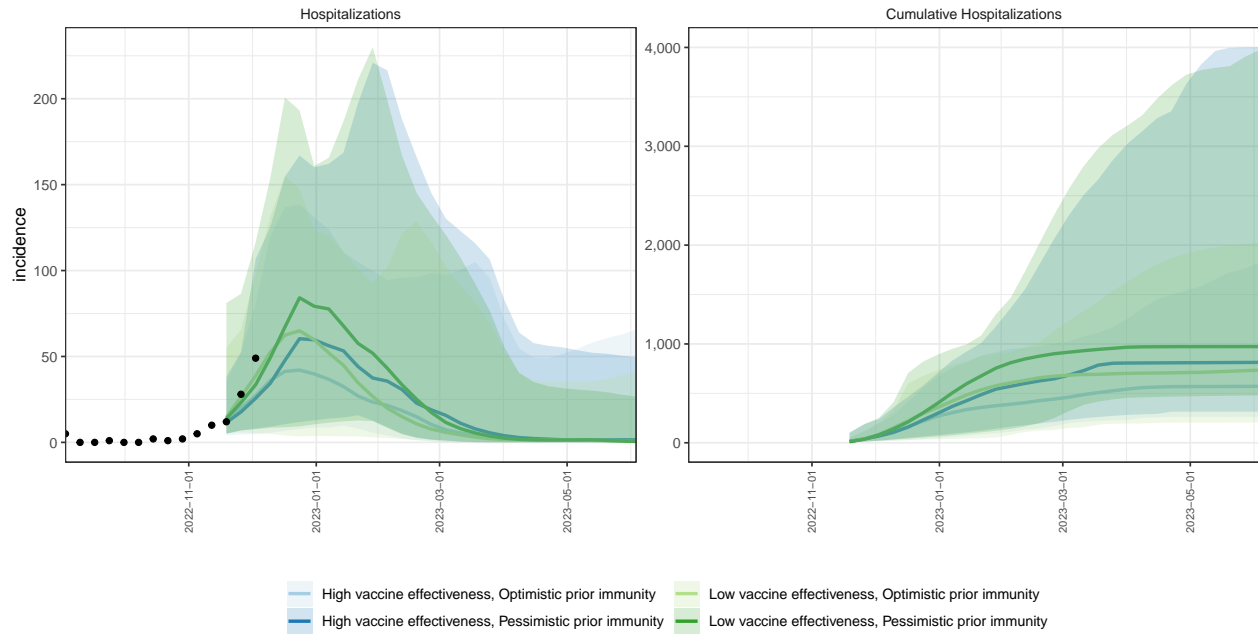
NY ensemble projections & 95% projection intervals



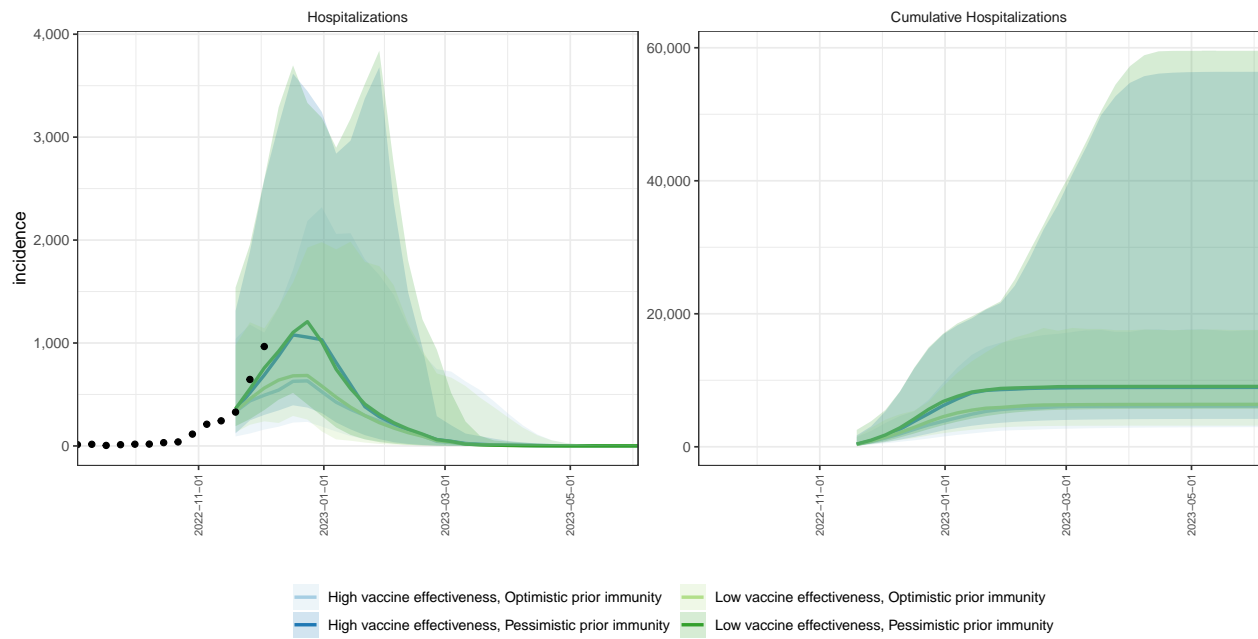
NC ensemble projections & 95% projection intervals



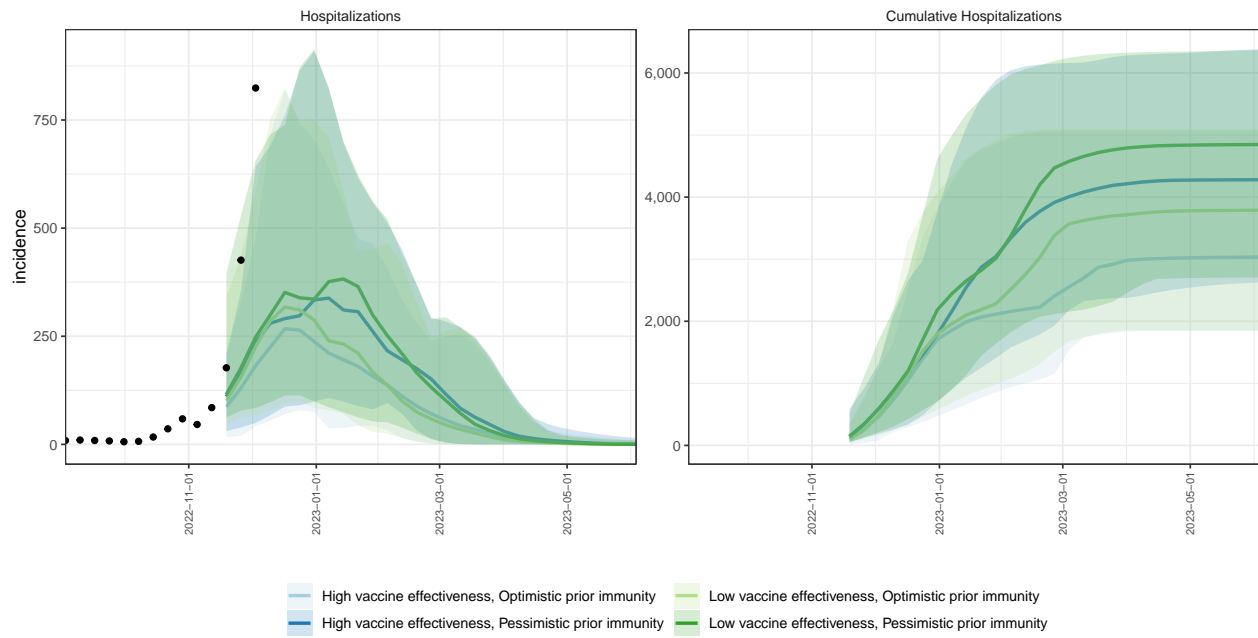
ND ensemble projections & 95% projection intervals



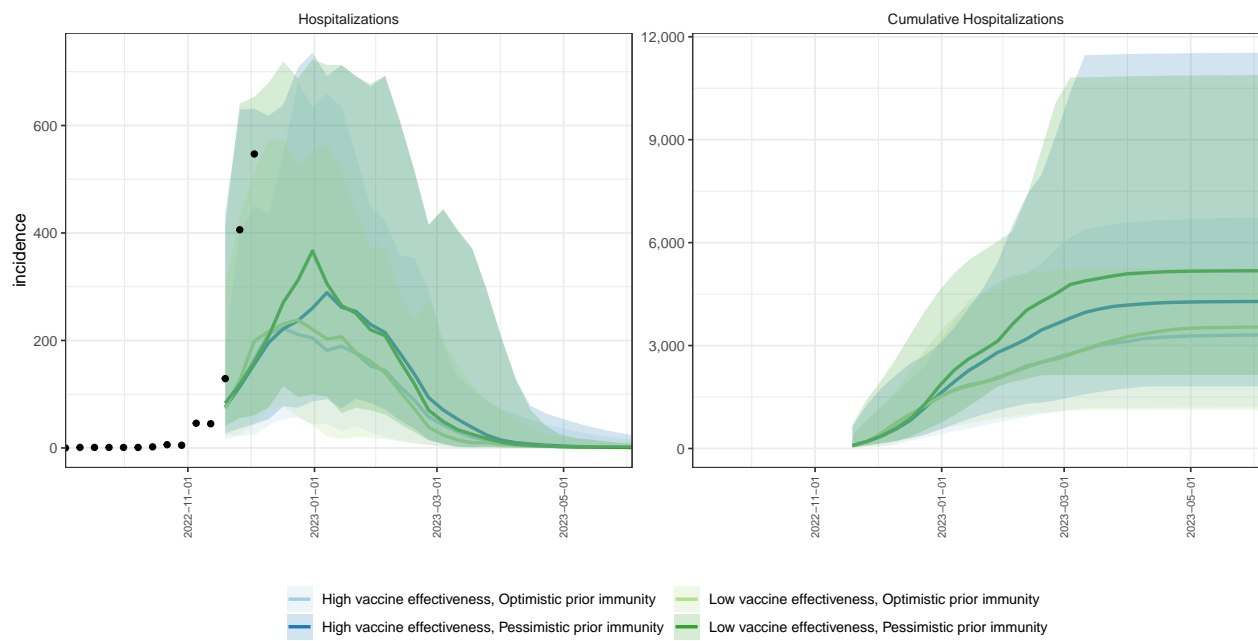
OH ensemble projections & 95% projection intervals



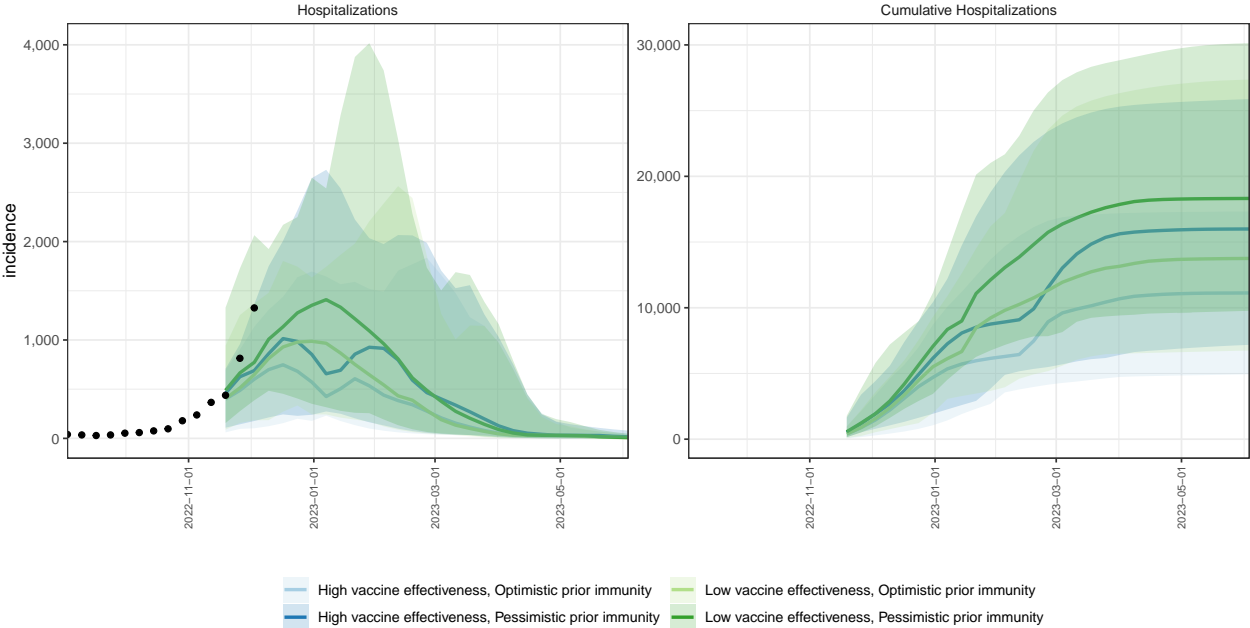
OK ensemble projections & 95% projection intervals



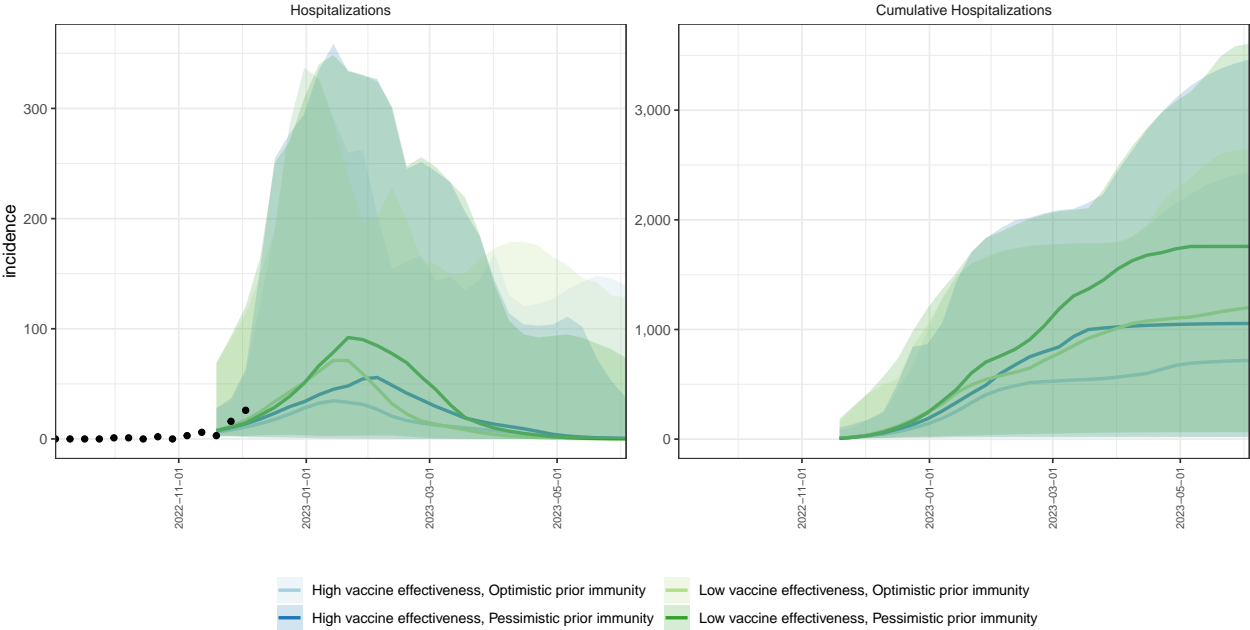
OR ensemble projections & 95% projection intervals



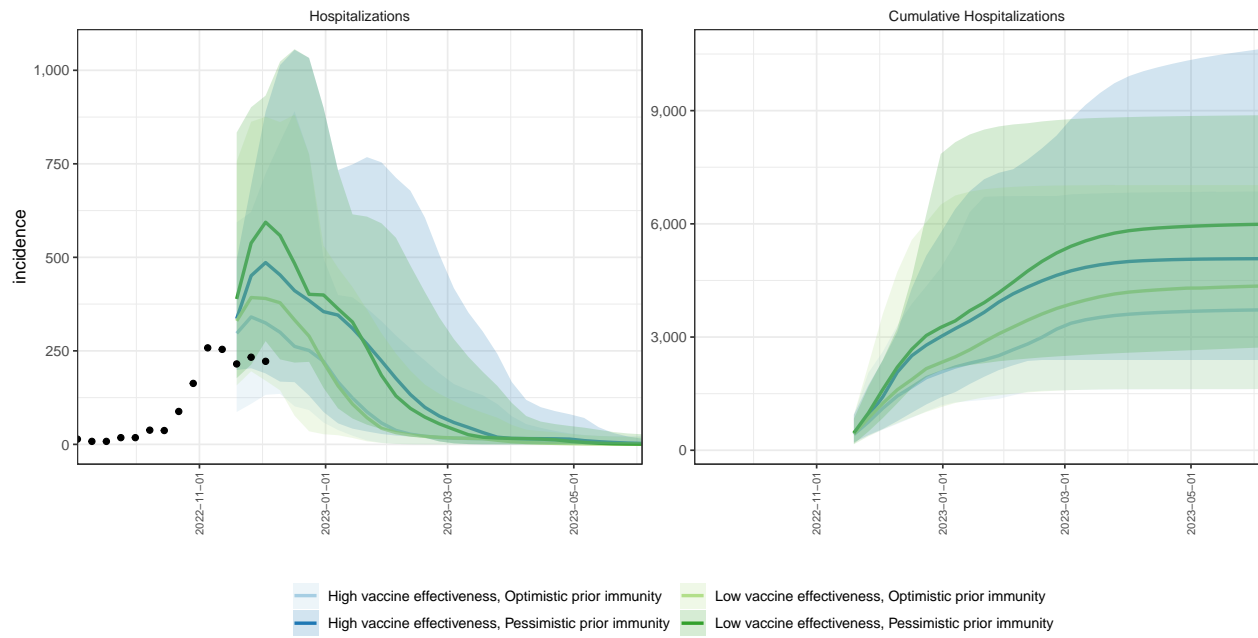
PA ensemble projections & 95% projection intervals



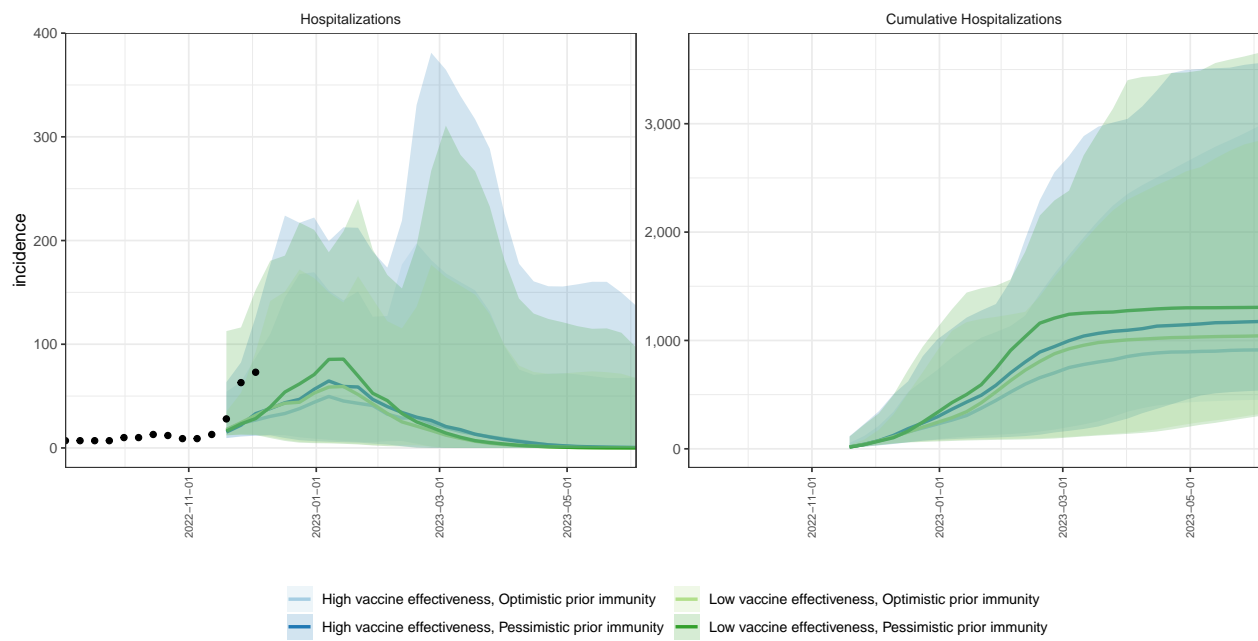
RI ensemble projections & 95% projection intervals



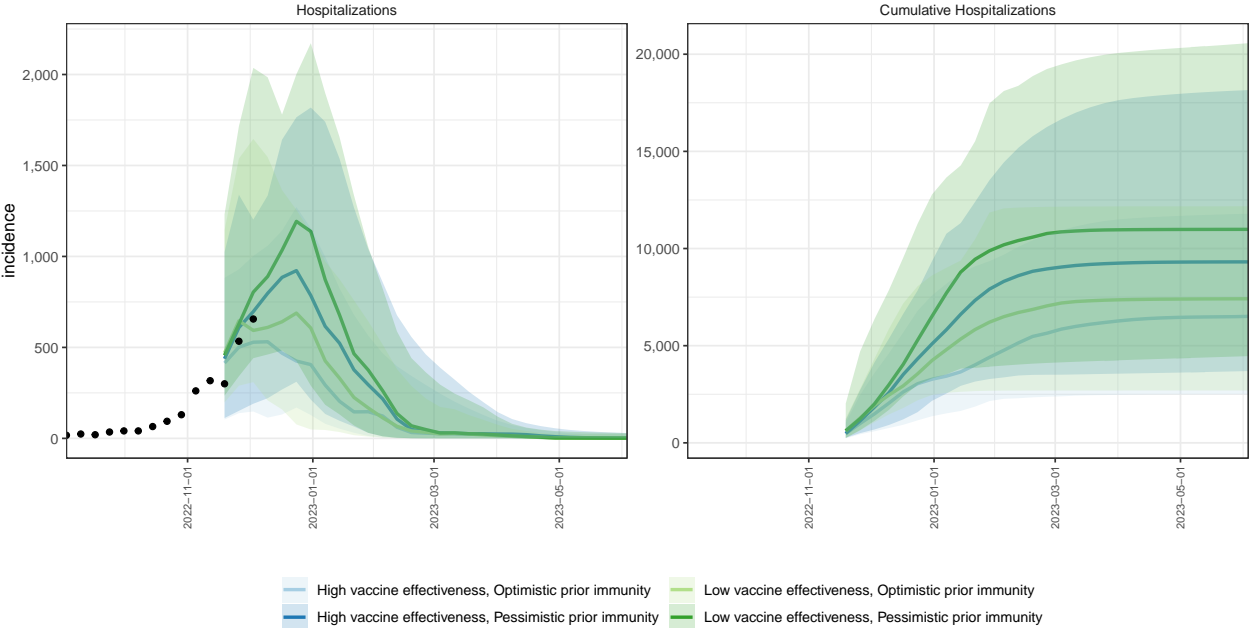
SC ensemble projections & 95% projection intervals



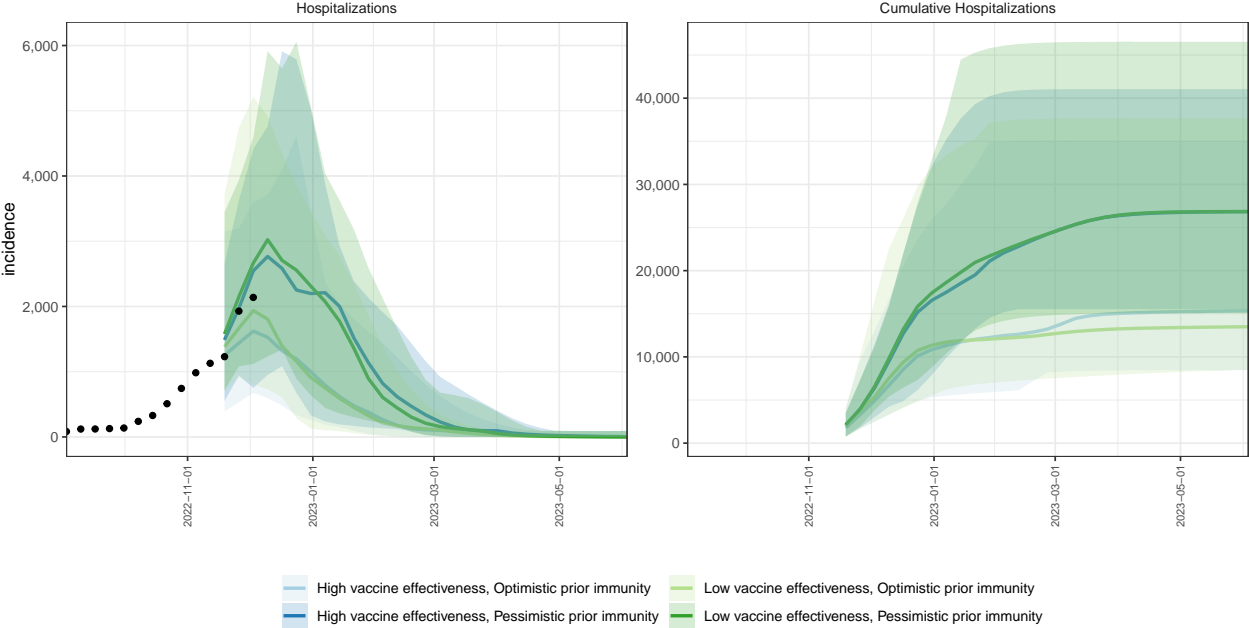
SD ensemble projections & 95% projection intervals



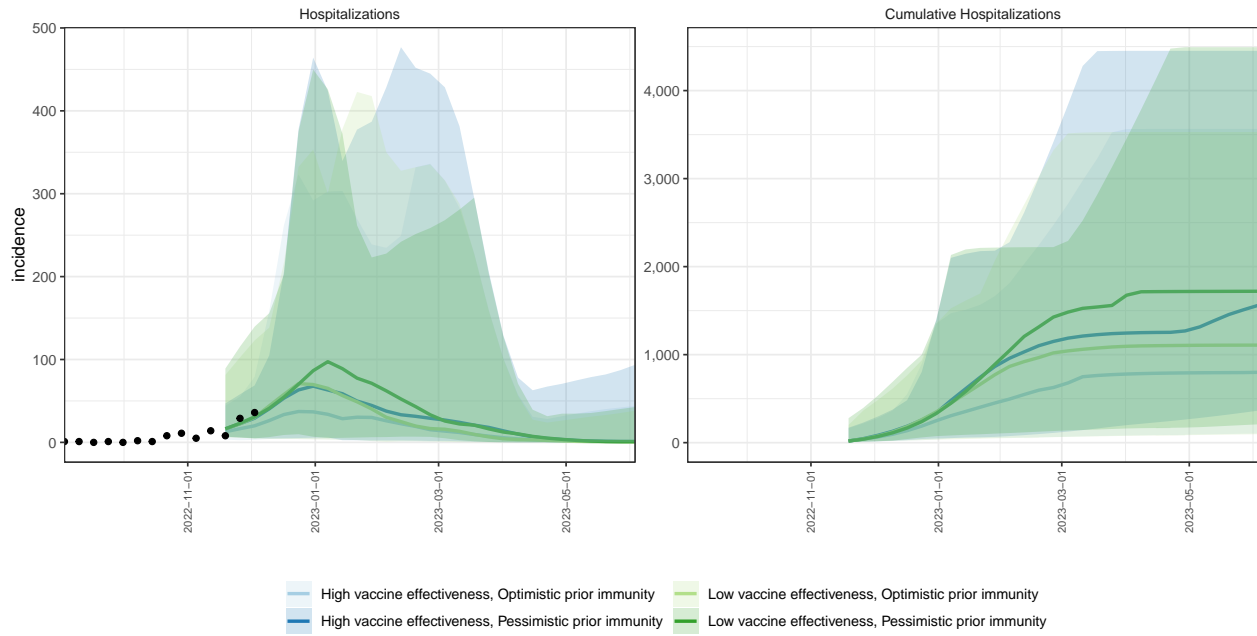
TN ensemble projections & 95% projection intervals



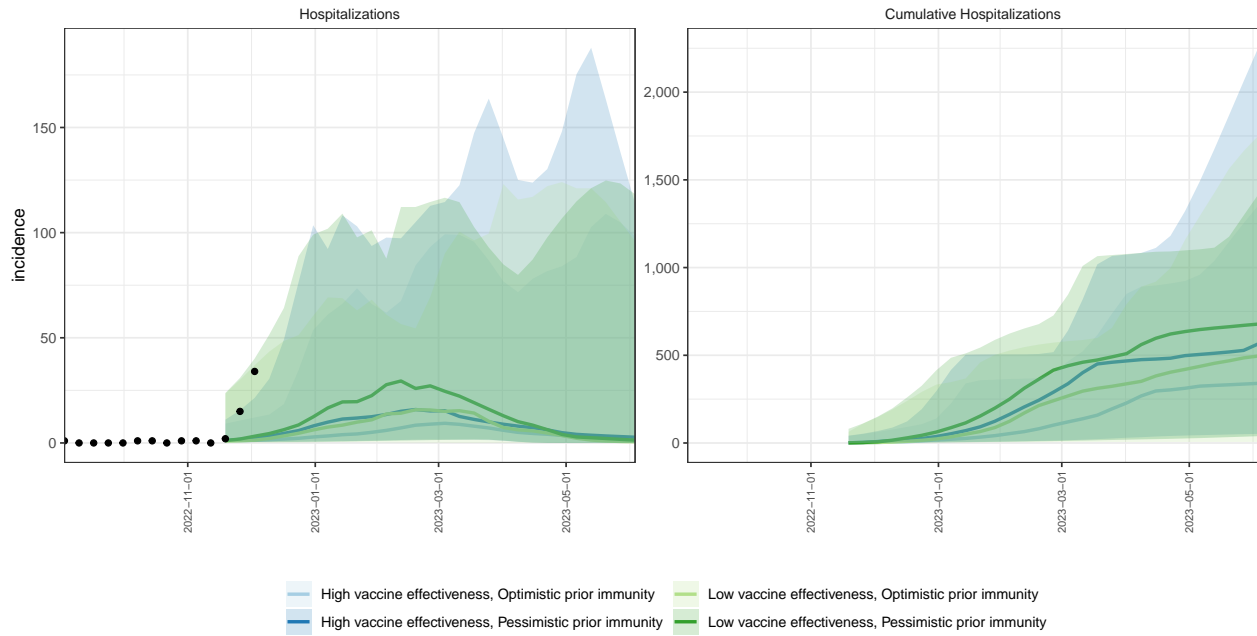
TX ensemble projections & 95% projection intervals



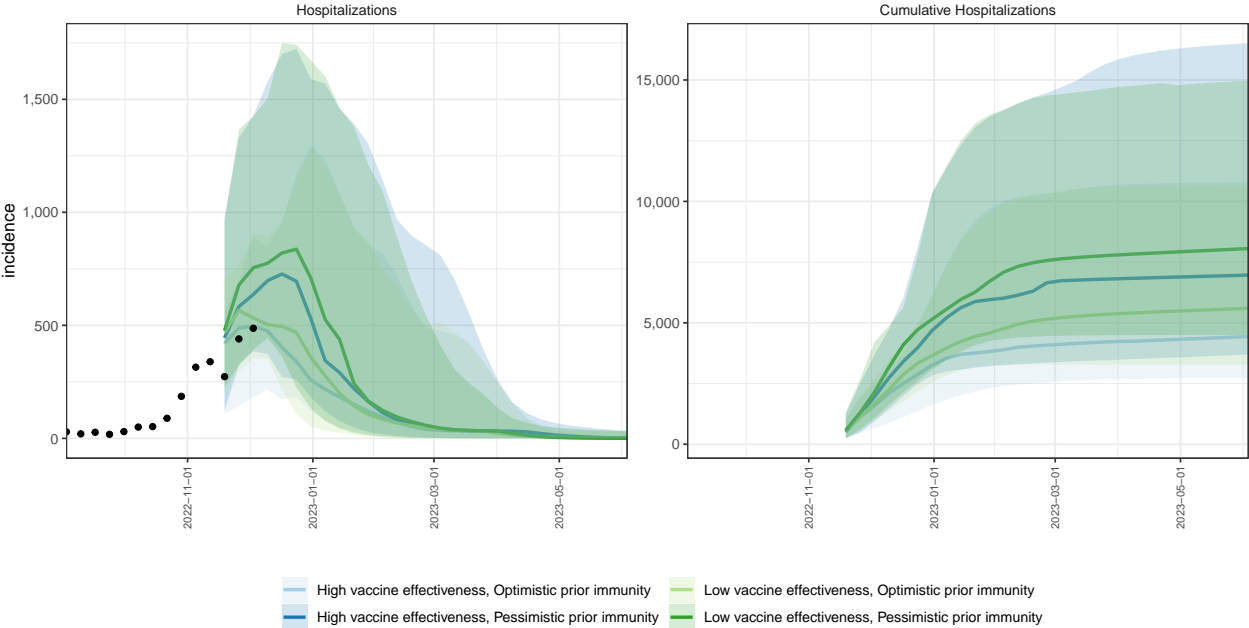
UT ensemble projections & 95% projection intervals



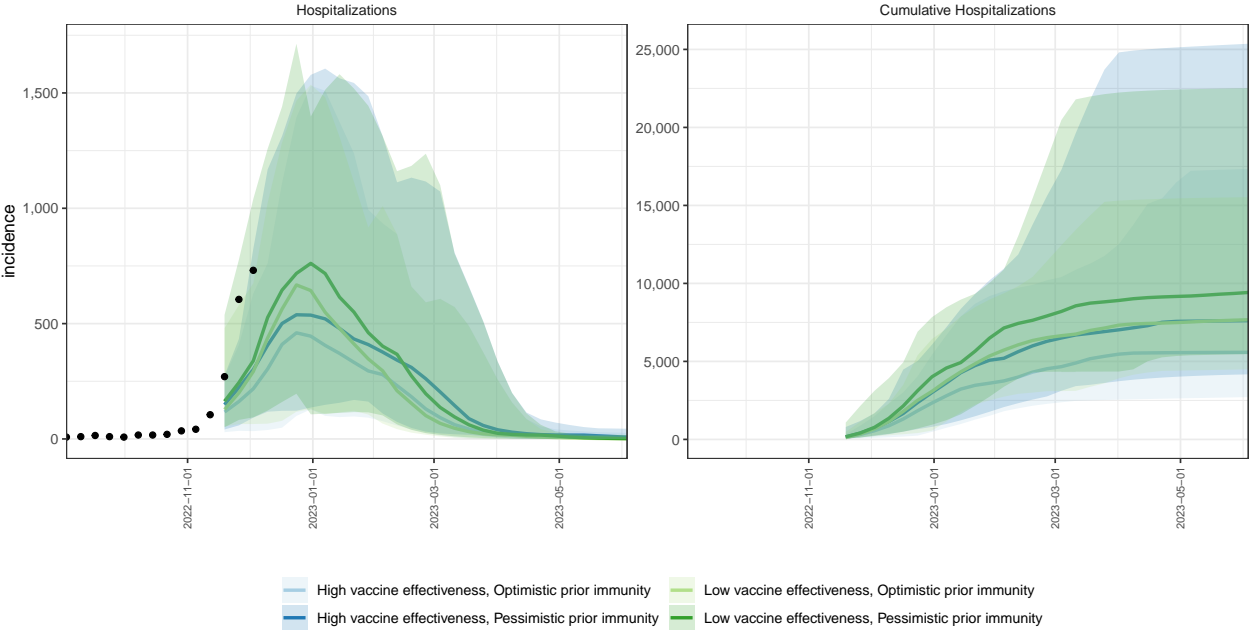
VT ensemble projections & 95% projection intervals



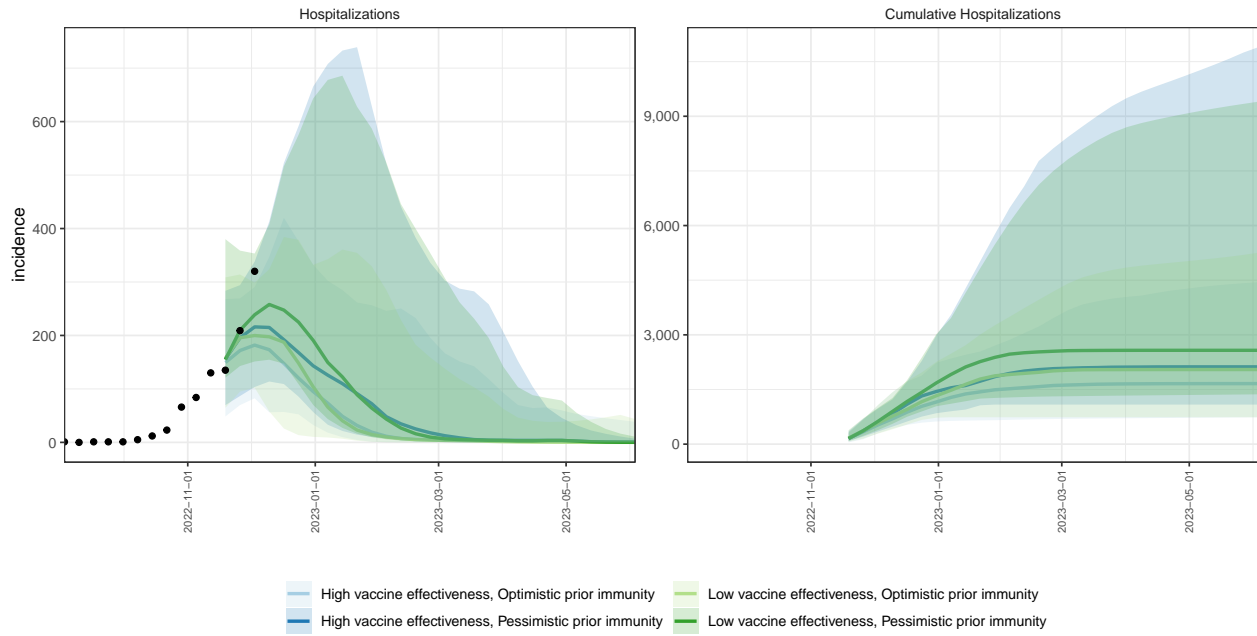
VA ensemble projections & 95% projection intervals



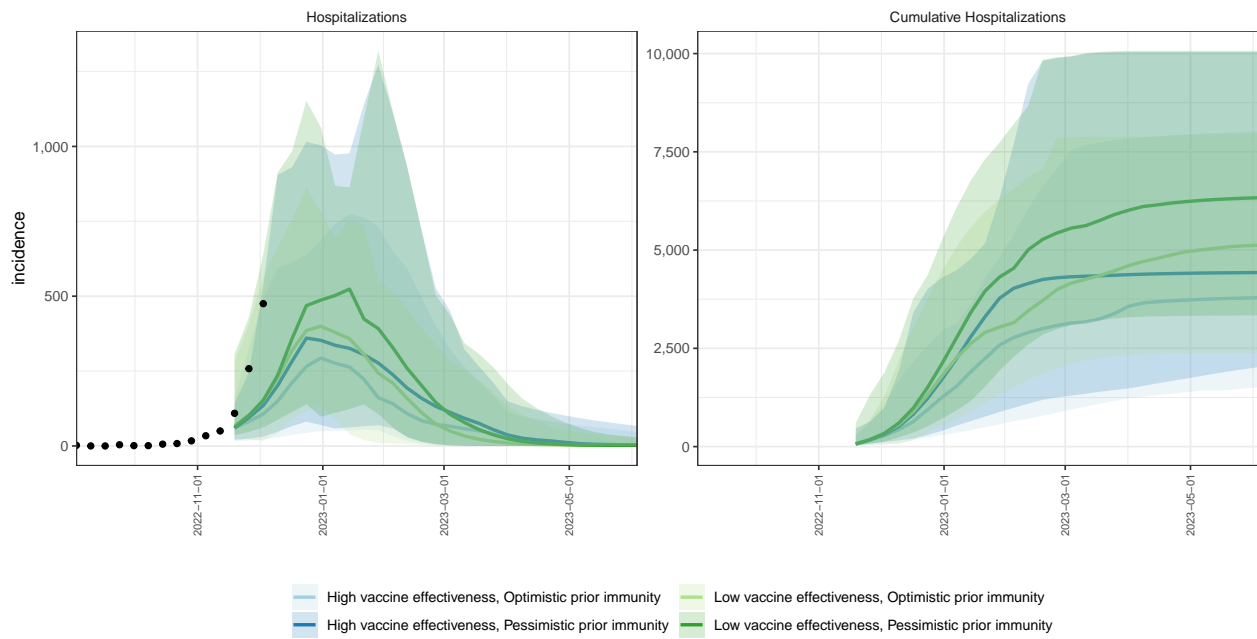
WA ensemble projections & 95% projection intervals



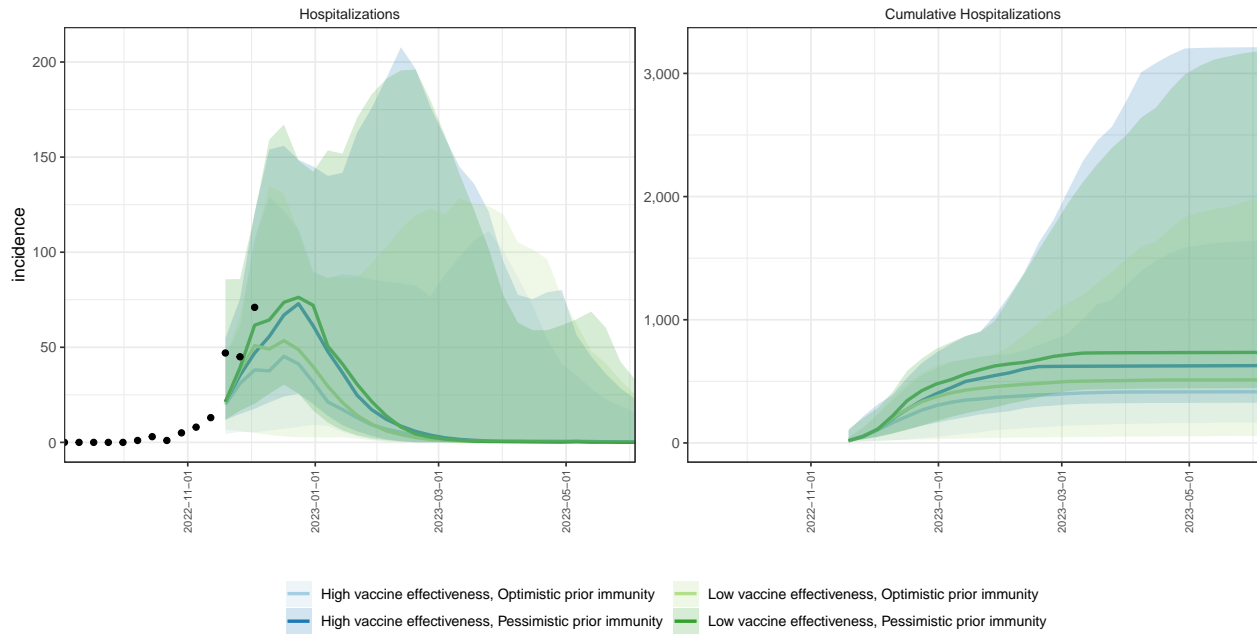
WV ensemble projections & 95% projection intervals



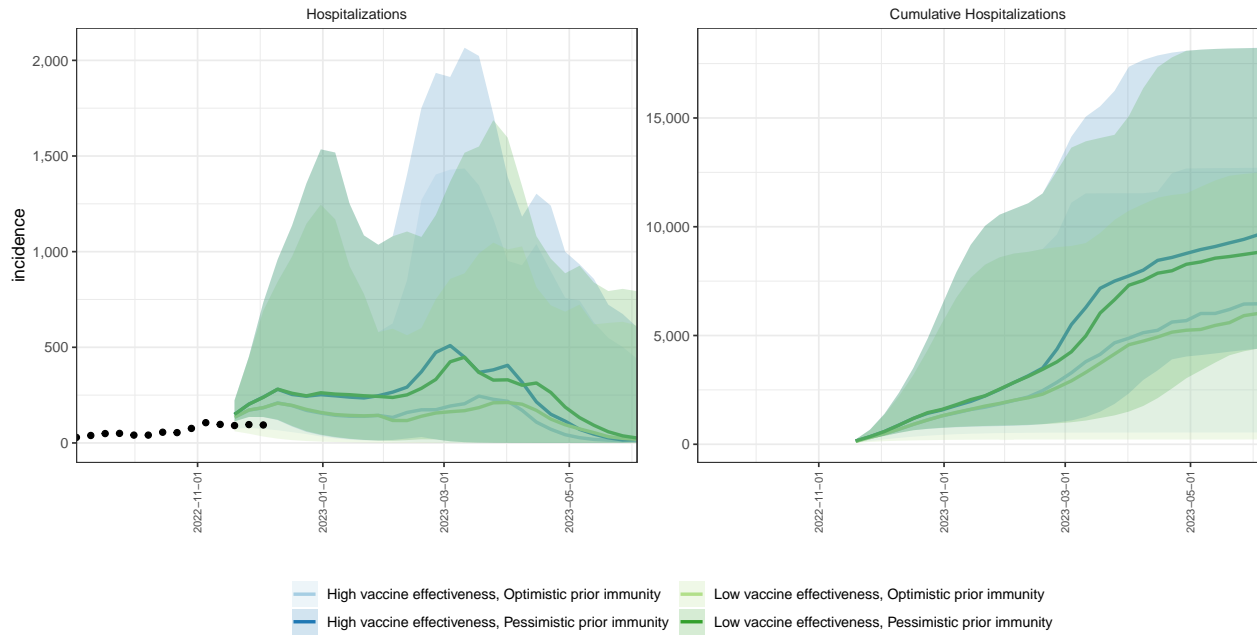
WI ensemble projections & 95% projection intervals



WY ensemble projections & 95% projection intervals



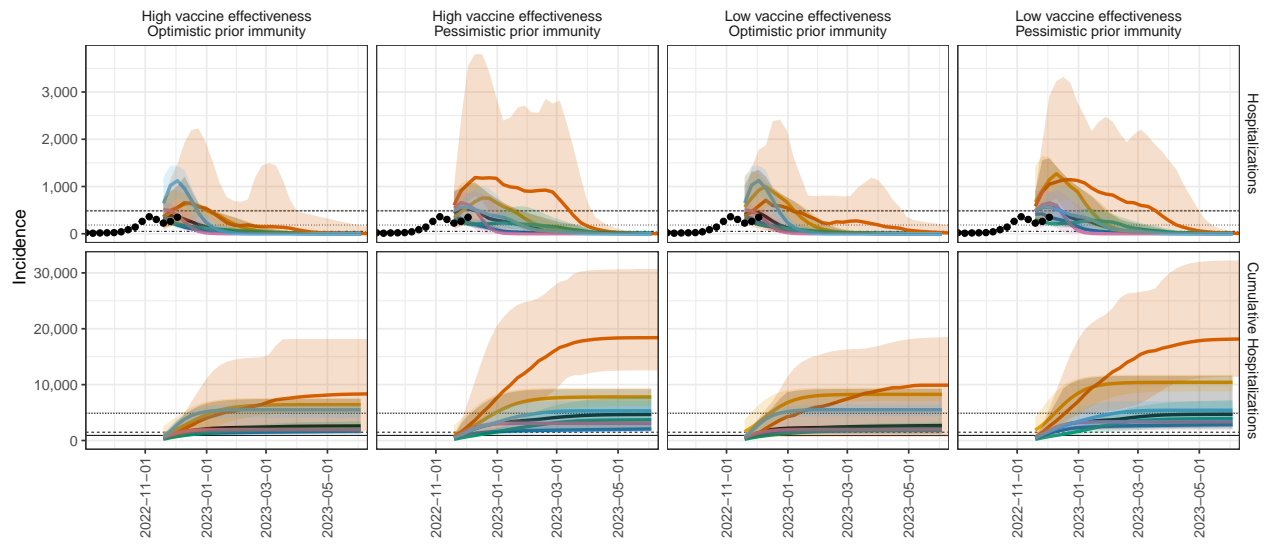
PR ensemble projections & 95% projection intervals



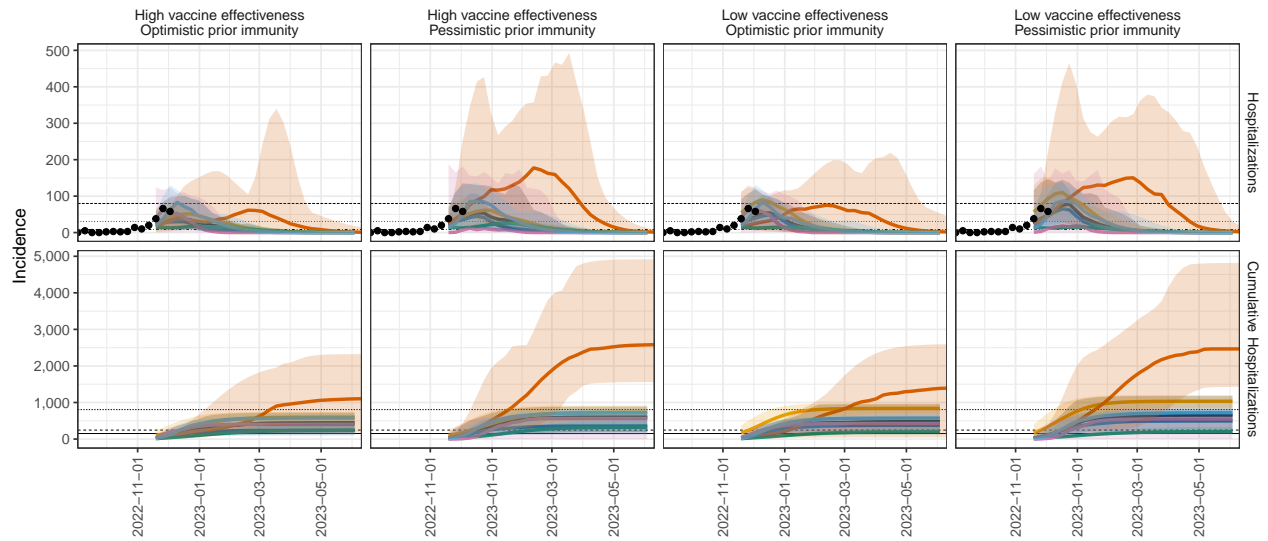
State-level model variation

National model variation for all scenarios.

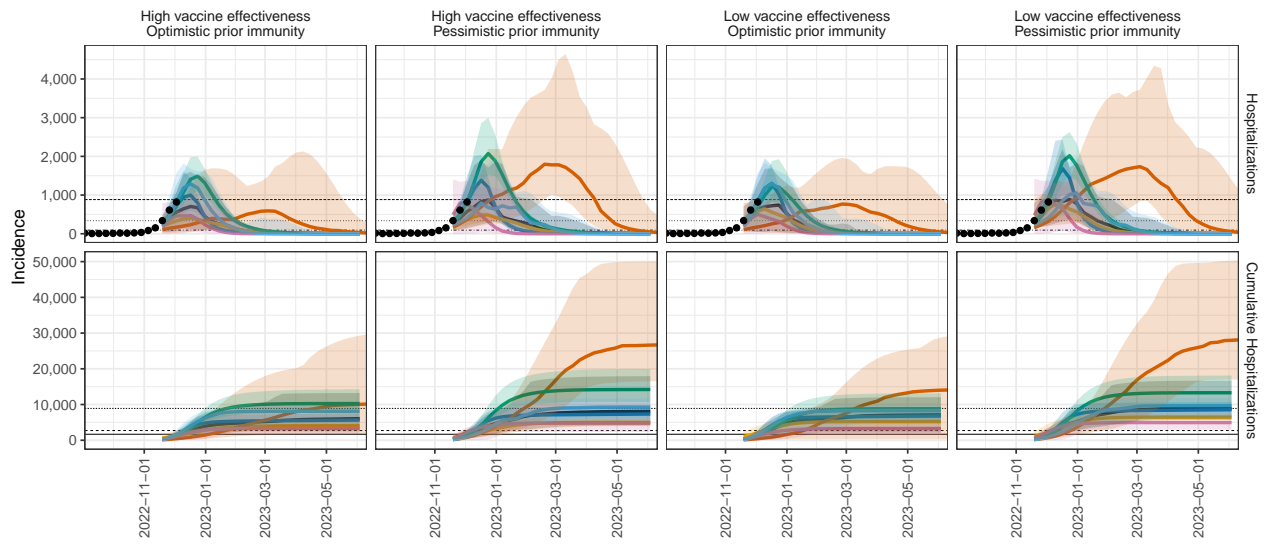
AL model variance & 95% projection intervals



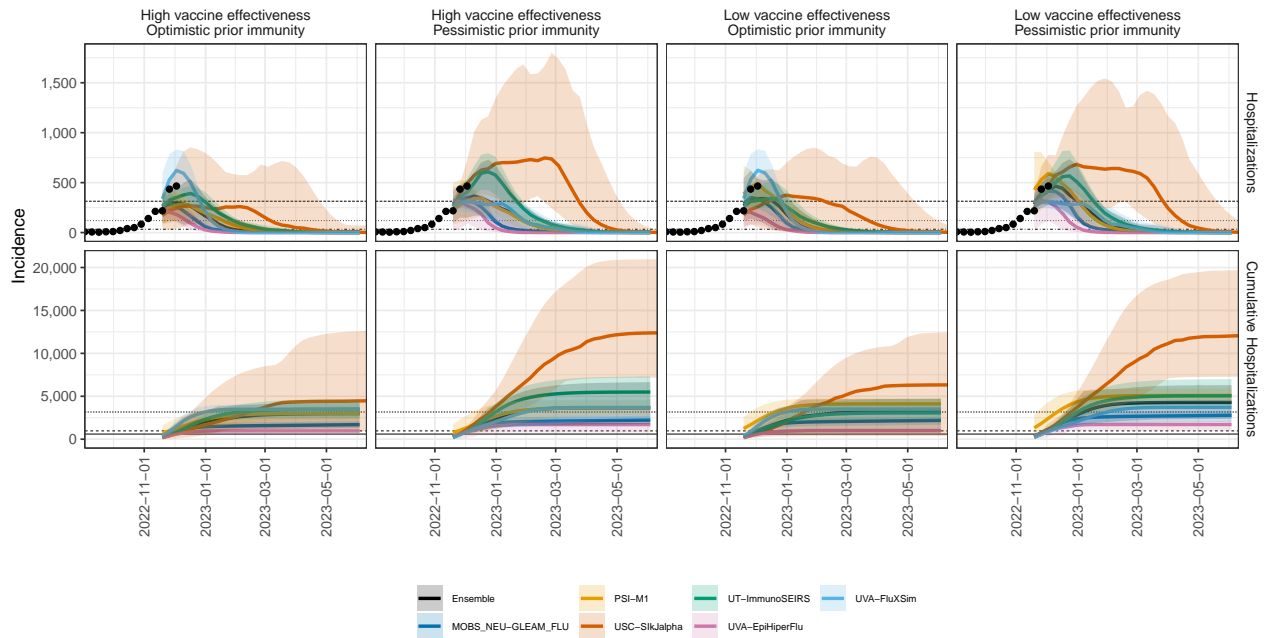
AK model variance & 95% projection intervals

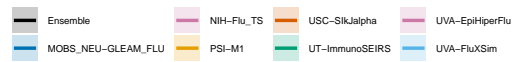
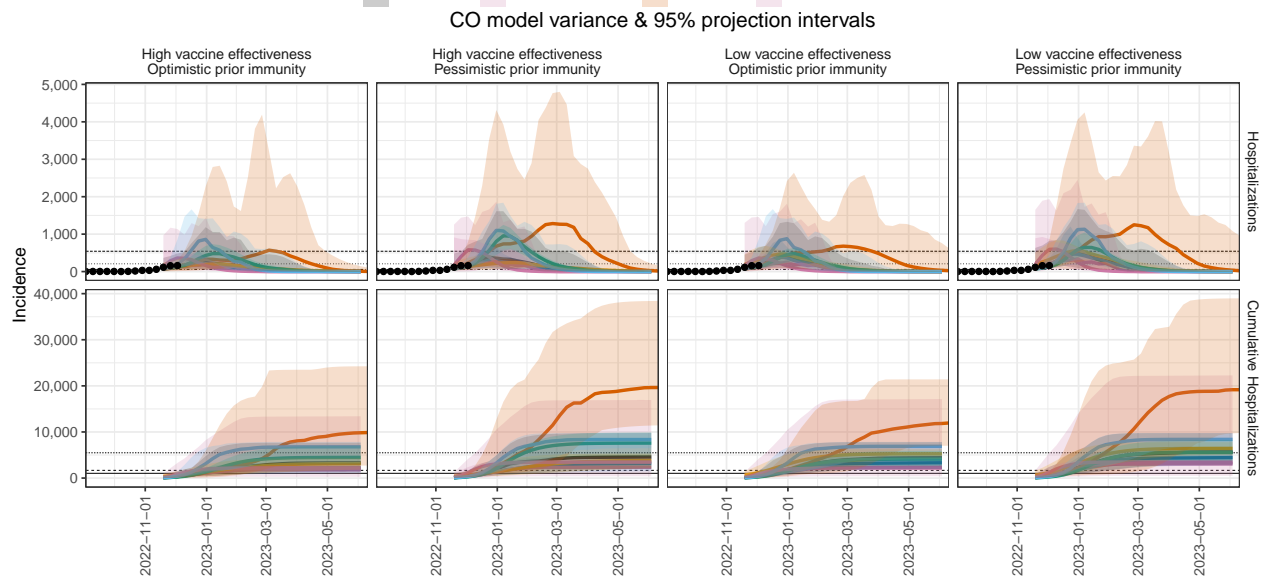
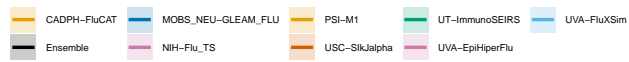
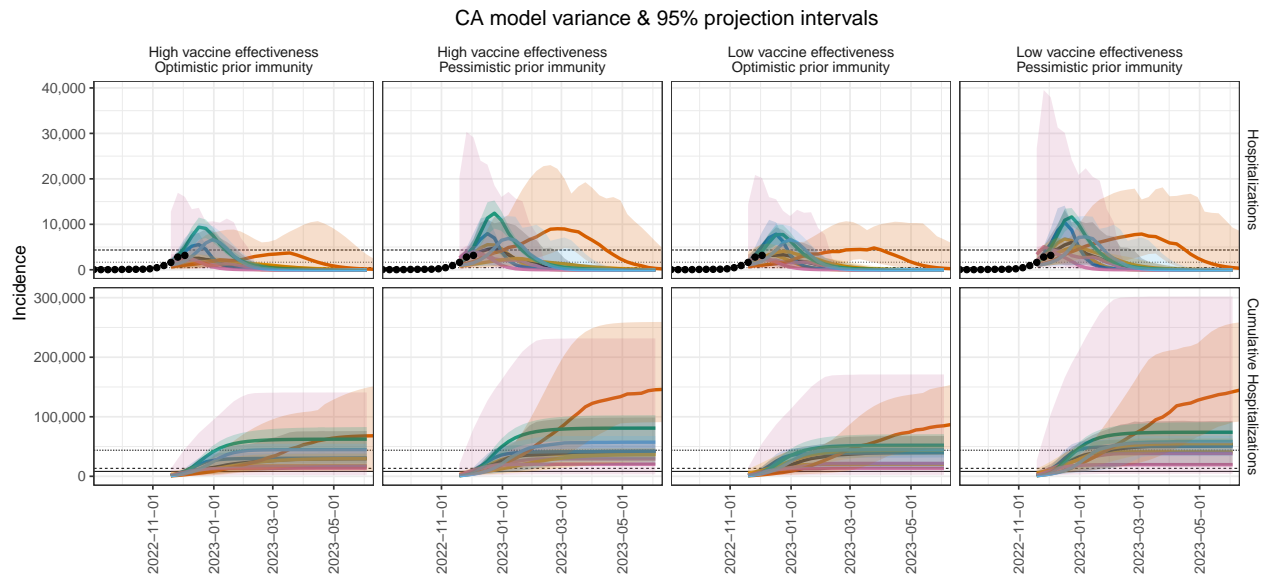


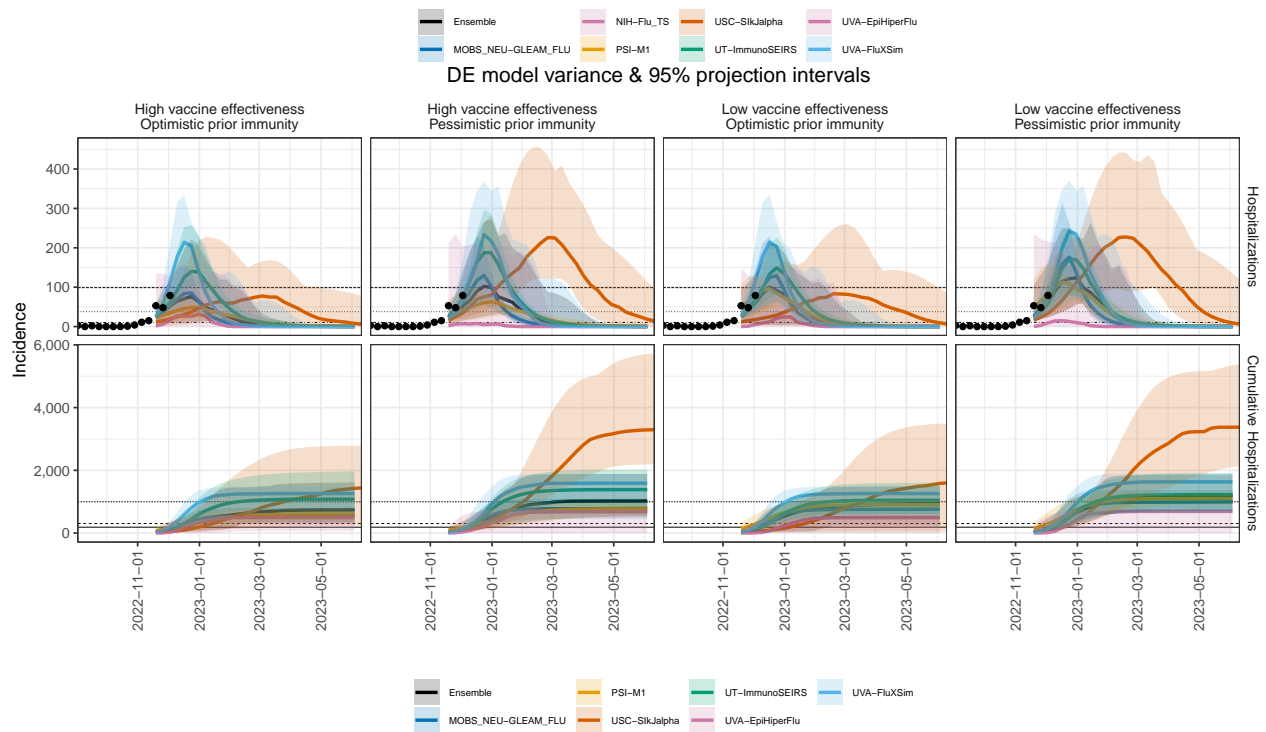
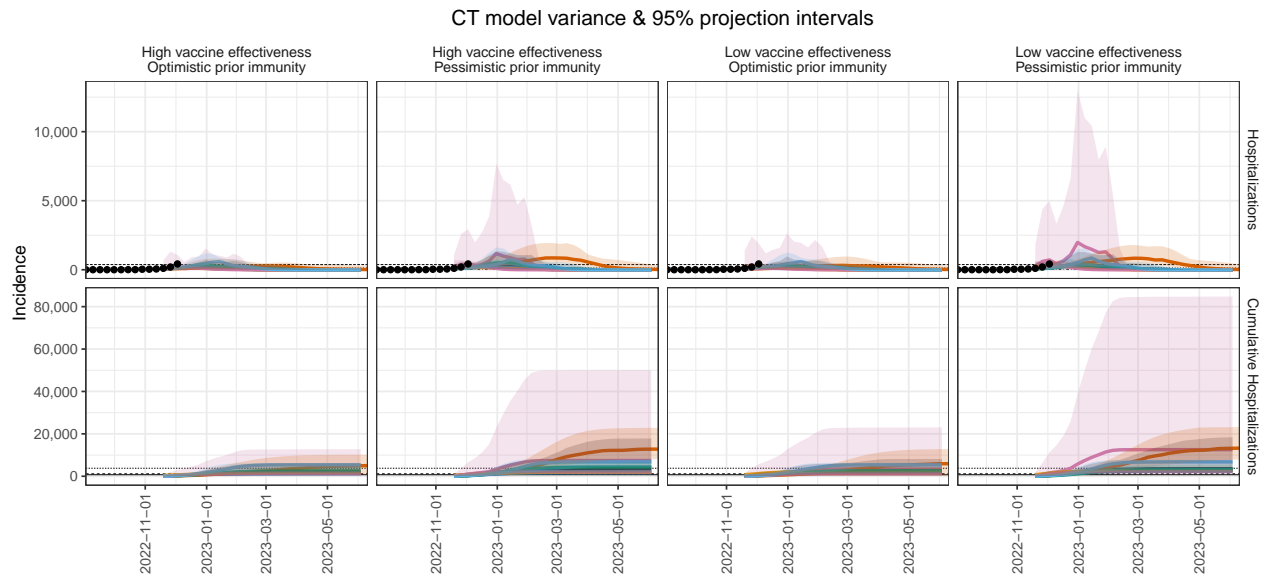
AZ model variance & 95% projection intervals

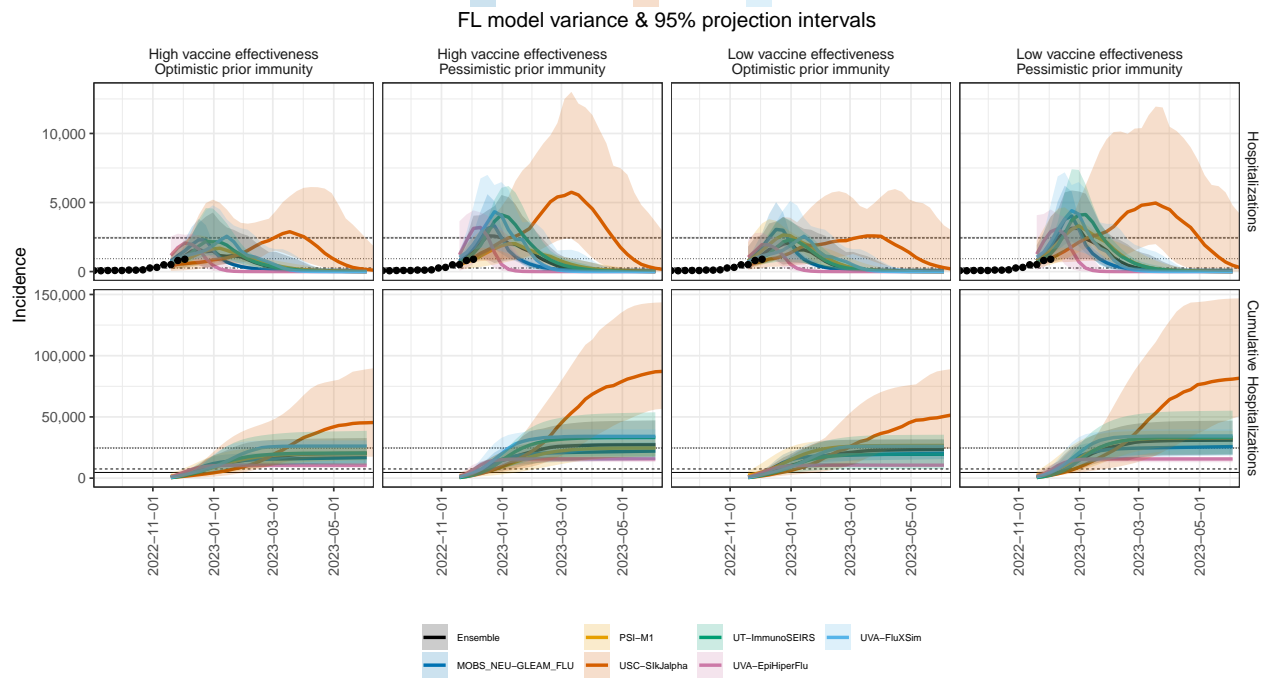
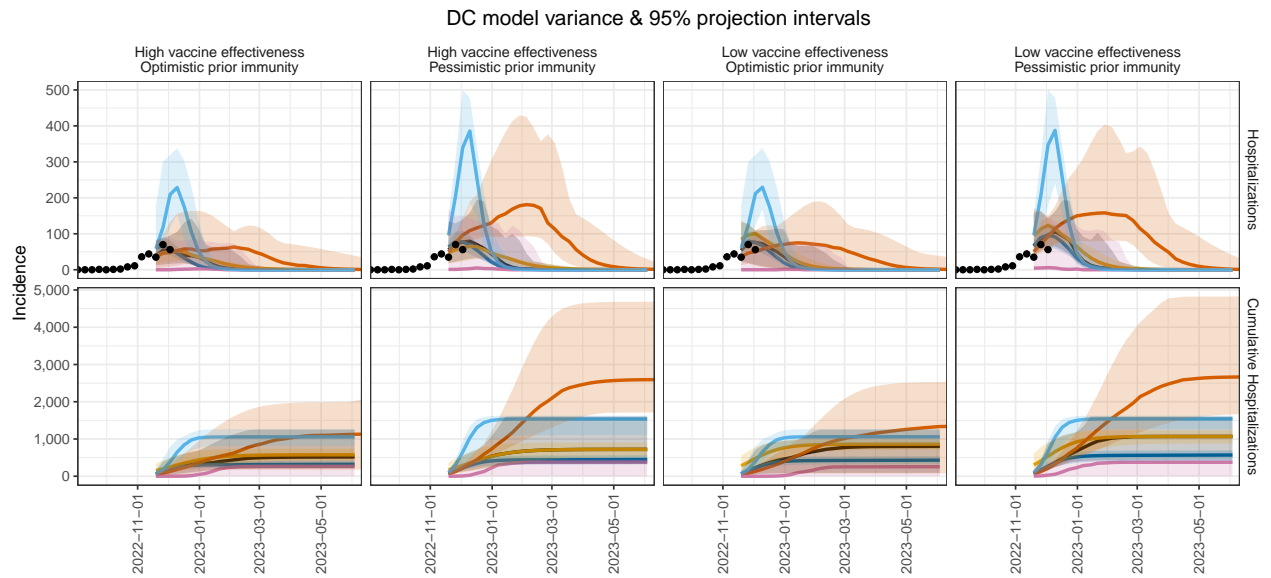


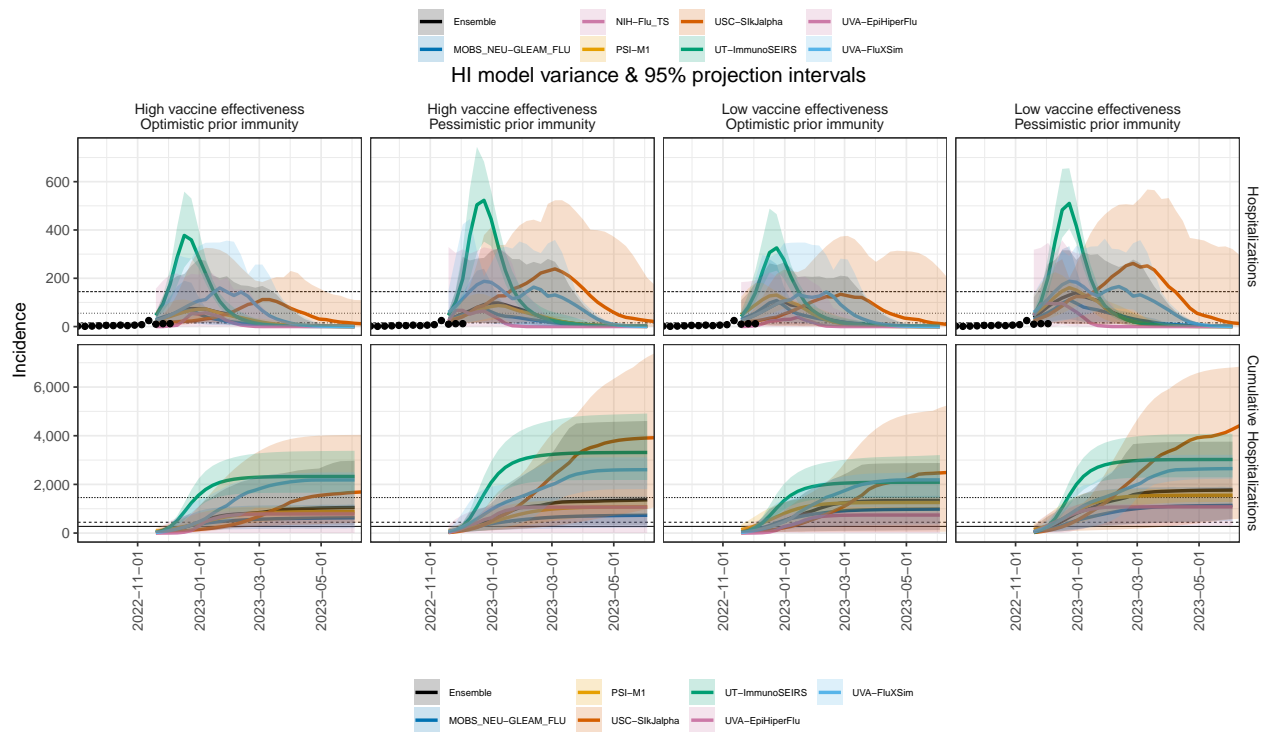
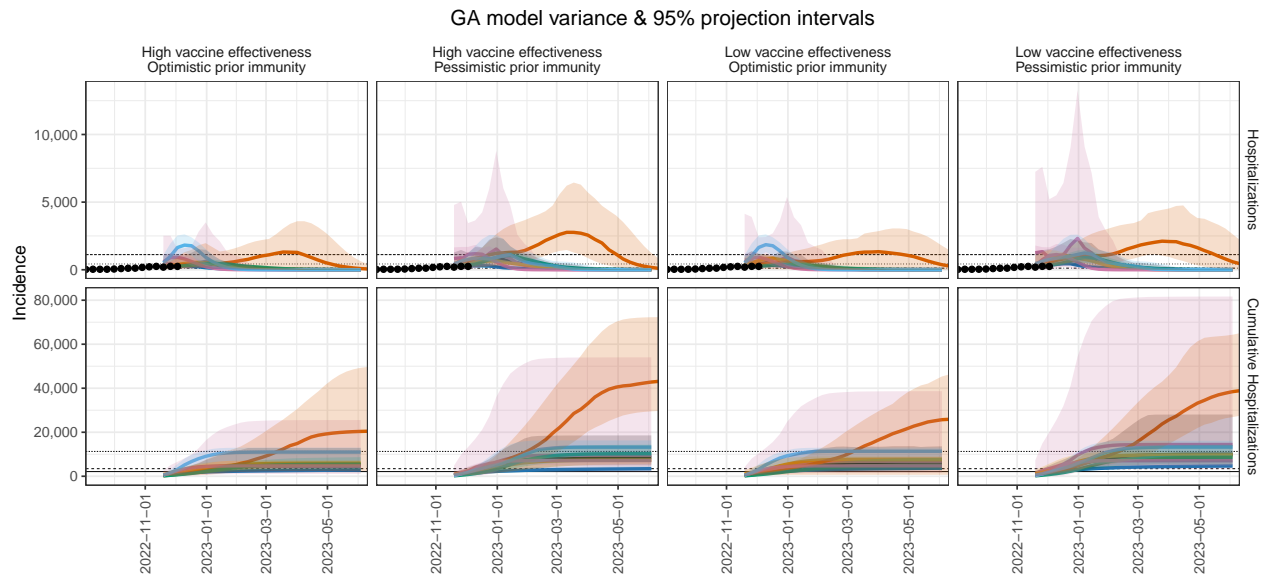
AR model variance & 95% projection intervals

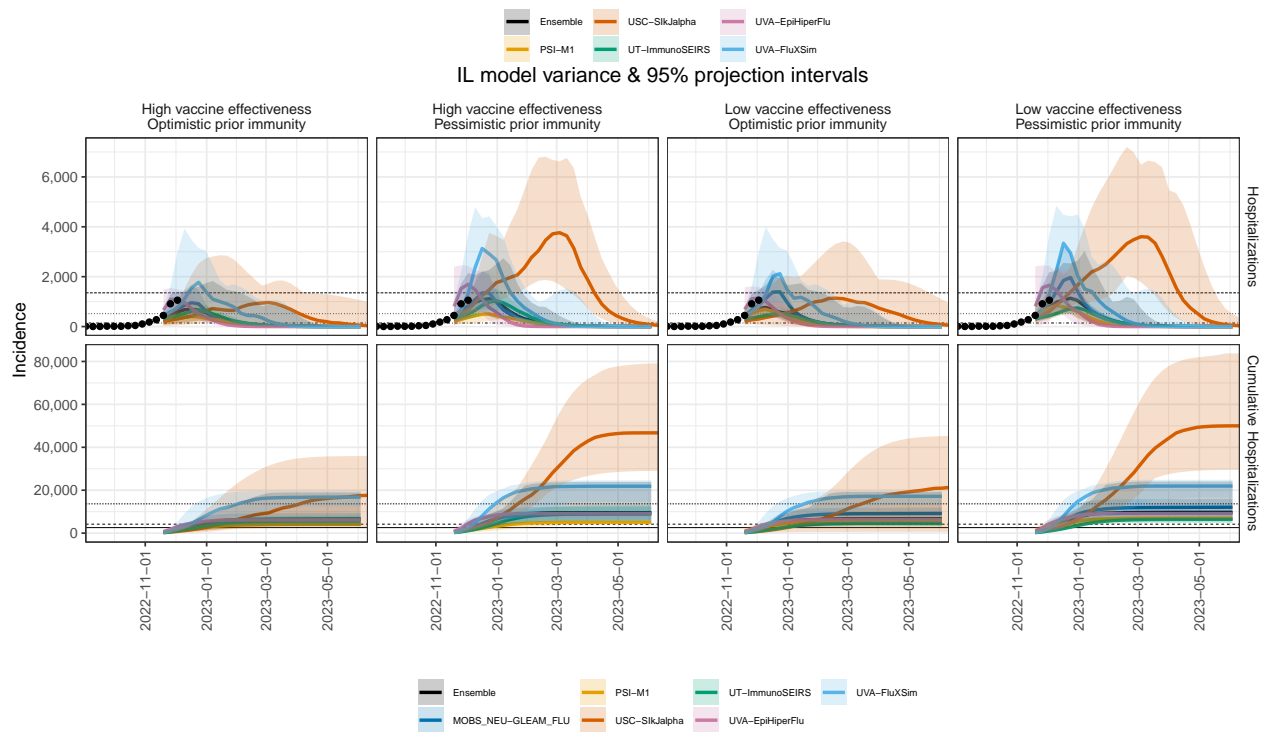
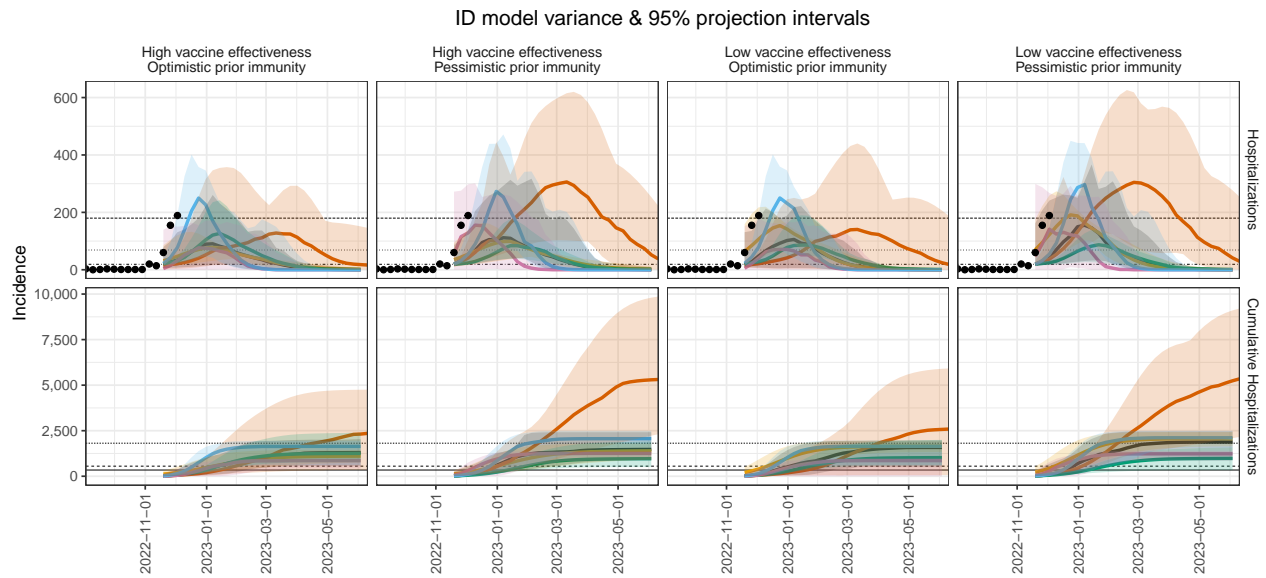


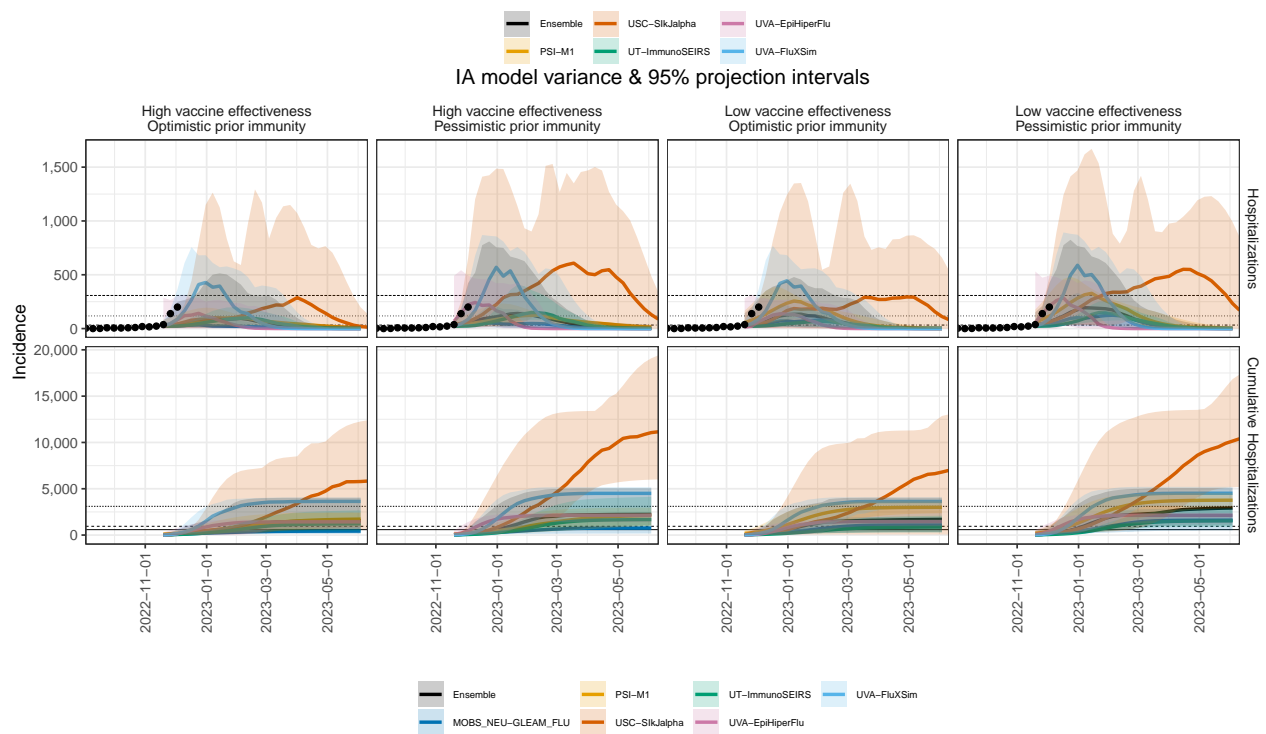
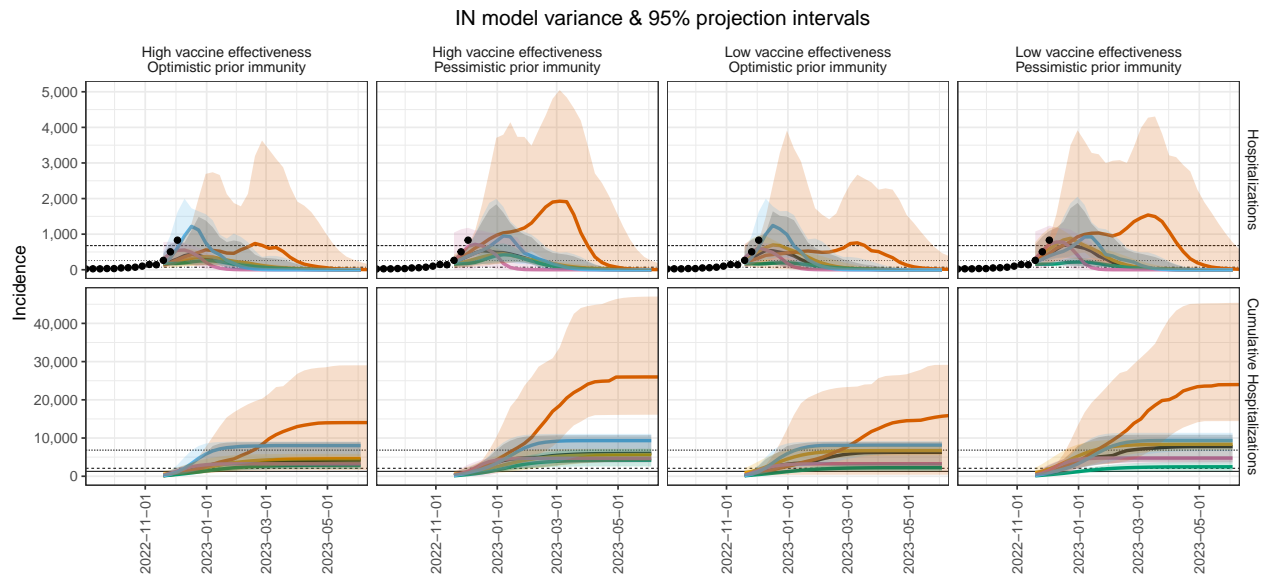


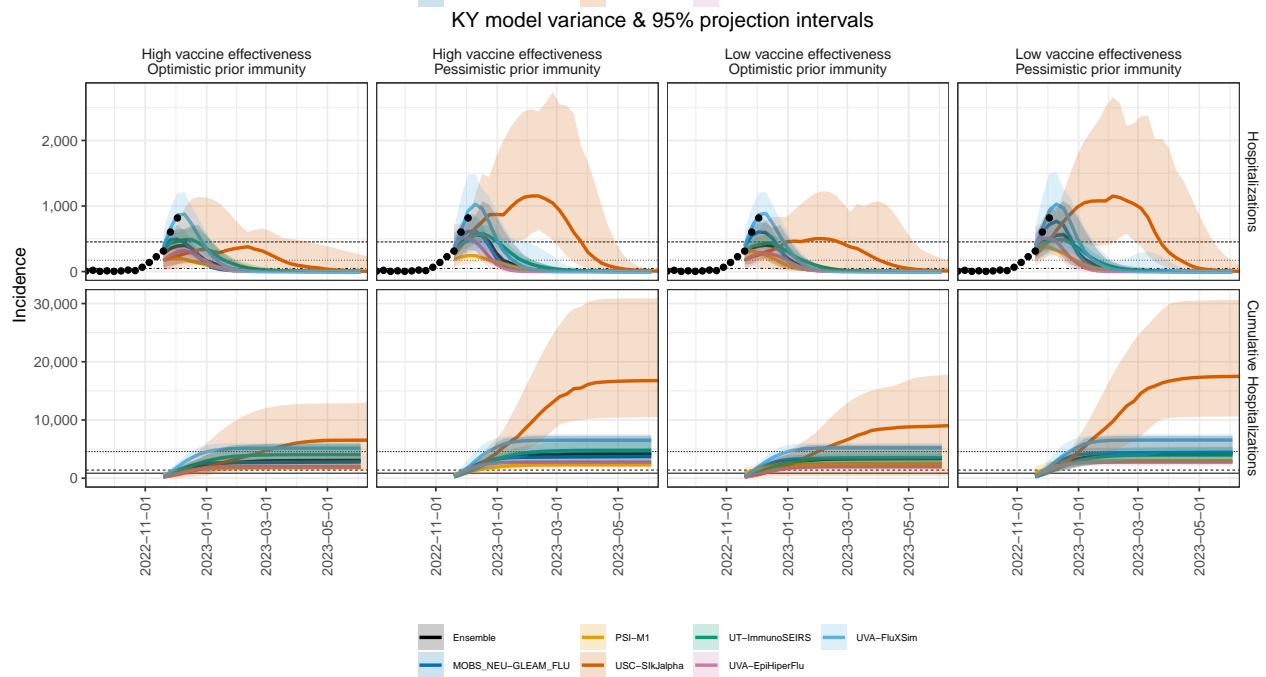
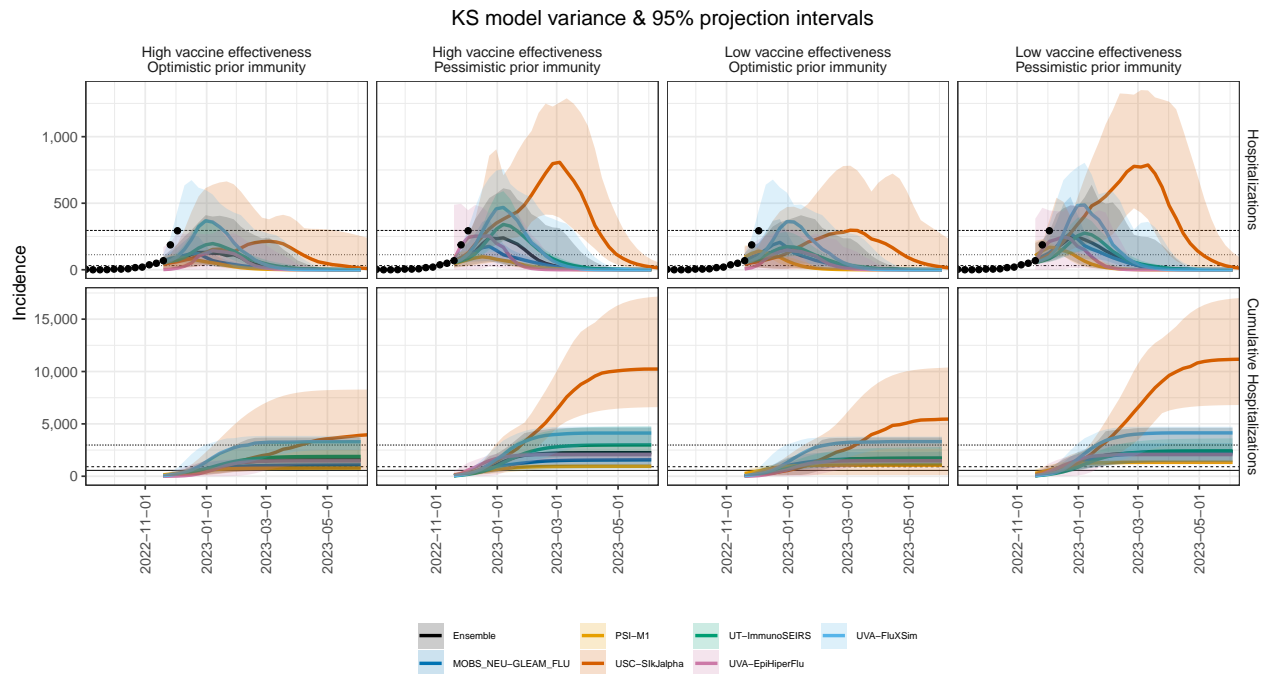




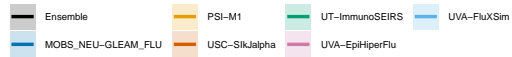
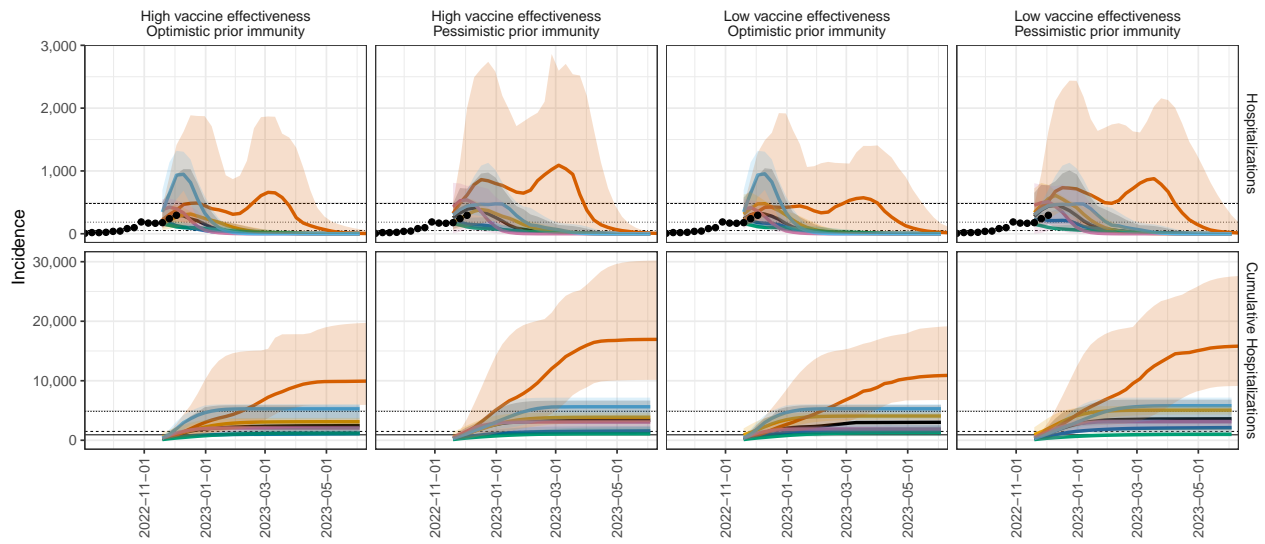




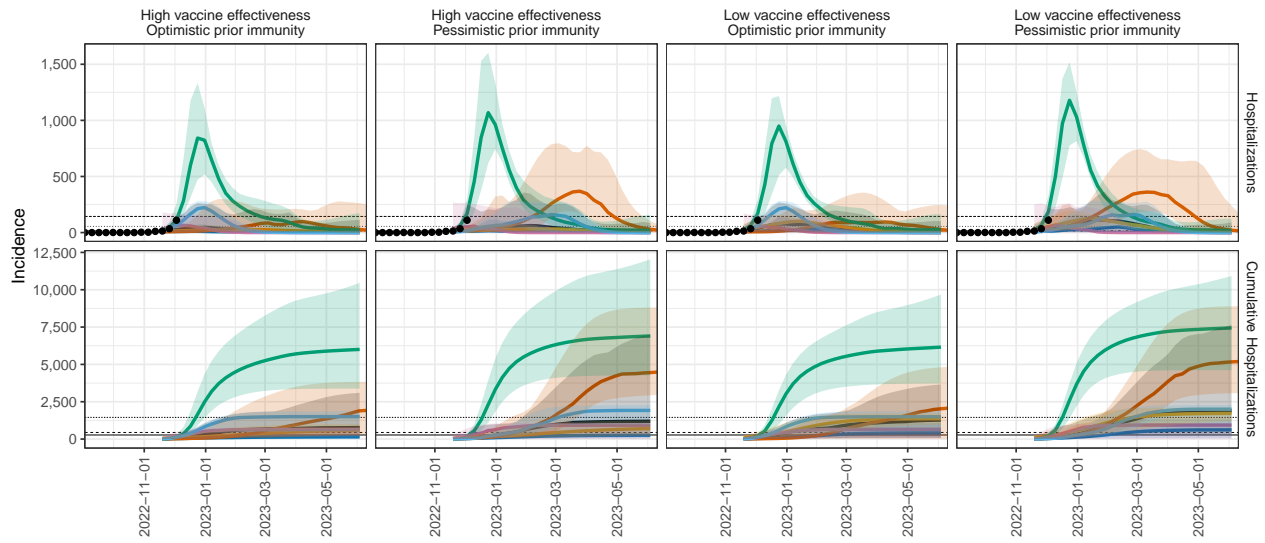


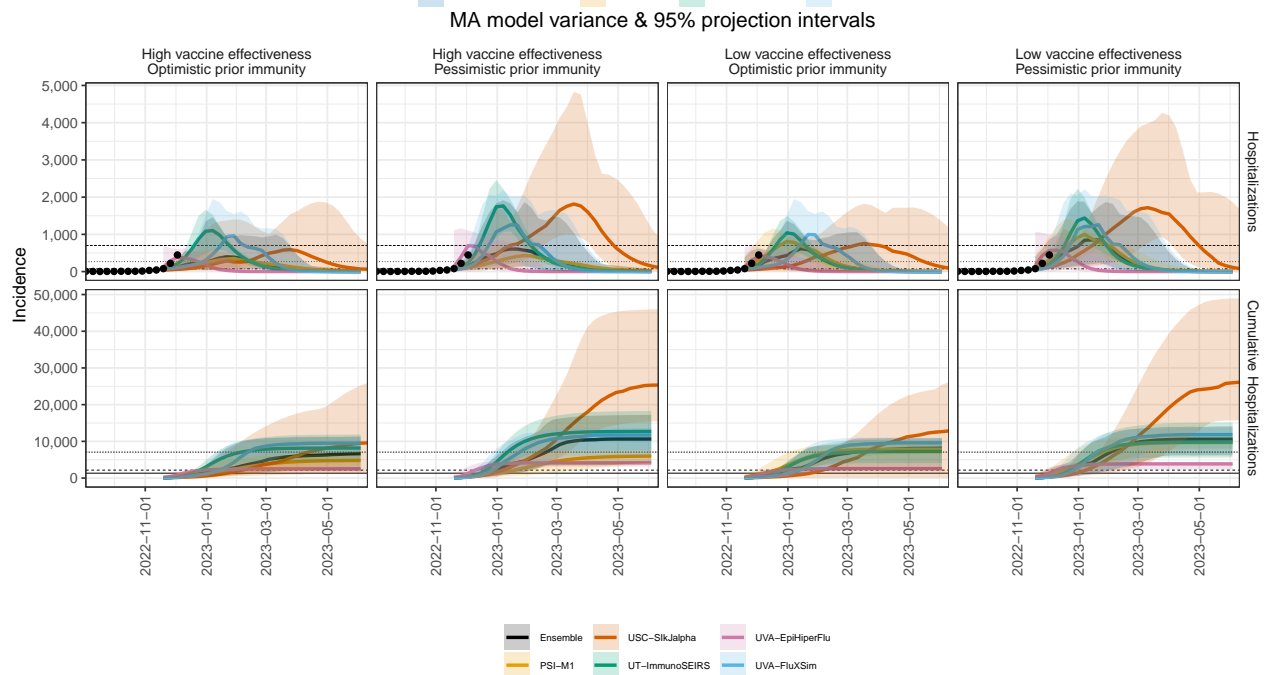
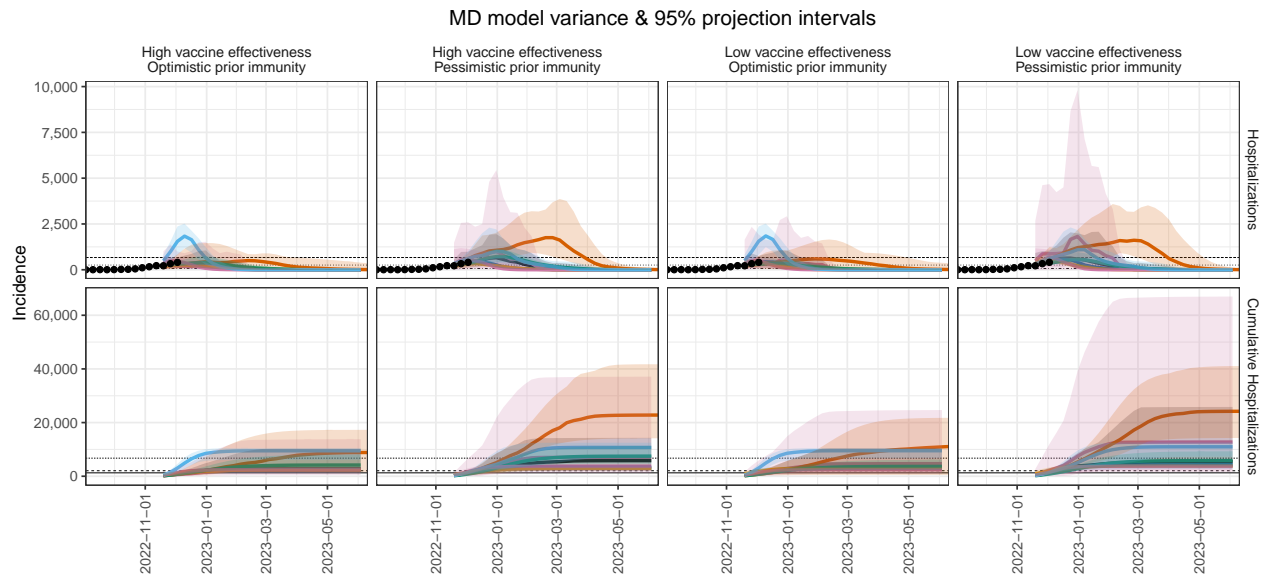


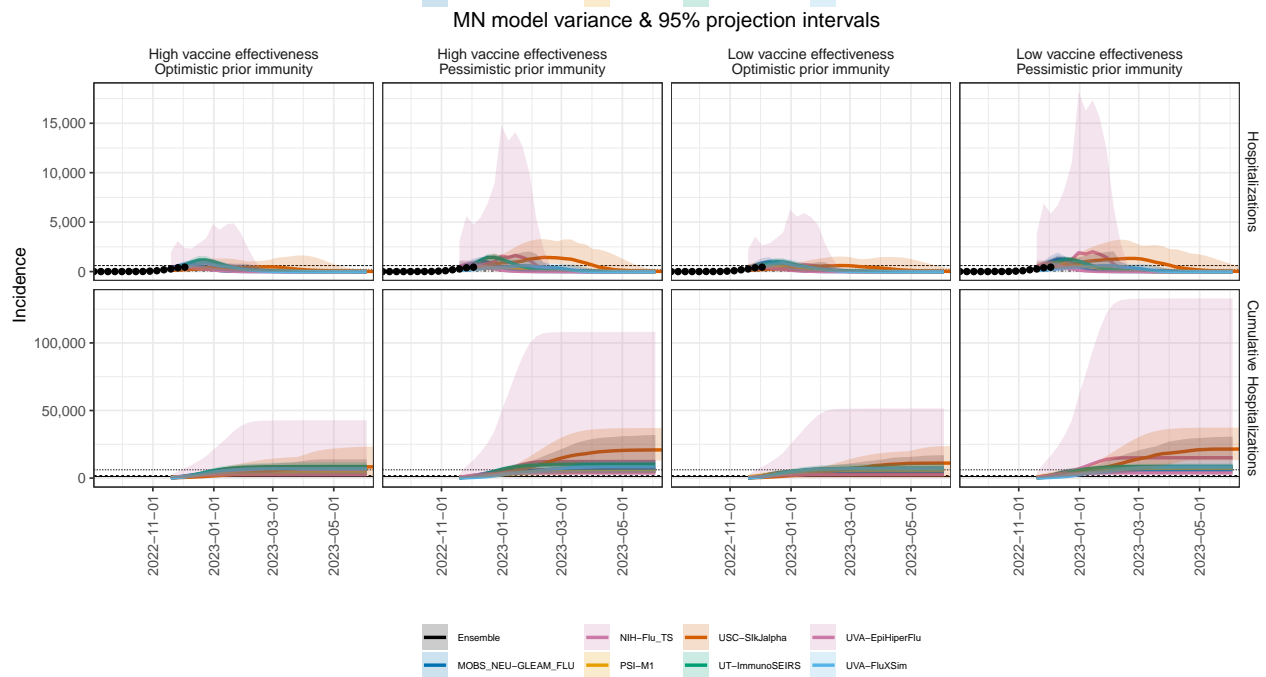
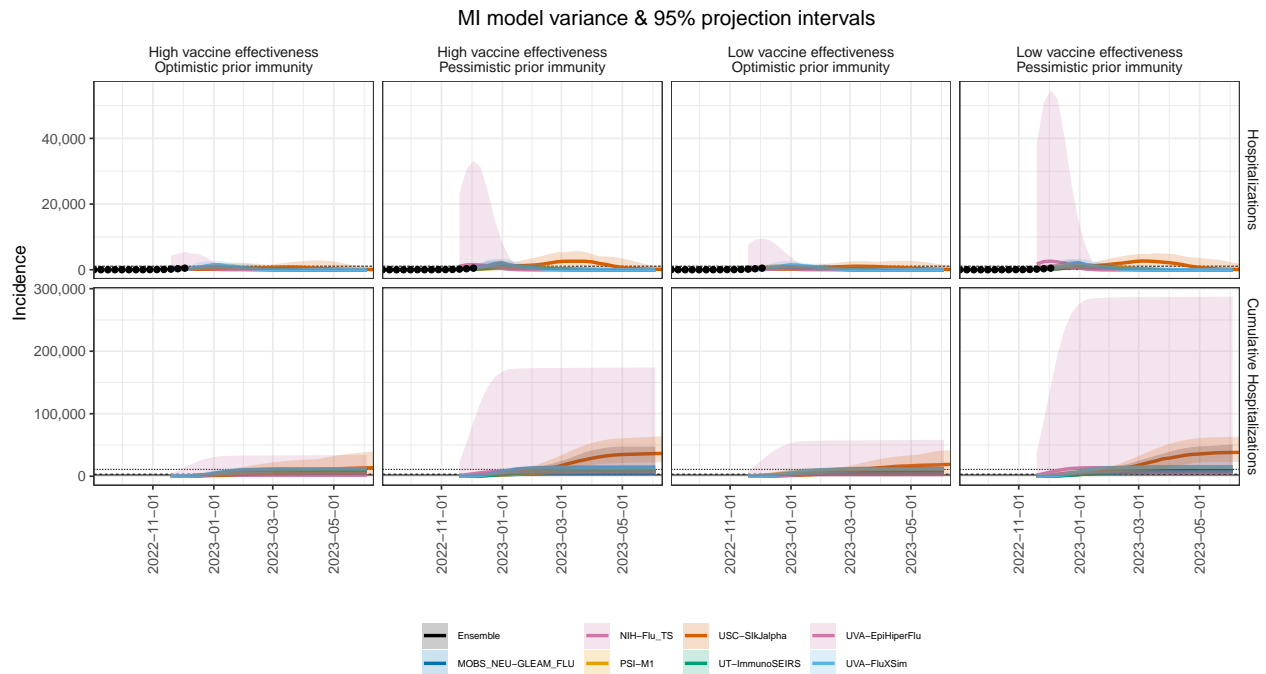
LA model variance & 95% projection intervals



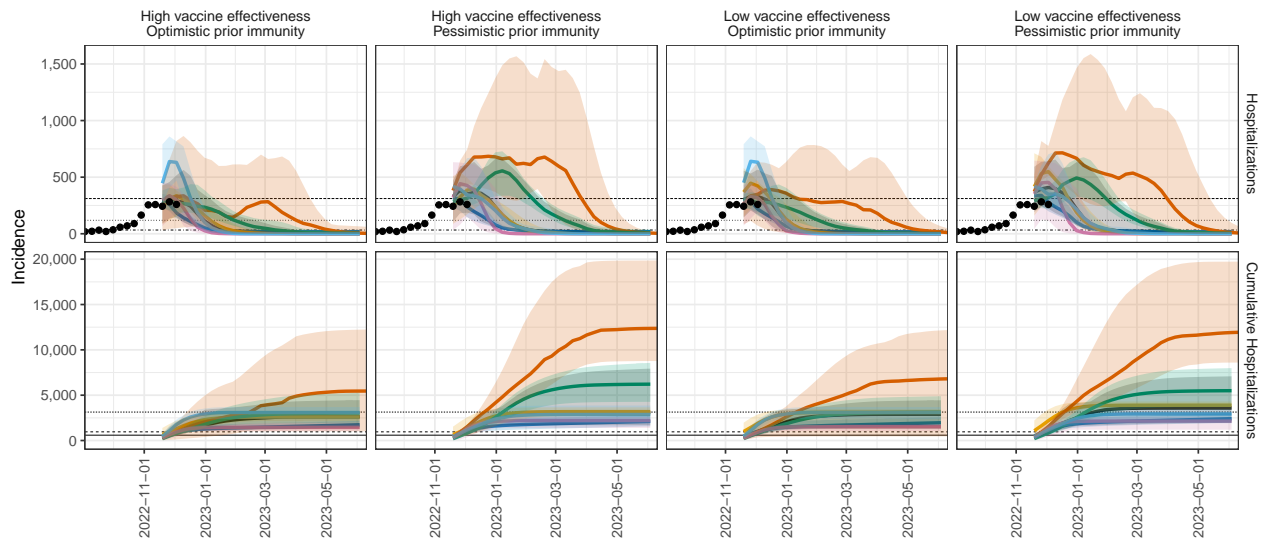
ME model variance & 95% projection intervals



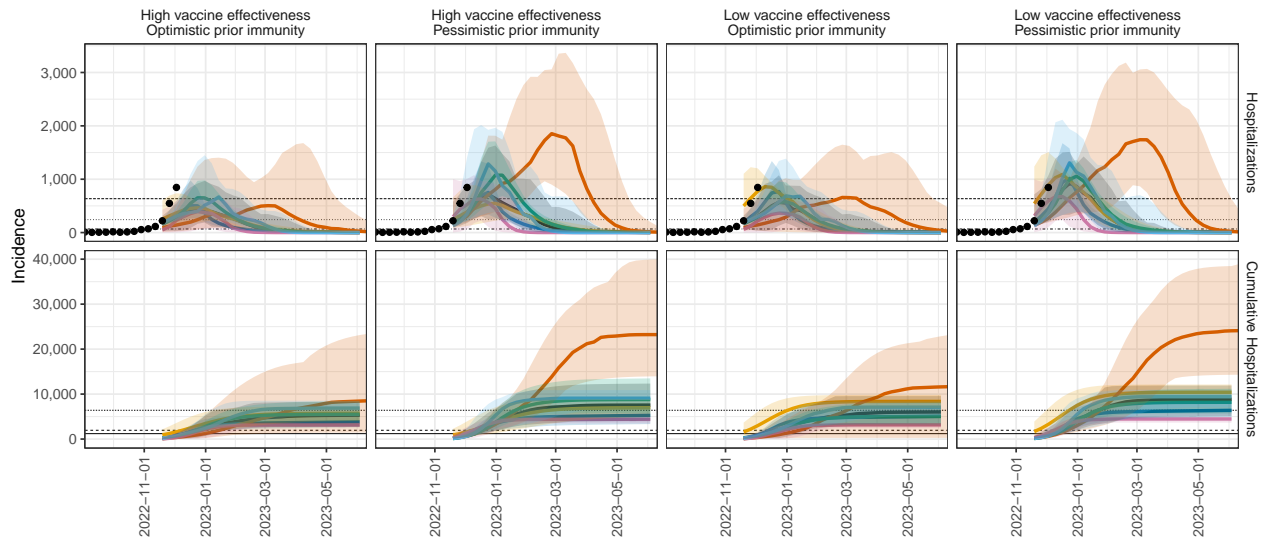


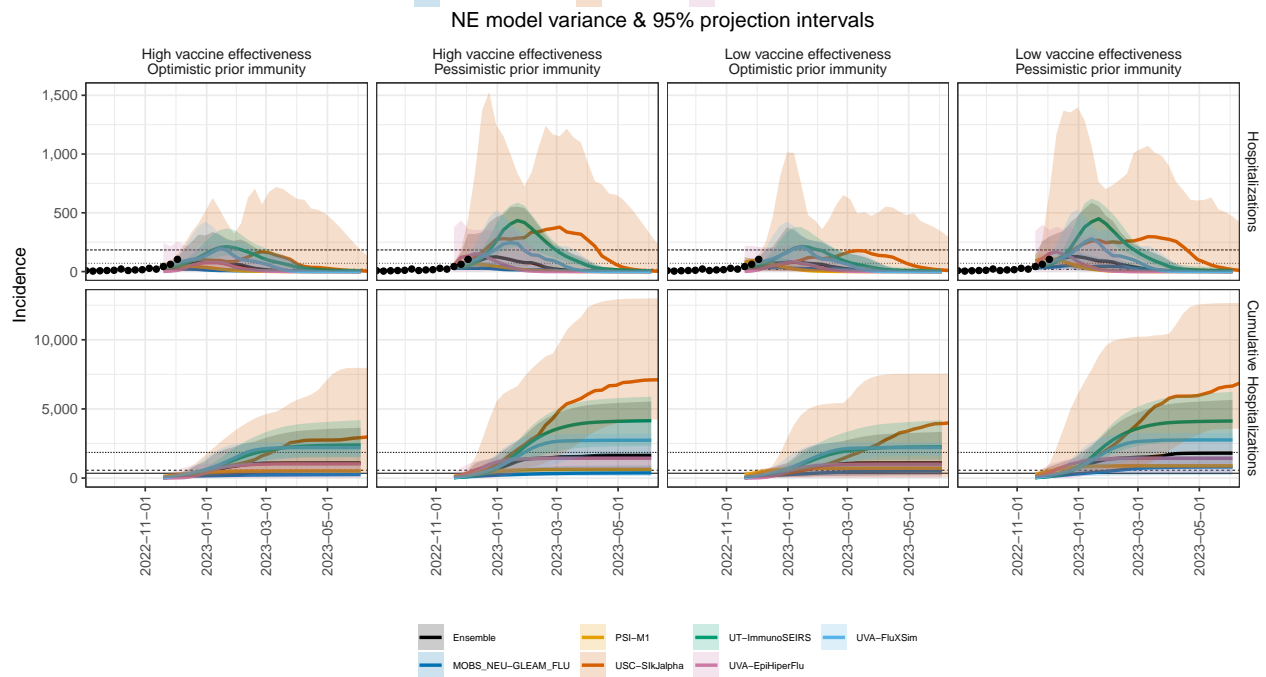
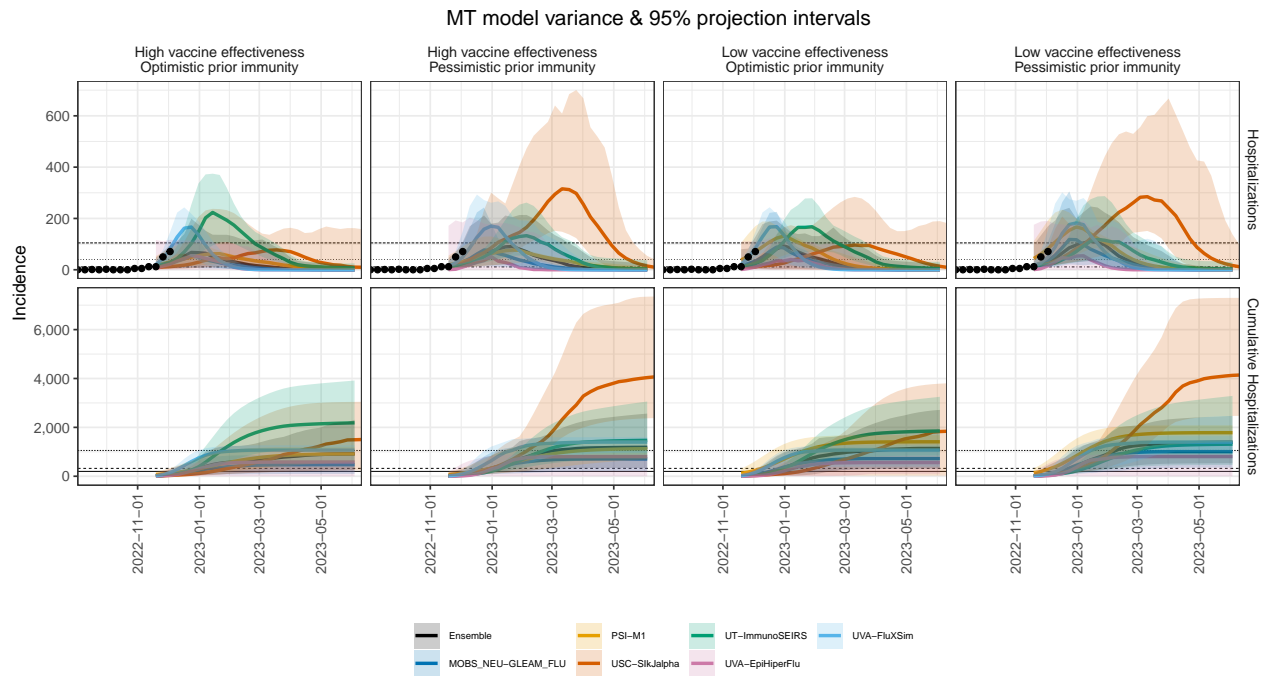


MS model variance & 95% projection intervals

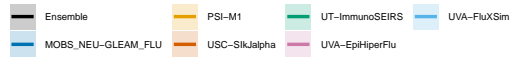
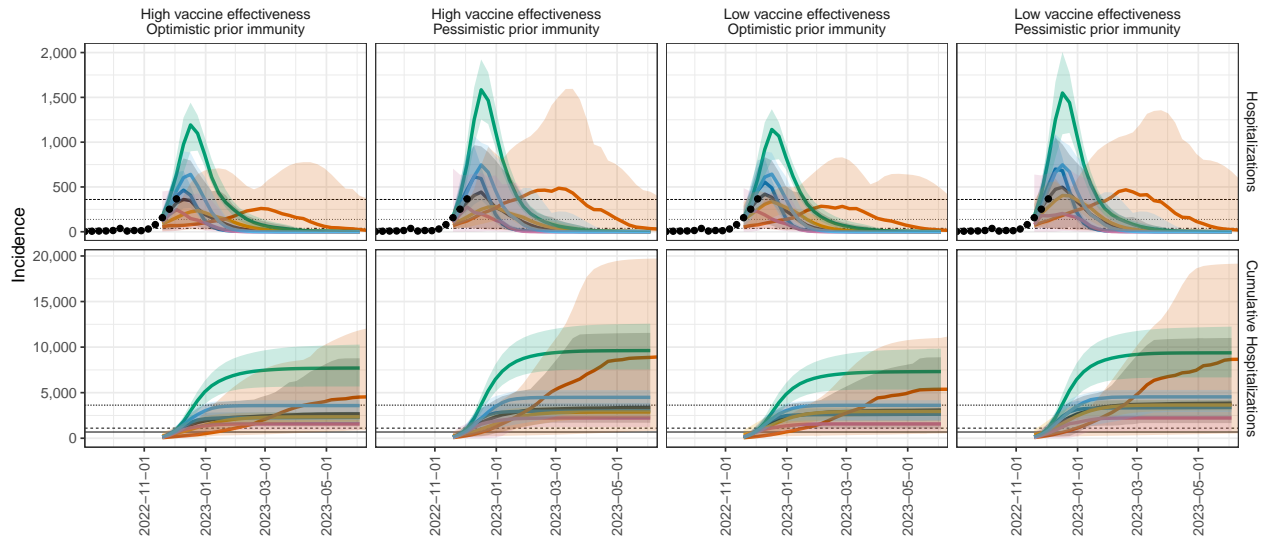


MO model variance & 95% projection intervals

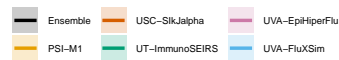
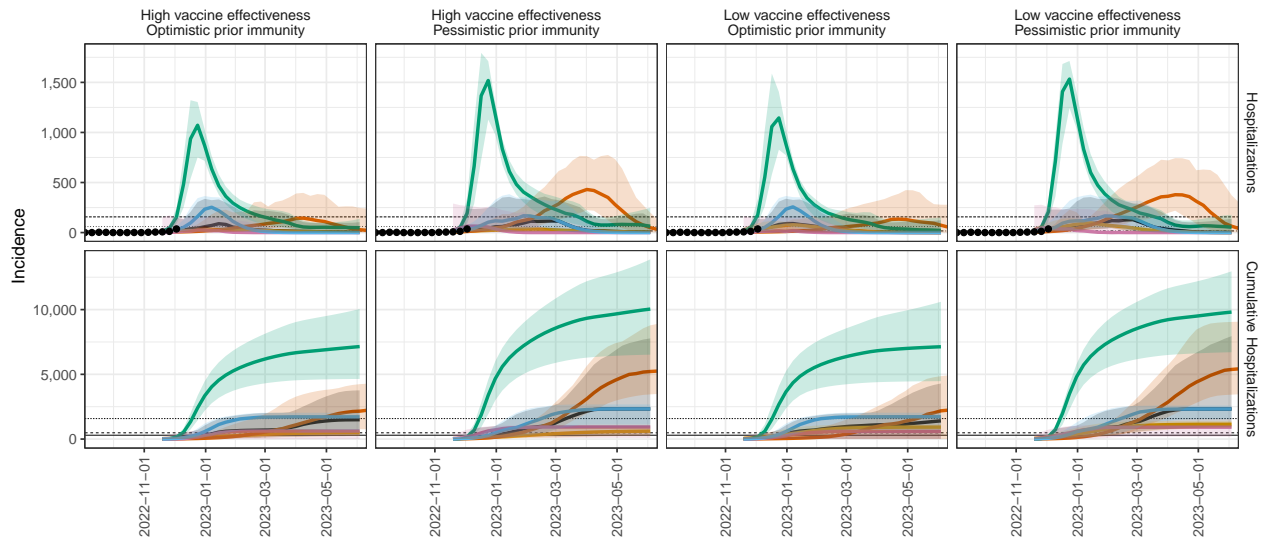


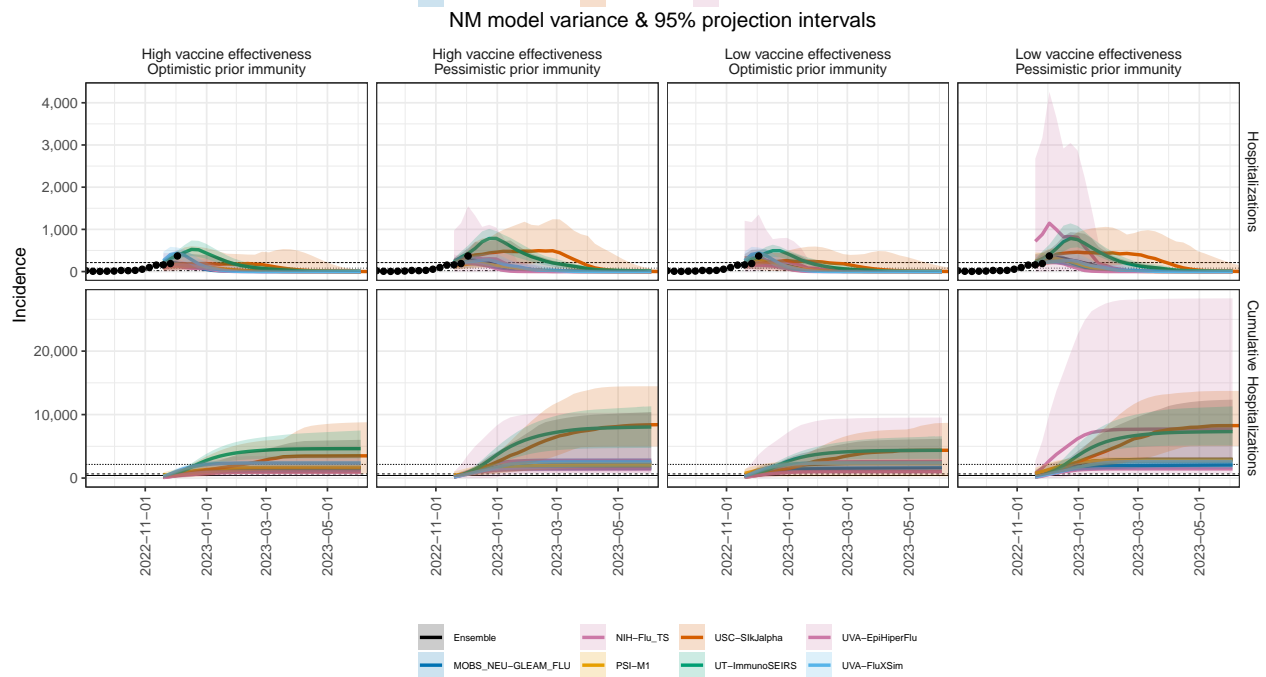
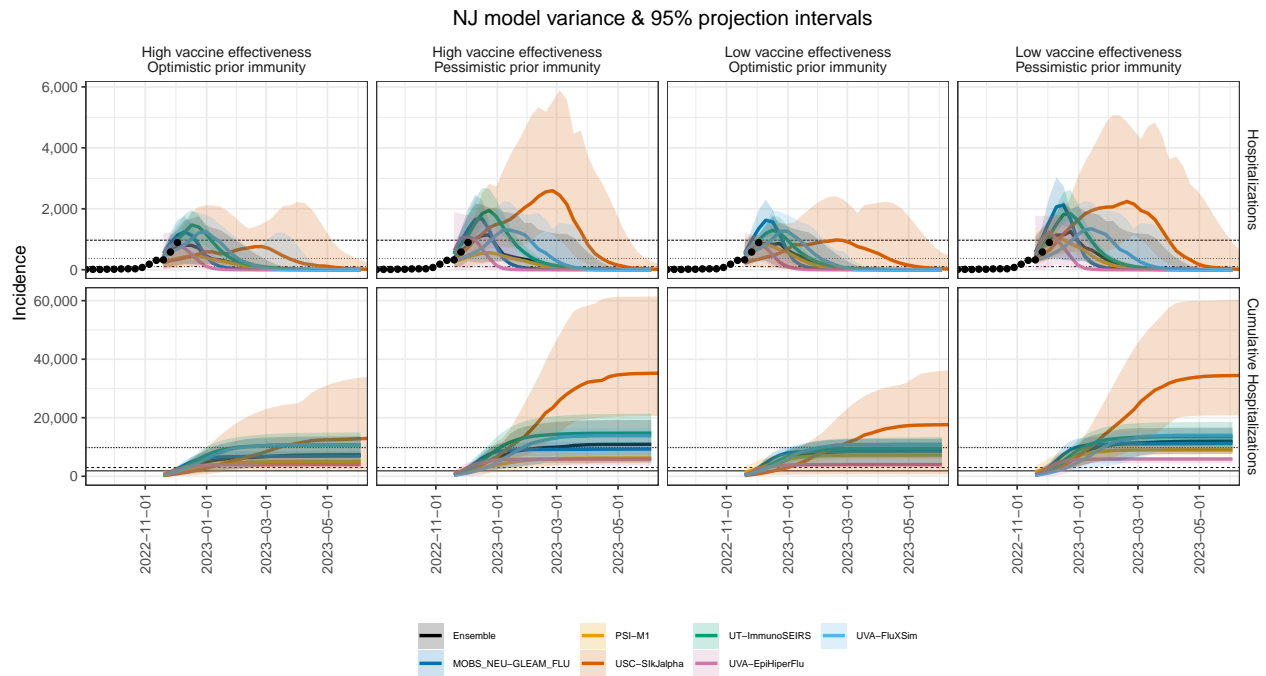


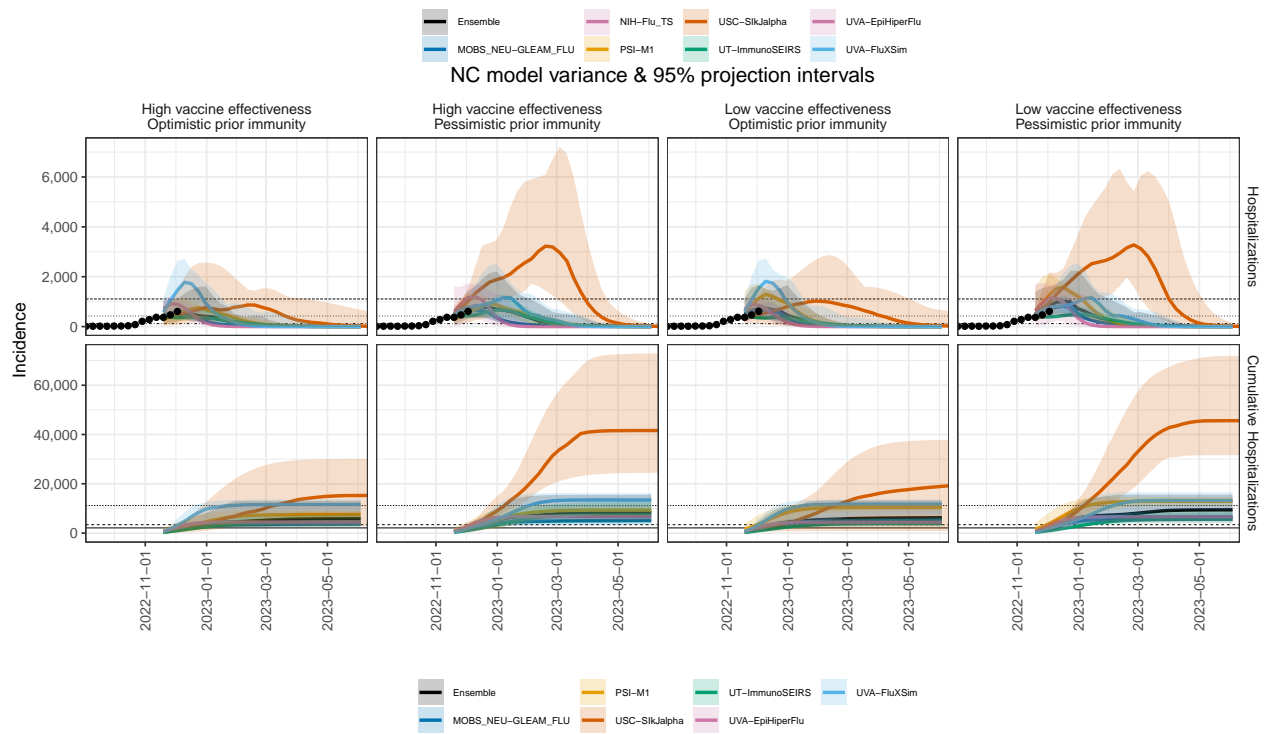
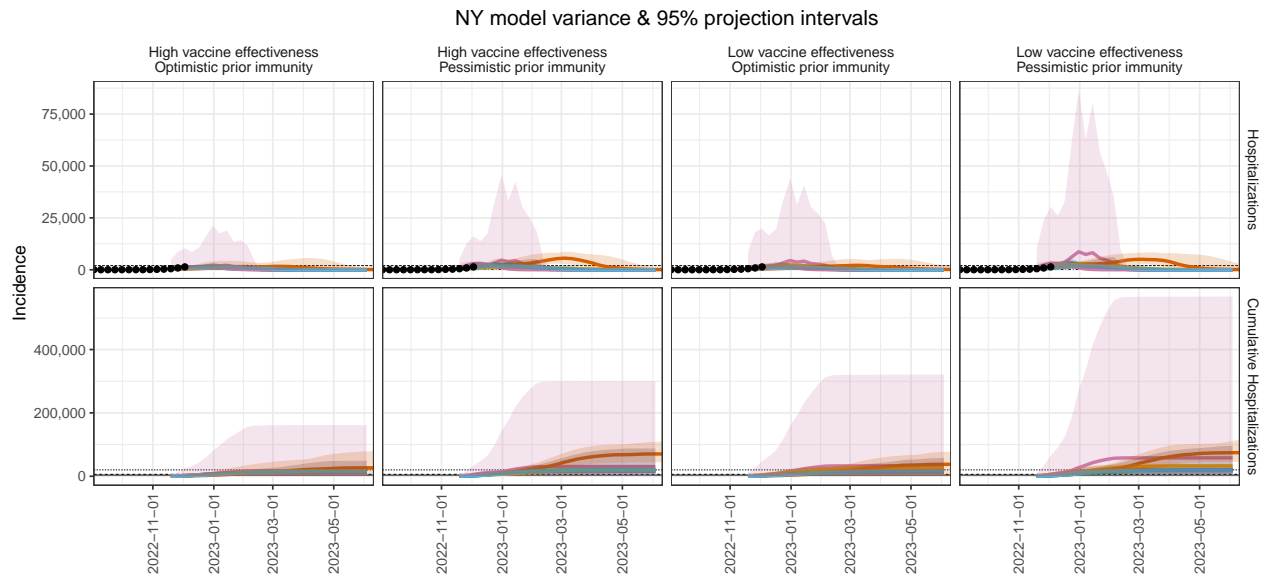
NV model variance & 95% projection intervals

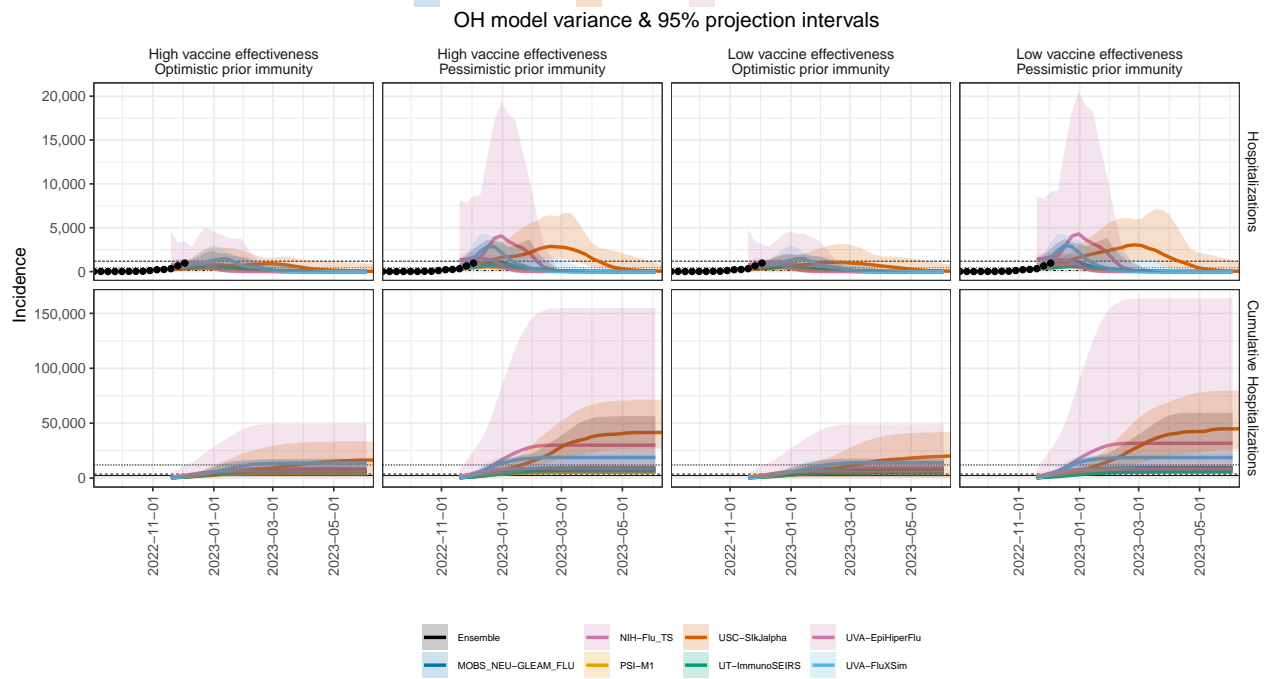
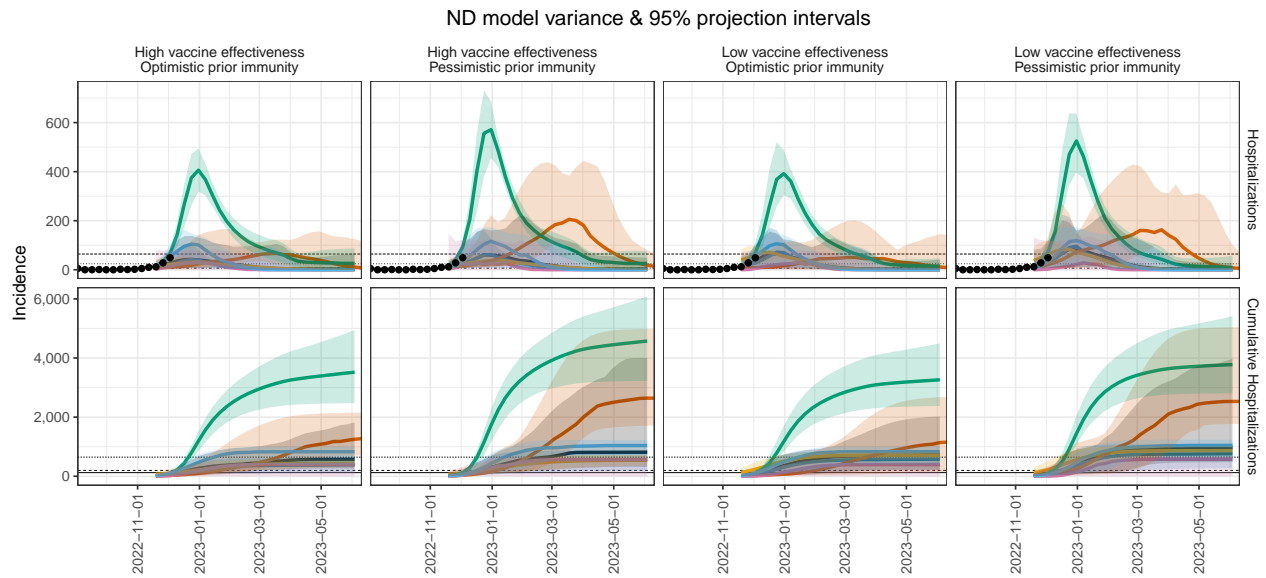


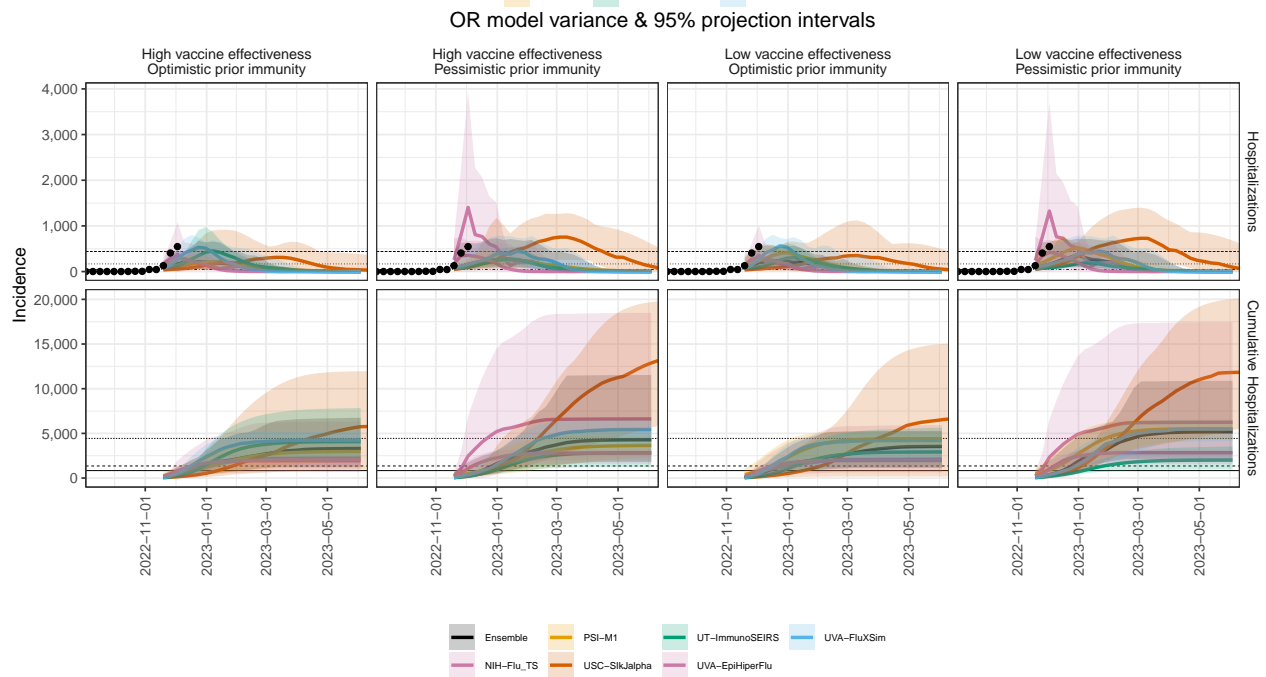
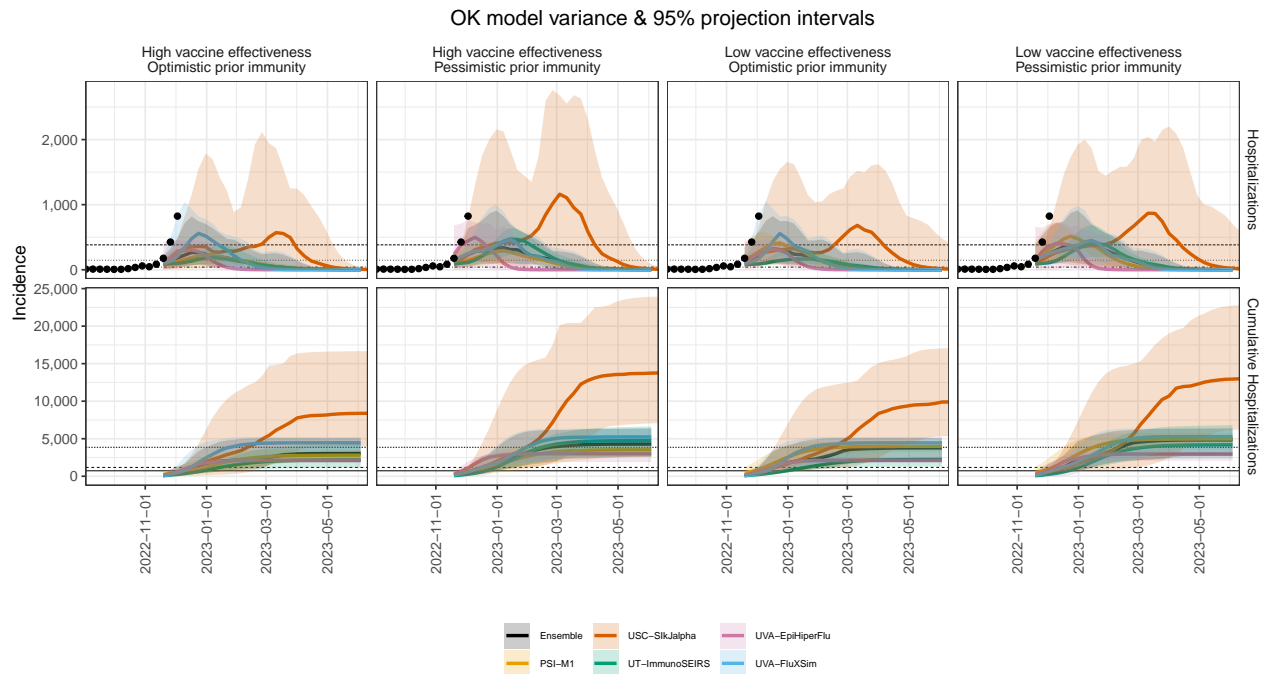
NH model variance & 95% projection intervals

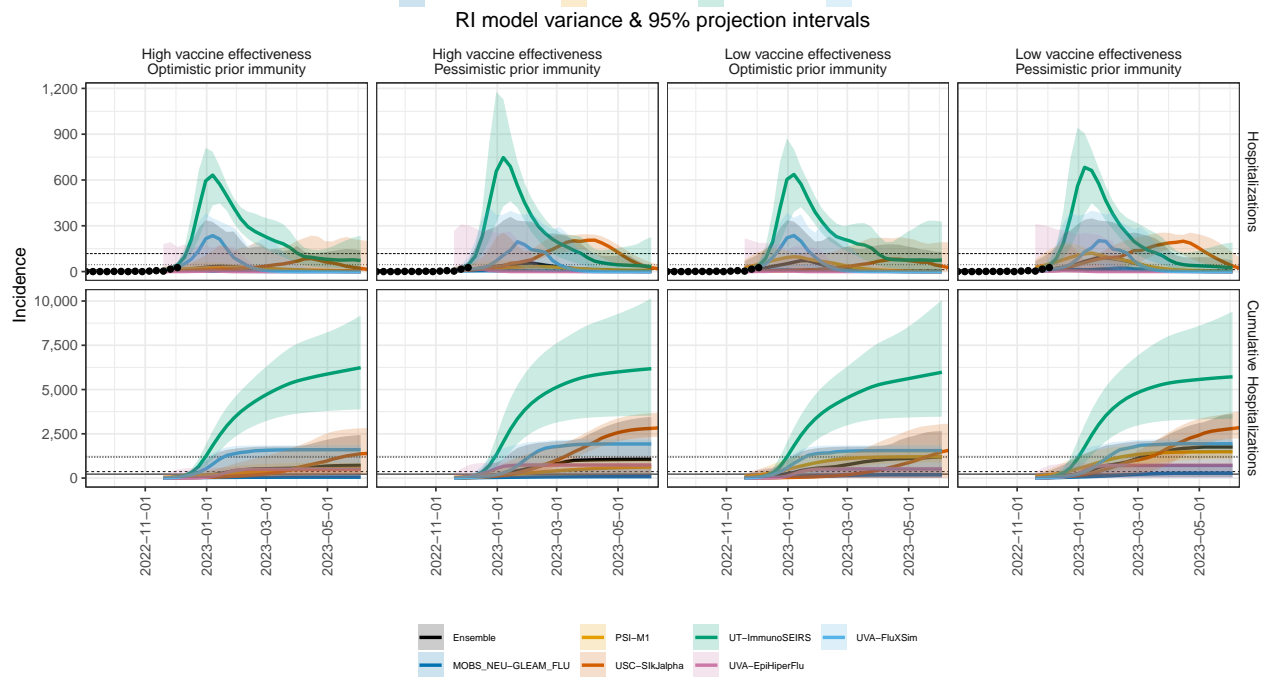
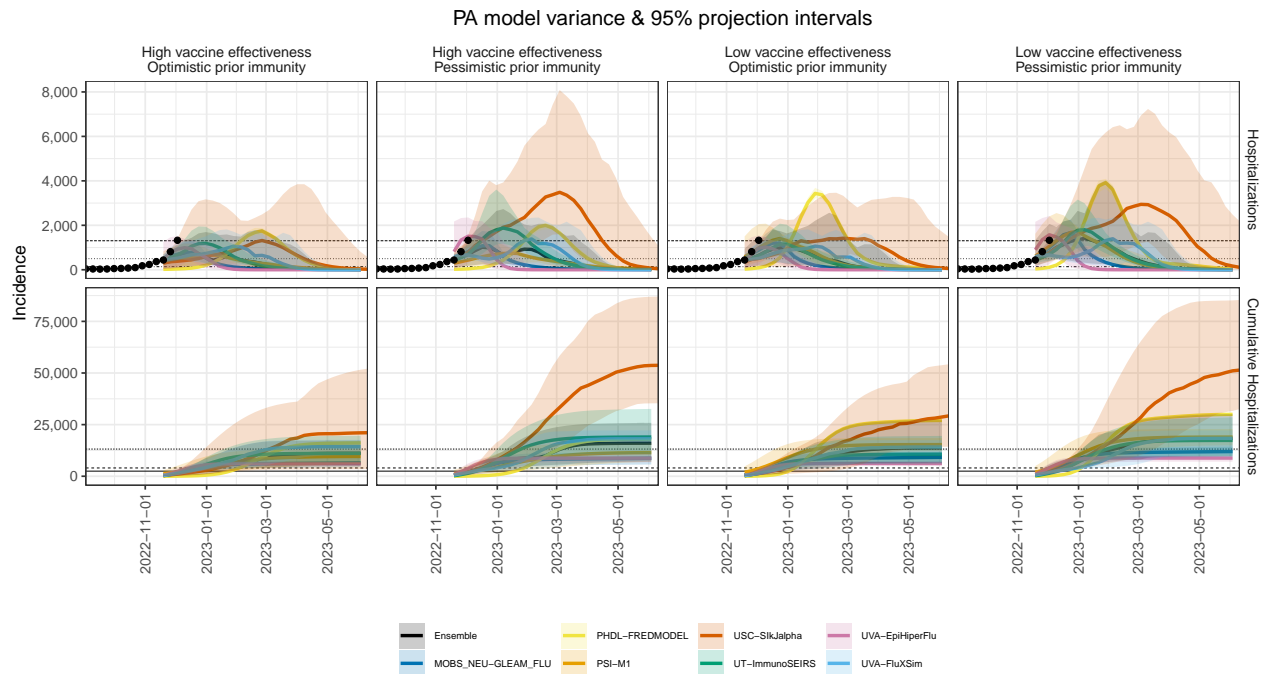


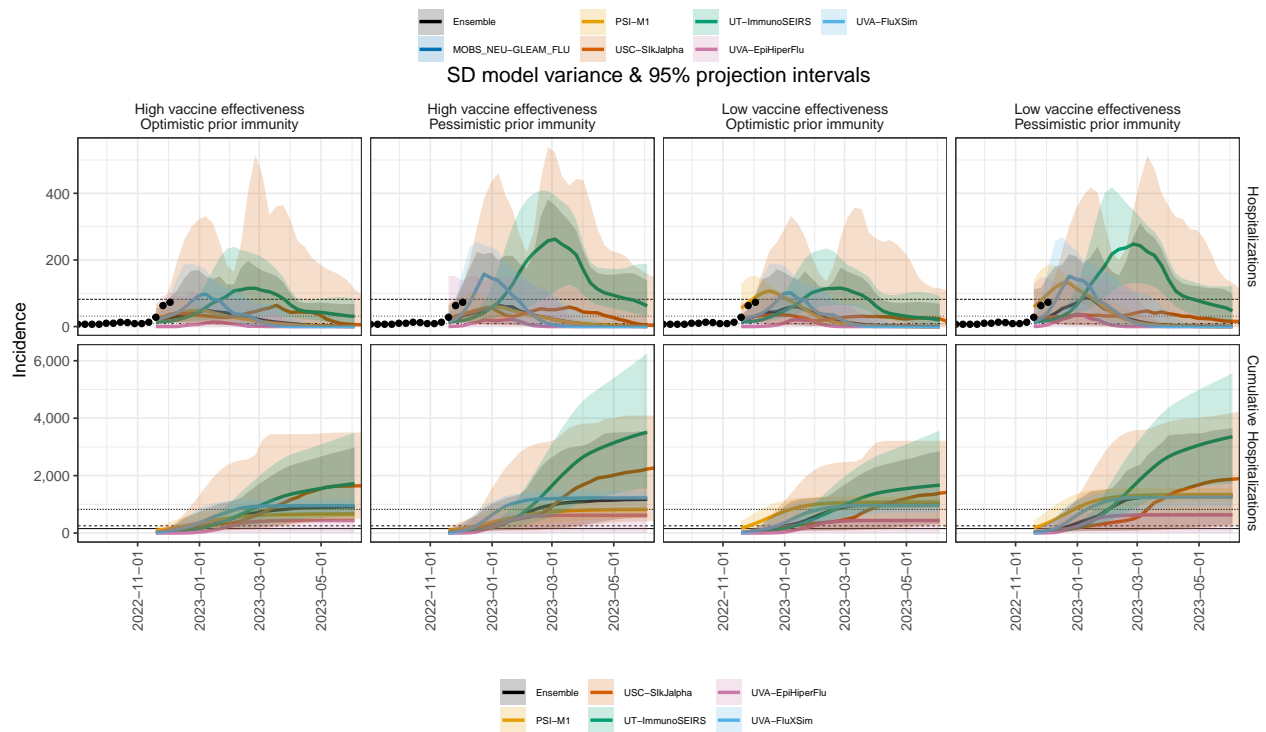
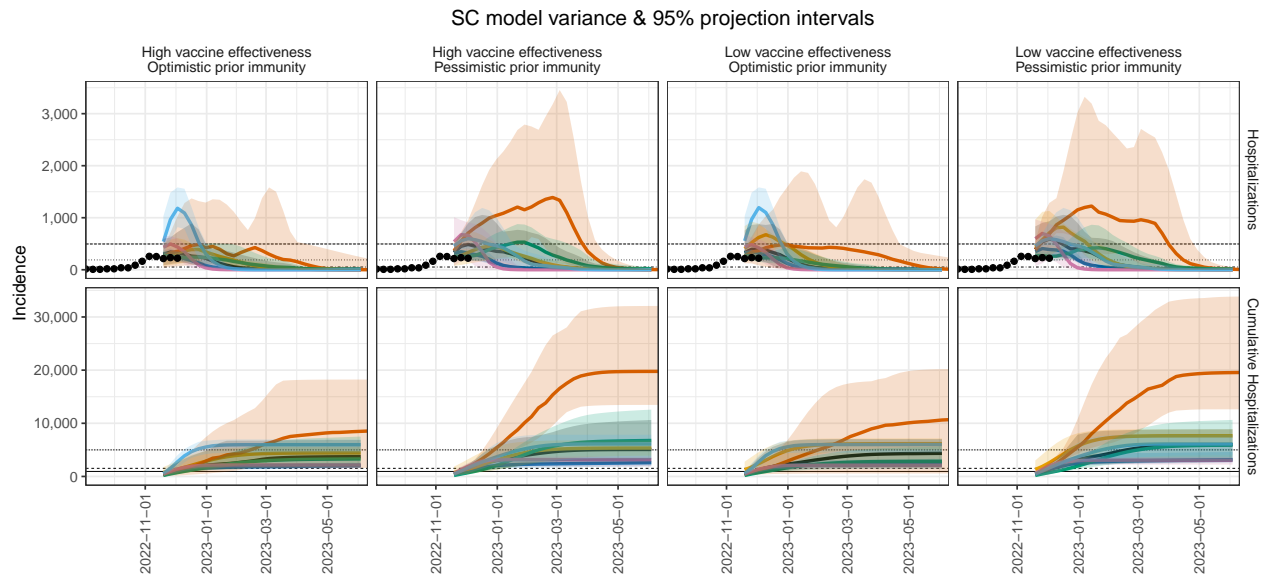




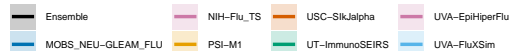
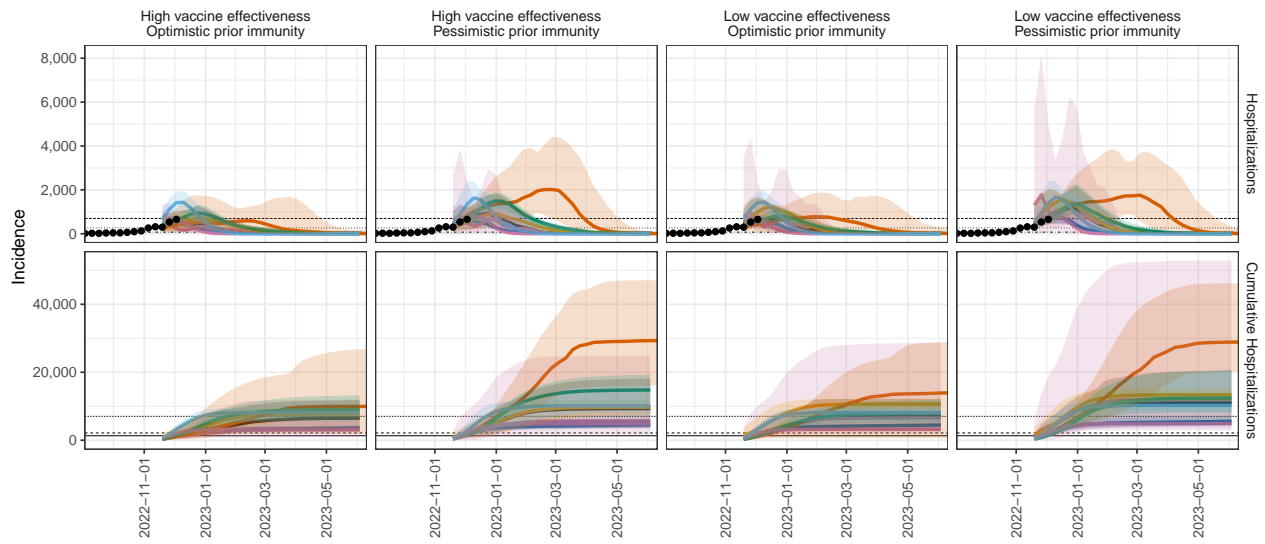




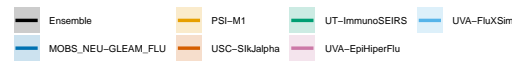
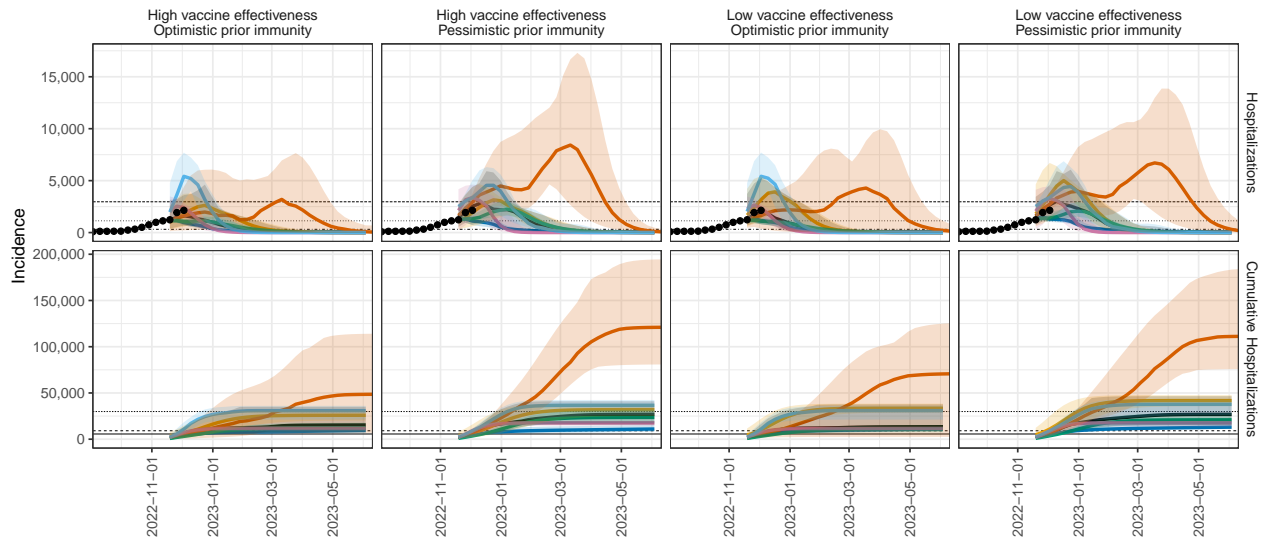


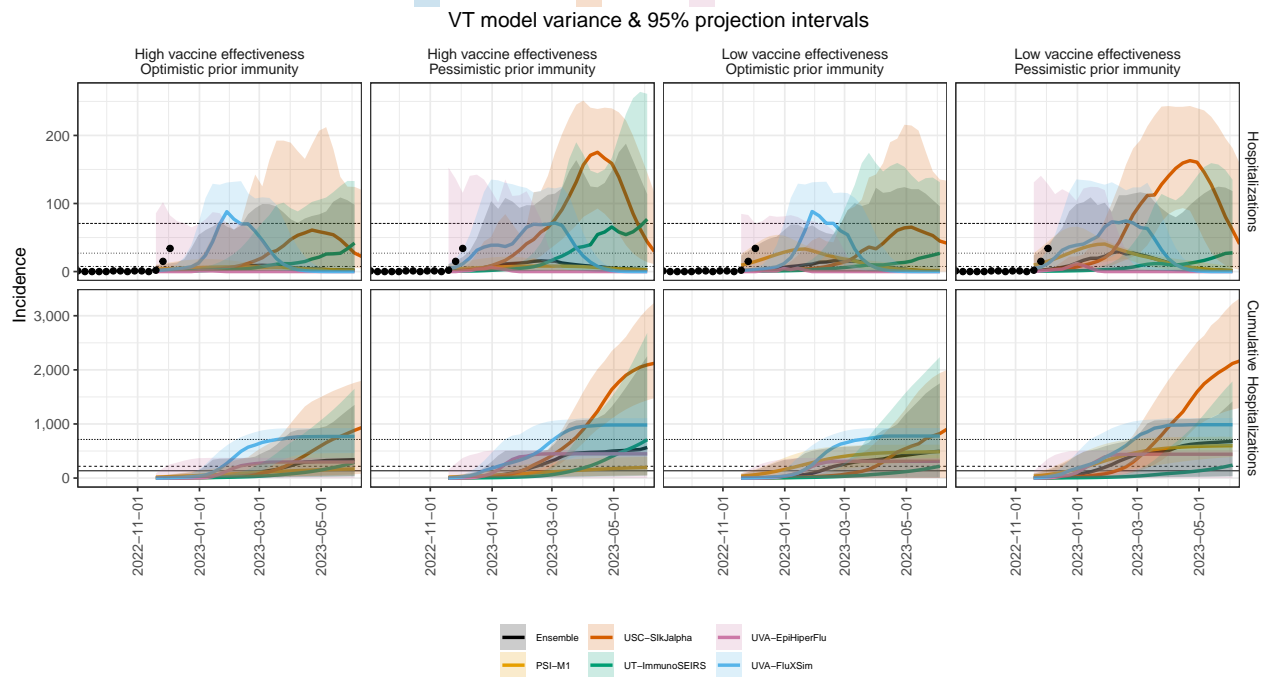
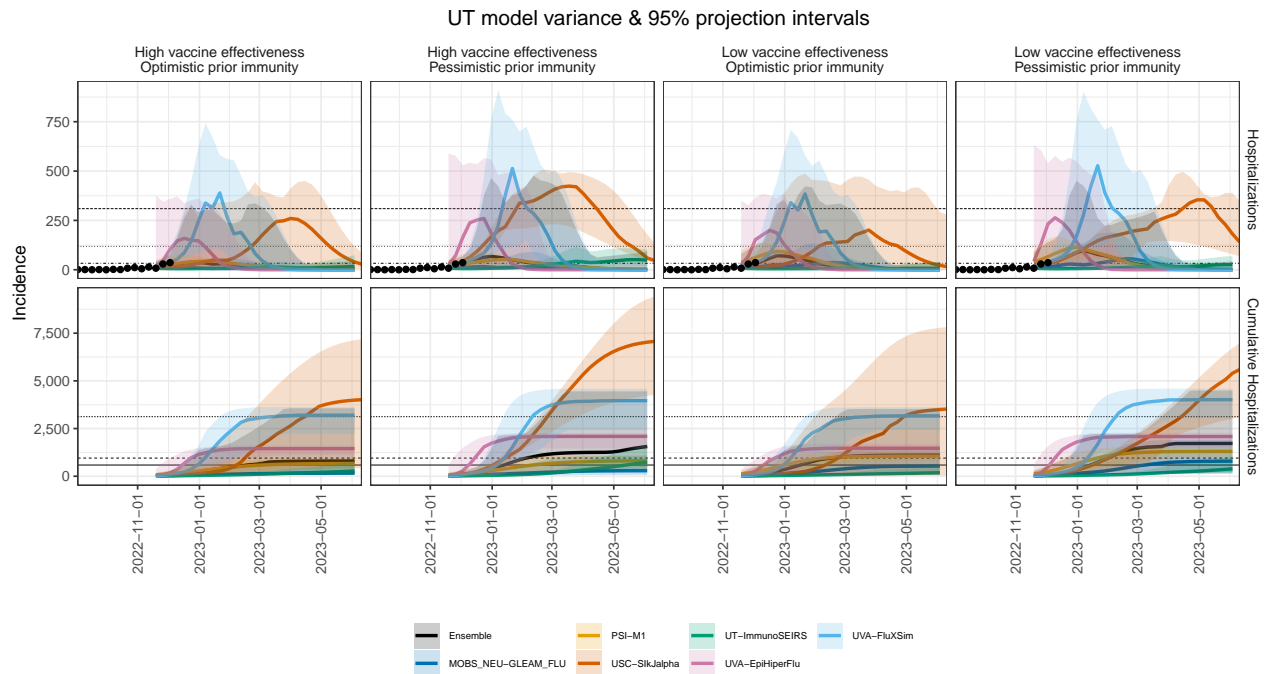


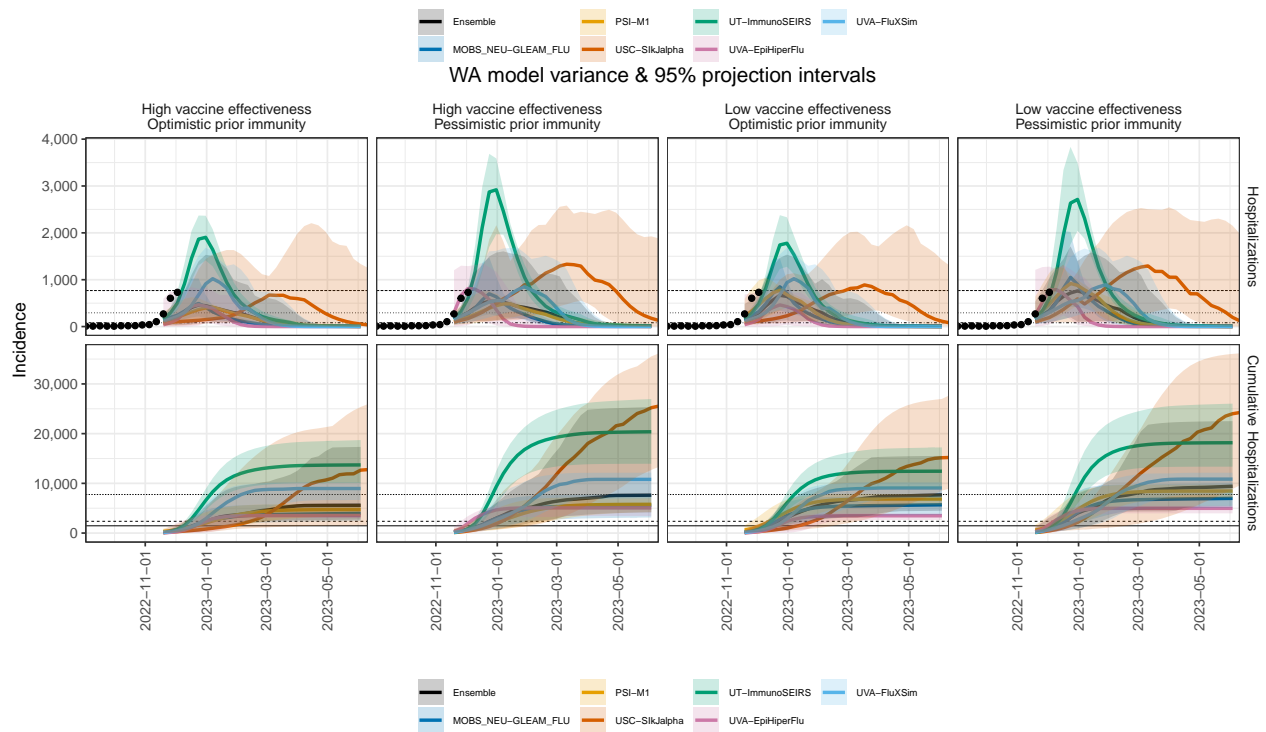
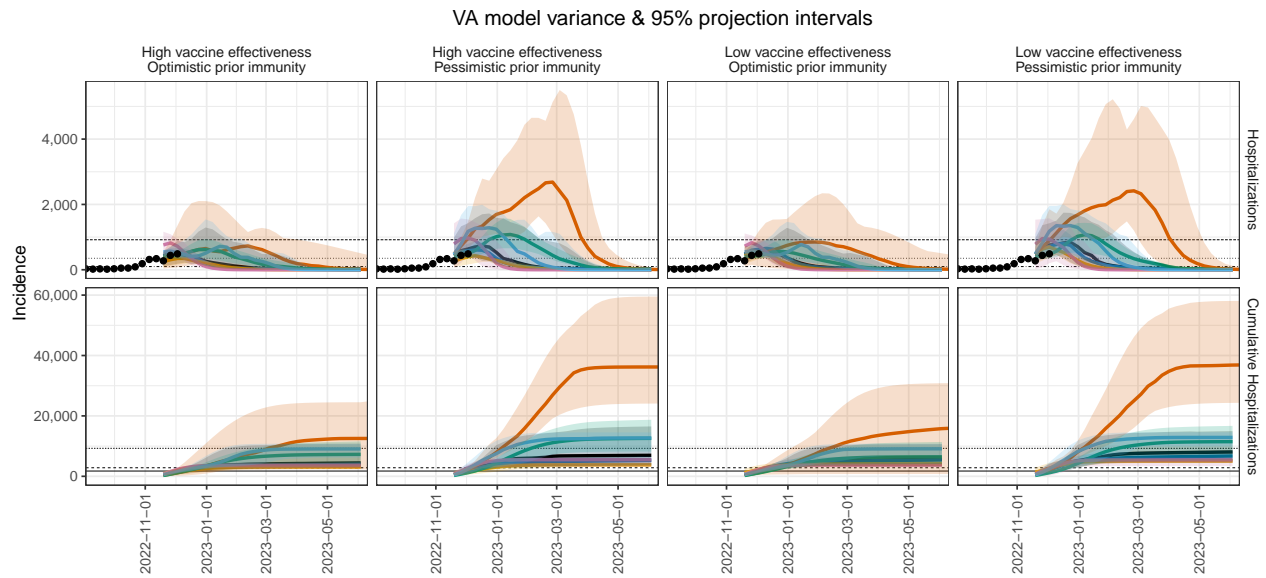
TN model variance & 95% projection intervals

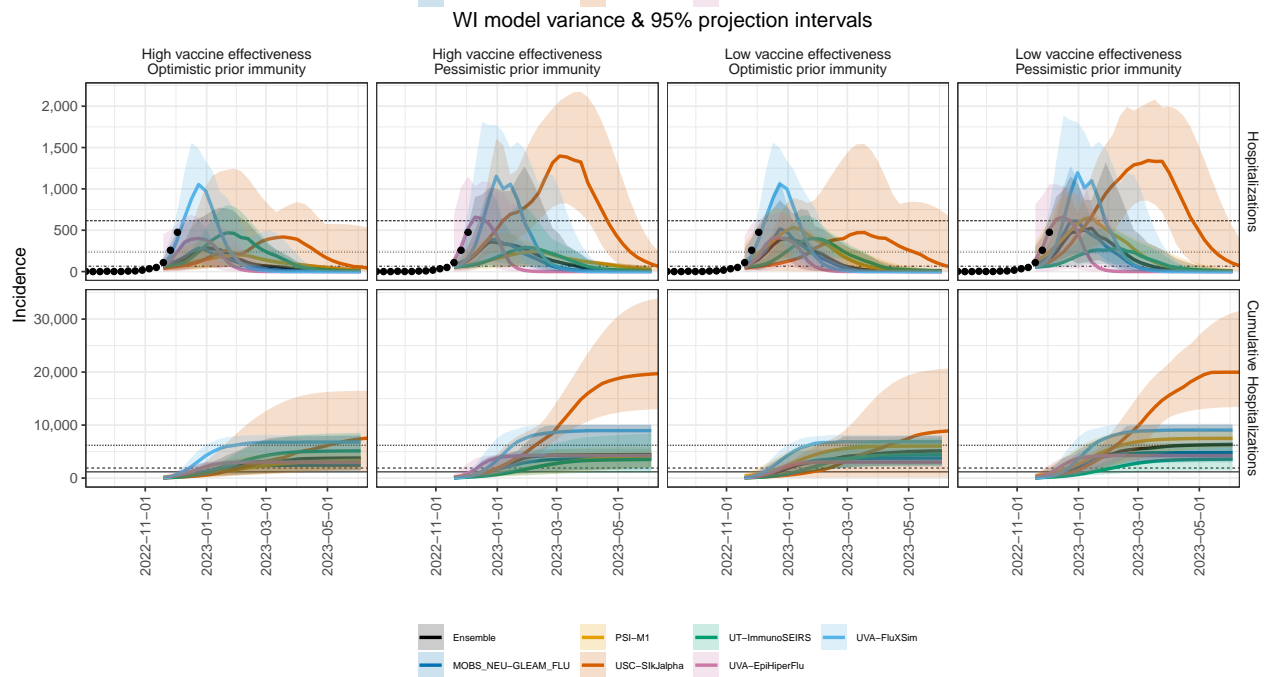
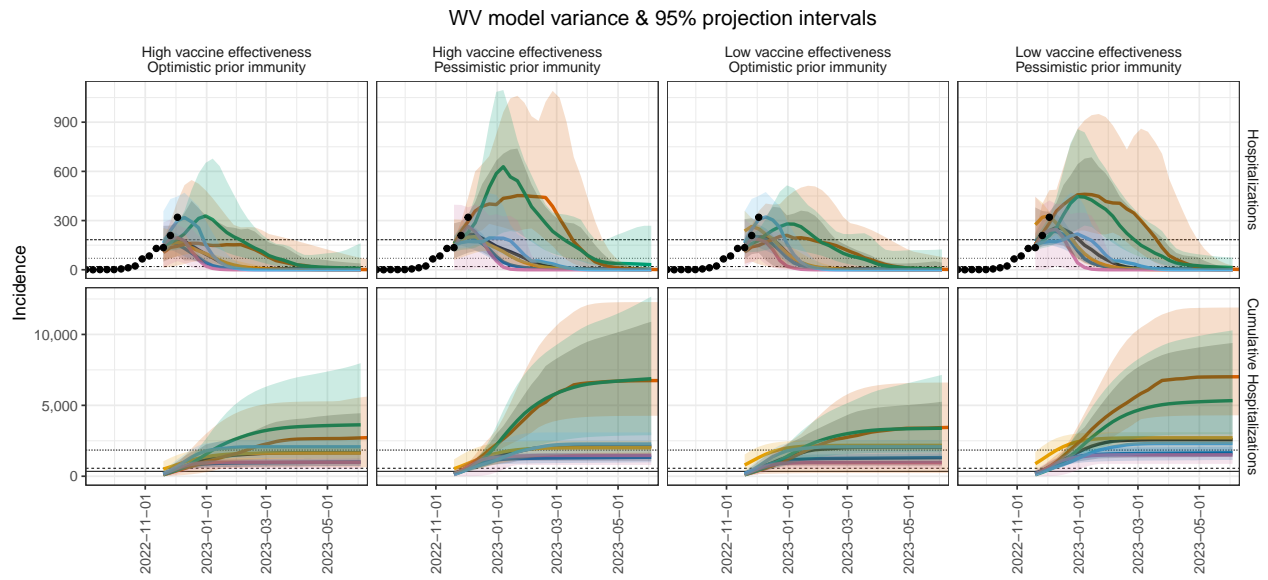


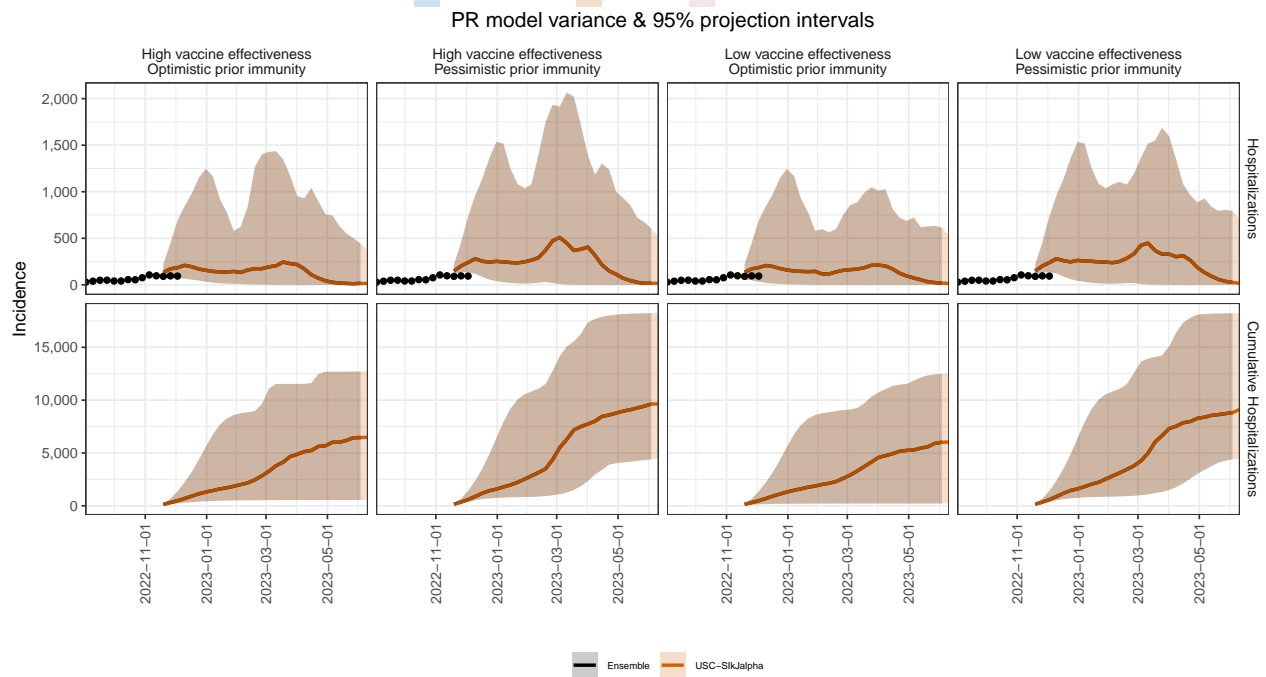
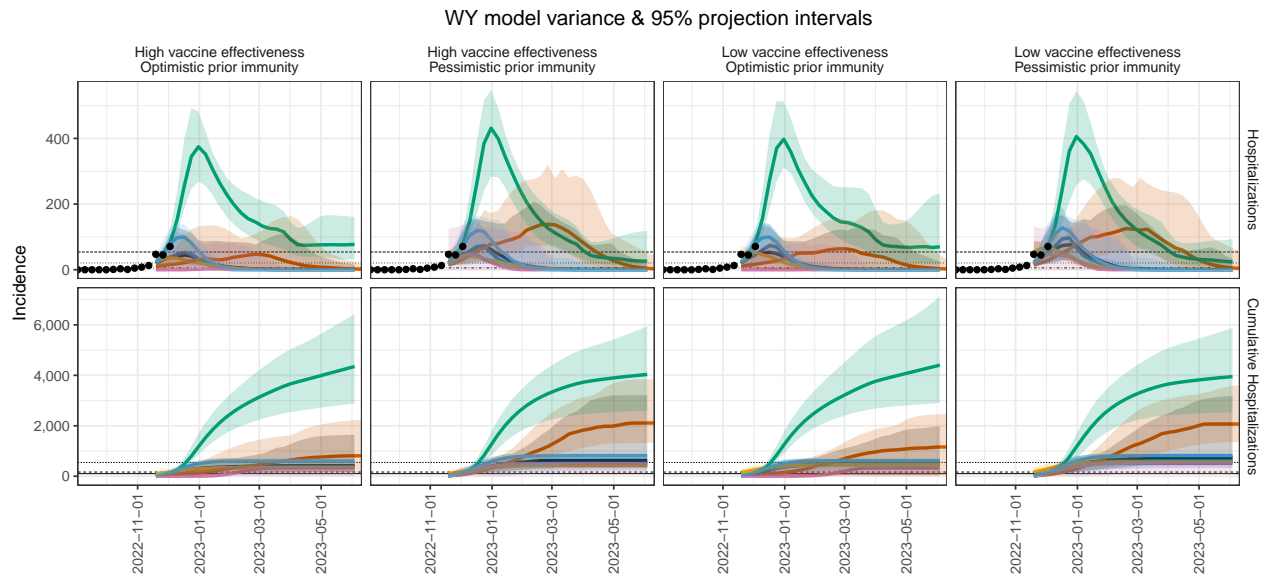
TX model variance & 95% projection intervals











Teams and models

- California Department of Public Health — FluCAT
 - White, L.A. (CADPH), Murray, E. (CADPH), Leon, T.M. (CADPH)
- Center For Disease Dynamics, Economics & Policy — FluCompModel
 - Fardad Haghpanah, Eili Klein
- Northeastern University MOBS Lab — GLEAM FLU
 - Matteo Chinazzi (Northeastern University, Boston, MA), Jessica T. Davis (Northeastern University, Boston, MA), Kunpeng Mu (Northeastern University, Boston, MA), Alessandro Vespignani (Northeastern University, Boston, MA)
- Fogarty International Center, National Institutes of Health (NIH) — Flu_TS
 - Amanda Perofsky (NIH), Cécile Viboud (NIH)
- University of Notre Dame — FRED
 - Guido Espana, Sean Moore, Alex Perkins
- University of Southern California — SIKJalpha
 - Ajitesh Srivastava, Majd Al Aawar
- University of Texas — ImmunoSEIRS
 - Kaiming Bi (The University of Texas at Austin), Anass Bouchnita (The University of Texas at El Paso), Spencer J. Fox (The University of Georgia), Lauren Ancel Meyers (The University of Texas at Austin), UT COVID-19 Modeling Consortium.
- University of Virginia Biocomplexity Institute — EpiHiper
 - Jiangzhuo Chen (UVA), Stefan Hoops (UVA), Parantapa Bhattacharya (UVA), Dustin Machi (UVA), Bryan Lewis (UVA), Madhav Marathe (UVA)
- University of Virginia Biocomplexity Institute — FluXSim
 - Sridhar Venkatramanan, Aniruddha Adiga, Przemek Porebski, Brian Klahn, Benjamin Hurt, Bryan Lewis (UVA), Madhav Marathe (UVA)
- Fogarty International Center, National Institutes of Health (NIH) — FluD
 - Samantha Bents (NIH), Cécile Viboud (NIH)
- Public Health Dynamics Laboratory — FREDMODEL
 - Mary G Krauland
- Predictive Science — M1
 - Ben-Nun M (Predictive Science), Turtle J (Predictive Science), Riley P (Predictive Science)

The Flu Scenario Modeling Hub Coordination Team

- Shaun Truelove, Johns Hopkins University
- Cécile Viboud, NIH Fogarty
- Justin Lessler, University of North Carolina
- Sara Loo, Johns Hopkins University
- Lucie Contamin, University of Pittsburgh
- Emily Howerton, Penn State University
- Rebecca Borchering, Penn State University
- Claire Smith, Johns Hopkins University
- Harry Hochheiser, University of Pittsburgh
- Katriona Shea, Penn State University
- Michael Runge, USGS
- Erica Carcelen, Johns Hopkins University
- Sung-mok Jung, University of North Carolina
- J Espino, University of Pittsburgh
- John Levander, University of Pittsburgh