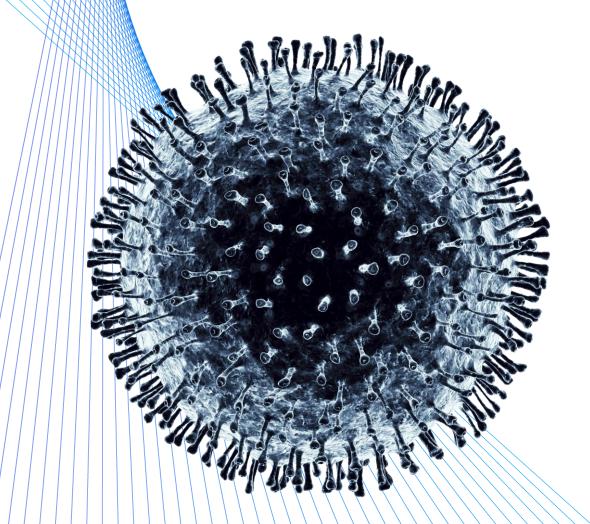


2019-nCoV Acute Respiratory Disease Response

Updated: February 4, 2020



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Executive Summary

2019-Novel Coronavirus Acute Respiratory Disease (2019-nCoV) has caused 24,000 confirmed cases and nearly 500 deaths as of February 4th 2020. 99% of the cases have been in China. The transmission rate of the virus appears to be 1.5-2x higher than the flu, but may fall with public health measures. 20% need hospitalization, and 0.1-2% of all cases are fatal.

A robust Chinese and international response has not prevented a spread of the virus to 25 countries, prompting many countries to suspend flights and take quarantine measures at scale. China, for instance, has instituted history's largest quarantine, and curtailed movement for 60 million people. The World Health Organization declared 2019-nCoV a Public Health Emergency of International Concern, and many countries have instituted travel restrictions. At the time of writing, evidence of the effectiveness of such measures remains limited.

Early estimates suggest a 1-2% reduction in China's GDP growth in Q1 2020 – an impact of \$60B. This will almost certainly have an impact on global growth, driven partly by the much greater structural importance China has in the global economy today. China today is 17% of global GDP – 4X what it was in 2003. Certain sectors – automotive, transportation, high-tech, travel/leisure – are likely to be deeply impacted with significant global ramifications.

Three scenarios for how the situation could evolve:

- Quick Recovery: No new self-sustaining sites established, disease peaks in Q1, existing drugs prove to be effective, reducing fatality estimates. This drives resumption of economic activity in China and globally
- Partial Recovery: A partial industrial restart in China (for some industrial sectors such as automotive), but continued impact to transport, hospitality and other tertiary sectors. Chinese consumer spending does not return in 2020, but impact to the global economy is muted
- Global Pandemic: New information raises the clinical risk to a pandemic, and the global economy considers the virus as the "last straw" that breaks the back of the global economy (building on Brexit, US-China dispute, geopolitical tensions and other factors)

What companies need to do: Besides the basics on protecting employees & following health advisories, we believe now is the time to establish a systematic nerve center to respond to the crisis. The first task of this center needs to be to assess the company's financials in each of the scenarios above, and ensure that there is a robust response for supply chain, pricing, working capital & balance sheet management in place. Next, the company should consider establishing a portfolio of tactics based on clear triggers for when to act.

2019-nCoV acute respiratory disease – basic information

Coronaviruses are common causes of respiratory infections. They have previously been implicated in viral outbreaks, including SARS-CoV and MERS-CoV, but are also responsible for some common colds. The 2019-novel coronavirus acute respiratory disease (2019-nCoV) is a new virus, without known prior human infection.

Our knowledge on the disease characteristics are evolving daily¹...



Transmission rate

1.5-2X



Disease severity

Up to 20%

Rate of people with infections dying

<1/50

higher transmission compared to the flu³

patients have severe disease

Patients are at risk of dying, with refined data to come

1. These numbers reflect the latest thinking at time of writing; information is expect to evolve rapidly and change; this should not replace the latest available information through public health officials

2. Statement by the World Health Organization available online here

3. Evidence on exact numbers are emerging, however expected to decreased as viral containment measures intensify and treatments are developed

of International Concern (PHEIC)

Public Health Emergency

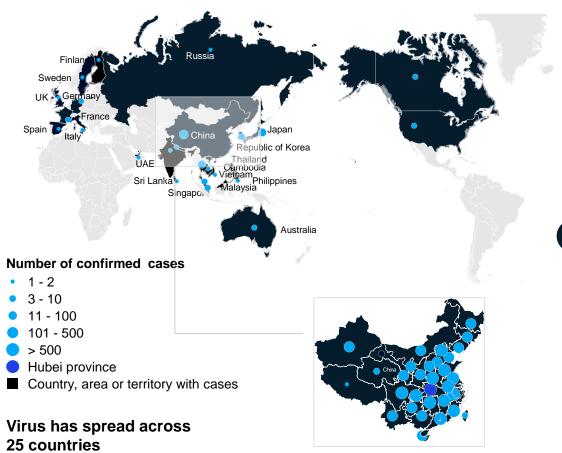
Declaration by the World Health Organization recognizing the outbreak as a public health risk requiring a coordinated international response.

The World Health Organization declared a Public Health Emergency of International Concern on January 30, 2020.²

Historically, declarations of PHEIC led to a number of other societal responses, such as additional travel advisories, market fluctuations and crosscountry collaboration.

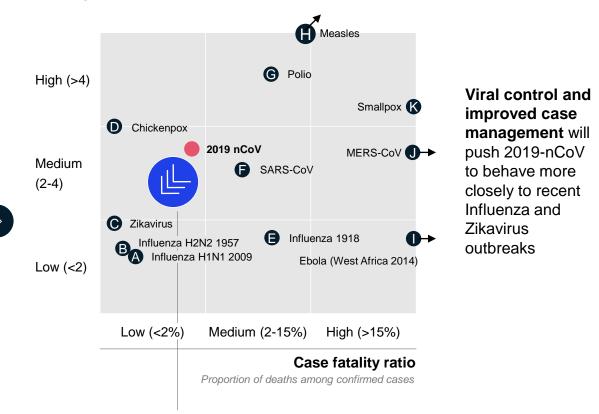
2019-nCoV acute respiratory disease – transmission and spread As of February 4th, 2020

2019-nCoV transmission status



Reproduction number

The average number of individuals infected from each infected individual

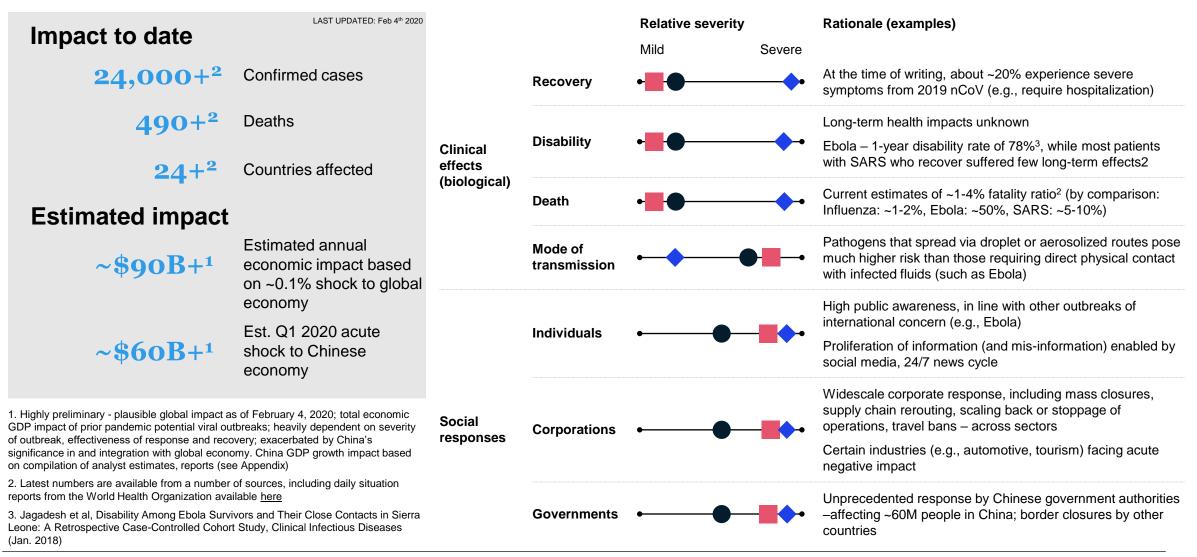


Identification of cases early in the disease (i.e. with fewer symptoms), **intensification of viral control methods**, and **deployment of treatments** (when available) will drive down the reproduction number and reduce case fatality

1. Latest numbers are available from a number of sources, including daily situation reports from the World Health Organization available here

2019-nCoV acute respiratory disease – impact <u>to date</u>

📕 2019-nCoV 🛑 SARS 🔶 Ebola



Key factors that will influence the containment and severity of impact of 2019-nCoV

Differentiati	ng factors relat	ive to the SARS epidemic in 2003 (not exhaustive)	Exacerbating facto				
Clinical effects (biological)		Faster spread of cases - within 5-week window, the total number of cases has already surpassed the total case counts for SARS-CoV (which occurred over 6 months) and MERS-CoV cases (which spanned years)	Mitigating factor				
		Increased individual mobility with higher population density (relative to 2003) likely to increase spread					
		Asymptomatic transmission has not been ruled out; it did not occur with SARS-CoV and was rare (but did occur) with MERS-CoV					
		Healthcare system significantly improved in China since SARS, with increases in public funding for health, improved access to healthcare and modernization of the healthcare infrastructure	Total economic impact of 2019-nCoV dependent on:				
		Improvements in genome sequencing assets, enabling rapid characterization of the virus (e.g., identifying and quarantining the origin, tracking genetic changes during the epidemic)	Effectiveness and speed of				
		Improvements in vaccine development technology and creation of Coalition of Epidemic Preparedness Innovations "CEPI", the leading vaccine development group that led (and funded) the development of the vaccine for MERS	control measures (e.g., containment)				
Socio- economic responses	Individuals	Increased flow of information, driving awareness (e.g., > 9x access to internet today versus 2003); significant media attention	Ability to and effectiveness of treatment – supported by a number of tailwinds (e.g., strengthening of healthcare systems in China, aggressiveness of government action) and Headwinds (e.g., supply chain dependency on Hubei) and tailwinds (e.g., strength of contingency planning by corporations, criticality of suppliers in Hubei)				
		Significant propagation of misinformation given uncontrolled communication					
		Modern transportation infrastructure accelerates spread of infectious disease; launch of high-speed rail in 2008 has quadrupled public transport passenger traffic from 2013 to 2019; timing of outbreak coincided with Lunar New Year, largest annual human migration					
	Companies	Wuhan and Hubei as central hub for multiple industries, e.g., automotive manufacturing (with plants for Nissan, PSA, Honda, GM, Renault, etc.), high-tech (e.g., semiconductor)					
		China as significantly larger contributor to global economic growth today vs 2003 (4% vs. 16% share of global output); Wuhan was forecasted to grow faster than national average in 2020; Chinese economy also more dependent on certain sectors that suffered the most during the SARS outbreak					
		Greater global connectivity and supply chain dependency on China and reliance on Chinese consumption to drive growth – certain sectors heavily exposed (e.g., >\$250Bn Chinese tourist spend a year); in general, greater economic fragility					
	Governments	Aggressive actions to curtail spread of 2019-nCoV at a scale never seen before in history – e.g., restrictions on travel, school / restaurant / company closures; effective quarantine of over 50M people					
		Early recognition of importance of data sharing, evidenced by more openness in rapid publication and dissemination of information (e.g., viral genome)					
		Eikely underreporting of cases given challenges in data collection (e.g., distinguishing between mild and severe cases)					
		Medical supplies, beds, facilities in short supply, exacerbated by lockdown preventing supplies from reaching hospitals; quick actions taken (e.g., building two additional hospitals in <10 days) likely insufficient to meet demand					

Three possible epidemiological scenarios

Stage of	Outbreak		Epidemic		Pandemic	
virus spread						Sustained transmission in 3+
					Sustained transmission in at	regions
				Multi-regional case	least 2 regions	Active and sustained viral transmission in
Potential evolution of			Regional extension Initial outbreak still numbe	Virus has spread to a	Virus has spread to multiple continents with multiple new foci	multiple countries
outbreak to		Localized spread		number of countries,		
pandemic	Localized outbreak	Virus spreads to	has limited spread but with limited evidence with increased of sustained regional transmission transmission observed		of transmission	
	Emergence of more cases than expected	surrounding areas			Scenario 3 : Global pandemic Similar to 1918 Spanish Influenza pandemic	
	at baseline		Scenario 2 : Foci of disseminated transmission		Sustained 2019-nCoV transmission	
Possible scenarios	Scenario 1 : Contained mostly in China Similar to 2014-2015 Ebola outbreak where almost all cases were localized in three West African countries		 Similar to 2003 SARS outbreak Sustained transmission demonstrated in subset of countries Weaker health systems increasing risk 		 across most countries and/or individuals, e.g., 10+ countries, large population at risk Situation becomes new "life as usual", similar to other periodic outbreaks (e.g., 	
	China Cases in Hubei pro May, then progress 	sively decline eases as understanding	 exposure Majority of countries are successful in limiting number of cases 		flu)	

Potential evolution of the macroeconomic situation

Examples of different scenarios to consider as part of contingency planning

- **1** Quick recovery
 - Impact of disease acute for Wuhan and Hubei province, but disease is largely contained
- Supply chains temporarily affected, but economic activity resumes
- Lagging consumer demand recovers

2 Partial recovery

- China restarts economic activity, especially in certain sectors less vulnerable to outbreak impact; supply chain resumes activity
- Weakening of consumer confidence and demand persists in China; however, strong Asia demand overall combined with a strong US economy averts a sustained global slowdown

3 Pandemic

- "Straw that breaks the camel's back" scenario – 2019-nCoV virus outbreak as trigger for global economic recession
- Companies make irreversible decisions such as wholesale shifts in supply chain, distribution channels – supply chain broken, especially in certain sectors
- Governments continue drastic actions
 including border closures, travel bans,
 import/export implications

"What you have to believe" – not exhaustive

Potential

scenarios

- Severity and mortality rate for 2019-nCoV will continue to stay inline with (or below) those of the flu
 Drug cocktail found to be effective
 Individuals can reasonably protect themselves from infection from 2019-nCoV through simple and inexpensive precautions (e.g., washing hands, face masks)
- Global economy more resilient
 against weaknesses

- Near-term treatment options not effective or not readily available; vaccine unlikely to be discovered in near term
- China and more broadly the world learn to live w/ "2 flus" situation, pressing through while vaccine development takes 9-12+ months for development and at-scale production
- Economic pressure plus more insulated industries (e.g., less impacted by consumer demand) means that economy "restarts" in those sectors first

- Potential evolution of disease with severe intensification (e.g., change in mortality rate); lack of treatment options
- Global spread of virus including additional self sustaining sites outside of China; global governments unable to contain/quarantine the virus in the near term
- Global economies unable to react or sustain near-term solvency in face of global quarantines

Leading indicators to monitor

Situation

Confirmation of sustained transmission outside of China



Implication

Most cases outside China have been linked to recent travelers. If evidence emerges of ongoing acquisition of disease in patients who did not travel or have contact with someone returning from China, the potential public health impact of the disease will rise significantly.

Rapid increase in case numbers in affected countries



Many unknowns remain. Rates of transmission in asymptomatic individuals, viral mutations, and decreased efficacy of protective measures, for example, could lead to increases in infection rates. Weaker health systems, in particular, could be at higher risk. This would increase uncertainty on potential recovery.

Signals of supply chain restart



Signals of supply chain restart in China would be an early sign of recovering markets. Early markers could include government reports, social media chatter, firms conversations and / or communications with their customers.

Changes in consumer spending indicators



In epidemic settings with containment measures, consumer spend decreases. Changes in consumer spending indicators, especially in China, India, and broadly globally, may point to potential recovery and / or protracted nature of the situation.

US treasury yield curve



Overall market fluctuations and associated treasury yield curve, especially in the US, will point to overall confidence in market and expected trajectory. Increasingly negative curves may hint to longer economical impacts.

Immediate actions to take in response to 2019-nCoV

Establish control through central nerve center	 Set up and deploy a centralized nerve center focused leading and coordinating all activities related to 2019-nCoV and providing real-time awareness of the evolving situation Ensure nerve center leaders have appropriate decision authority and resources (e.g., financing) to provide steer and make strategic choices Map out stakeholders and oversee coordination, including with relevant public health authorities to source latest information and recommendations, including guidance from the World Health Organization
Protect employees	 Evacuate all expat employees from China and any other heavily afflicted areas Institute work from home policies in high risk areas where possible and avoid all non-essential travel to China and other heavily impacted regions Define and facilitate relevant precautions (e.g. hand-washing, facemasks) and plan for possible screening capabilities in communal work environments
Create purpose	 Be proactive and transparent when communicating with employees, providing relevant updates on clinical and business impacts of 2019-nCoV Assess opportunities to strengthen purpose and morale among employees Consider ways to aide in response efforts (e.g. financial, R&D, medical staff, etc.)
Define scenarios and conduct contingency planning	 Develop contingency plans for prioritized scenarios with trigger-based portfolio of tactics and associated leading indicators required to respond to each scenario Stress test balance sheet and/or liquidity flexibility to understand potential impact of sustained epidemic Assess supply chain impacts and alternatives based on supplier exposure to 2019-nCoV Assess sales and inventory planning to refocus on growth outside the Chinese market in the near-to-mid-term

Examples of trigger-based actions to consider if situation escalates

	Example actions by scenario – high dependent on industry and type(s) of impact					
Area of impact	Partial recovery	Pandemic				
Direct operations, including employees	 Prepare workforce for 'soft restart' Maintain inventory of finished goods to prepare for slow restart of economy 	 Consider workforce ramp down in impacted areas and ramp up in alternate locations Shift operations out of impacted region (e.g., outsourcing or alternate locations) 				
Supply chain and distribution channels	 Assess options for and impact of using existing alternate suppliers in the short term Examine temporary distribution channel changes to maximize flow of goods around impacted areas Complete supply/demand planning to account for multiple pauses/restarts of supply chain 	 Solidify temporary alternate contracts to weather 4-6 month shutdown of supply chains in affected areas Develop alternate paths for single-source materials and inputs Reroute distribution channels away from affected regions 				
Business strategy, including customer and market	 Temporarily refocus sales outside of the region for non-essential goods Increase online sales to compensate for lower in- store, brick-and-mortar traffic Launch cross-channel communications to dispel misinformation and share safety review findings 	 Refocus 1-2 year business strategy on growth areas not impacted by pandemic Halt distribution in impacted areas where market unlikely to recover within 6-12 months Prepare for months-long headwinds in global economic recession, with eventual ramp-up in staggered phases 				
Financial strength, including balance sheet	 Understand existing debt covenants re: financing stability Consider 4-6 month liquidity options Assess options for additional short-term financing for 'soft restart' 	 Consider options for long-term financing (e.g., HoldCo?) 				

Appendix

Bringing the best toolkit to bear on global pandemics

Our Global Health Practice, with McKinsey Crisis Response, bring proven toolkits to pandemic management

Pandemics pose a major threat to global health, social development, and the economy. Frequently they threaten our most vulnerable communities

High-functioning nerve centers, and end-to-end, trigger-based contingency planning, can go a long way towards improving effectiveness and speed of scarce resources in an emergency pandemic situation

Through our work with over 150 public and private crises around the globe in the last decade alone, as well as over 40 engagements disease outbreak management, McKinsey's Global Health Practice, together with McKinsey Crisis Response, have developed multiple tools and approaches that support more effective responses that helps organizations navigate pandemics more effectively



A snapshot of our work in pandemics & crisis response

Over 150 cross-sector crises globally in the last 15 years, including 40 in disease outbreak management

2015: Zika

Supported governments across multiple Latin American countries to respond to Zika, both in the acute phase and in building resilience against the disease

2014: Ebola

2

3

Worked on multiple aspects of the global response, including emergency operations, funding, planning and R&D coordination

2014: MERS-CoV

Supported immediate response & contingency planning for the 2014 MERS CoV outbreak

2009: Influenza

Helped develop a plan to address the threat of pandemic influenza, with a focus on sufficient vaccine production

2019: Twin Cyclones

Helped an NGO improve its Emergency Operations Center after a twin cyclone in Mozambique



Our team of epidemiology and crisis management experts are here to support you

Crisis management experts



Mihir Mysore (Partner, Houston)

Global leader of the Crisis Response Practice with extensive crisis management experience across multiple sectors on topics including crisis preparation, simulation, and response



Linda Liu (Partner, New York)

Core leader in the Crisis Response Practice serving public sector and Fortune 100 clients on enterprise risk management, long-term comprehensive strategic planning, crisis response and preparedness, and regulatory remediation



David Chia (Senior VP, Miami)

Core leader in the Transformation Practice and expert in travel, transportation, logistics, and healthcare strategy and operations in the crisis management context



Ophelia Usher (Expert, New York)

Experience in private and public sector crisis management with specific expertise in threat identification, stakeholder assessment and strategy, and business continuity

Global public health, inc. epidemics



Matt Wilson (Senior Partner, NYC) Overall leader of the Global Health Practice focused on infectious diseases, and healthcare systems and services



Matt Craven (Partner, Silicon Valley)

Leader of our work in Infectious Diseases; Medical doctor with deep expertise in outbreak response; leadership role in the WHO's Ebola Response in Sierra Leone; work on multiple other outbreaks with McKinsey



Michael Conway (Senior Partner, Philadelphia)

Former leader of the Global Public Health Practice and work on multiple prior outbreaks, including Zika, MERS, influenza and Ebola



Sanjiv Baxi (Engagement Manager, Silicon Valley)

Leader in the Healthcare Practice with significant expertise in Epidemiology, serving clients on strategy and operations topics



Marie-Renee B-Lajoie (Engagement Manager, Boston)

Global public health expert focused on response preparedness operations and supply chain

Practicing emergency physician with 10+ years experience in humanitarian response

How we can support clients along two key dimensions

Key activities and deliverables for the first 2-3 weeks



Set up a 'nerve center'

Stand up a central team to maintain a real-time view of the situation and oversee and coordinate response activities

Create stakeholder maps to understand potential impacts on employees, customers, and suppliers

- Best-practice nerve center infrastructure
 - Emergency response leadership construct and response leadership coaching
 - Clearly delineated decision authority
 - Real-time dashboards that display curated, relevant information for decision making
- Communications plan including path for information escalation
- Master planning calendar
- Detailed integrated stakeholder map and stakeholder-specific mitigation strategies

Scenario / contingency planning

Identify and monitor threats and leading indicators

Define range of potential scenarios and associated mitigating actions based on evolution of situation

Develop comprehensive view of risk exposure and, where possible, potential impact

- Externally stress-tested scenario models supported by fact base and evidence
- Contingency plans for each scenario
- Stress testing by dedicated team of the data and policy / action given data uncertainty
- List of prioritized risks including view on likelihood and impact (quantified where possible), leading indicators, potential mitigation actions and owners

Example: Nerve center

