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BULLETIN

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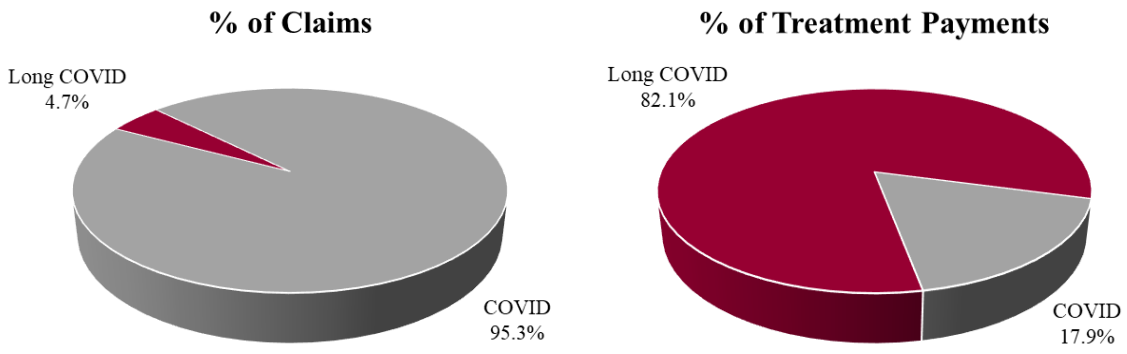
A new CWCI study shows that California workers filed 313,275 COVID-19 claims between 2020 and the end of 2022, and although less than 5 percent of them were "Long COVID" claims that involved medical treatment extending beyond 90 days from the date of injury, the Long COVID claims consumed more than 82 percent of the total medical treatment dollars paid on COVID claims during that period.

While the incidence of new COVID claims in California workers' compensation went from a flood after Governor Newsom declared a COVID-19 state of emergency in March 2020 to a trickle over the last year, the new study comes amid growing concern about a potential COVID surge after the CDC adopted new guidelines that may make it more difficult to obtain COVID-19 vaccines just as the summer travel season hits and the new NB.18.1 COVID variant has been detected in multiple locations around the U.S.

Data from CWCI's Claim Characteristics and Trends Interactive Application shows there were nearly 350,000 COVID-19 claims filed between 2020 and the end of 2024. More than 90 percent of those claims involved 2020-2022 injury dates, so for its analysis of Long COVID claim characteristics and treatment the Institute focused on claims from within that timeframe, using its Industry Research Information System (IRIS) database to compile a sample of 126,397 insured and self-insured COVID and Long COVID claims from AY 2020 through AY 2022. A review of the claims data showed that while most COVID claims were relatively inexpensive due to little to no medical intervention (only 14.6 percent received medical treatment), 4.7 percent – or nearly 6,000 of them – were Long COVID claims that involved long-term medical conditions that either impeded or prevented the claimants from returning to work and resulted in significant cost. Total payments for medical treatment on the COVID-19 claims amounted to $128.4 million, with Long COVID claims accounting for $105.5 million, or 82.1 percent, of that total.

Distribution of Claims and Treatment Payments: COVID & Long COVID Claims (AY 2020 – AY 2022)



The distribution of the total COVID-19 claim payments (medical, indemnity and expense) for all COVID-19 claims showed that the 4.7 percent of the COVID claims that involved Long COVID consumed nearly three quarters (73.7 percent) of the total payments while the shorter duration COVID claims accounted for just over one quarter (26.3 percent) of the payments. A breakdown of the average medical, indemnity, and total claim payments by body part

found that the average amount paid for a Long COVID claim was significantly higher than for other COVID claims, regardless of the body part involved. Overall, Long COVID cases resulted in average medical payments that were 105 times higher, and average indemnity payments that were 37 times higher than other COVID claims. The breakdown by body part found that the difference in the total amount paid per claim was most pronounced when the injury involved the lungs, multiple body parts, and "other" body parts.

A closer look at the medical data showed that Long COVID can affect several organs within the body and present as several different diagnoses, as evidenced by the distribution of the Long COVID claims by diagnostic category. The top 10 diagnostic categories associated with the Long COVID claims encompassed a wide range of organ systems, including respiratory (17.8 percent); circulatory (9.0 percent); nervous (8.7 percent); connective, soft tissue and bone disorders (5.2 percent); endocrine systems (4.9 percent); as well as mental health (4.4 percent), and digestive conditions (3.4 percent). Together the top 10 diagnostic categories associated with the Long COVID claims in the study sample accounted for 80.3 percent of all the diagnoses on these claims, highlighting the multisystem nature of Long COVID.

Given the diversity of diagnoses associated with the Long COVID claims, these claims also utilized a broader range of medical services than shorter duration COVID claims. Among COVID claims that lasted less than 90 days and received medical services, Evaluation & Management (E&M) services represented nearly 80 percent of the total outpatient medical payments. In contrast, among Long COVID claims, E&M services accounted for just 34.6 percent of the outpatient medical payments, while other service categories, such as Physical Medicine (11.6 percent), Pharmacy (10.6 percent), Medical Treatment (9.0 percent), Surgery (5.6 percent), and Mental Health (5.6 percent), contributed an increased share of the total outpatient medical payments. The data also showed that among Long COVID claims, the percentage of payments for non-E&M services increased sharply over time. For example, during the first year of development, reimbursements for E&M declined from 61.5 percent to 40.6 percent of total medical payments, while physical medicine payments rose from 0.9 percent to 13.1 percent; medical treatment payments jumped from 2.4 percent to 10.3 percent; mental health payments increased from 0.9 percent to 6.1 percent; and pharmacy reimbursements went from 5.7 percent to 9.3 percent.

Demographic detail from the claims revealed significant differences in the distribution of Long COVID and COVID claims based on claimant age, with injured workers who were 45 years old or older accounting for a larger share of the Long COVID claims and workers under the age of 45 accounting for a larger share of the shorter-duration COVID claims. As with many other types of injury claims, men represented a higher share of COVID-19 claims than women, at least partly due to the greater proportion of men in the California work force, though the study found no significant differences between the gender distributions for COVID and Long COVID claims, as men accounted for 55 percent of COVID claims lasting less than 90 days, and 56 percent of the Long COVID claims. However, during the study period, males filed 58.4 percent of all California workers' compensation claims, so relative to other types of injury and illness claims, males represented a smaller share of the COVID and Long COVID claimants, while females represented a larger share.

CWCI has published its study in a Research Note, **Long COVID-19 Claim Characteristics and Treatment in California Workers' Compensation**. CWCI members and subscribers can log on to www.cwci.org to access the report under the Research tab, others can purchase a copy from CWCI's online Store.

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