



# COVID-19 ACTIVITY REPORT

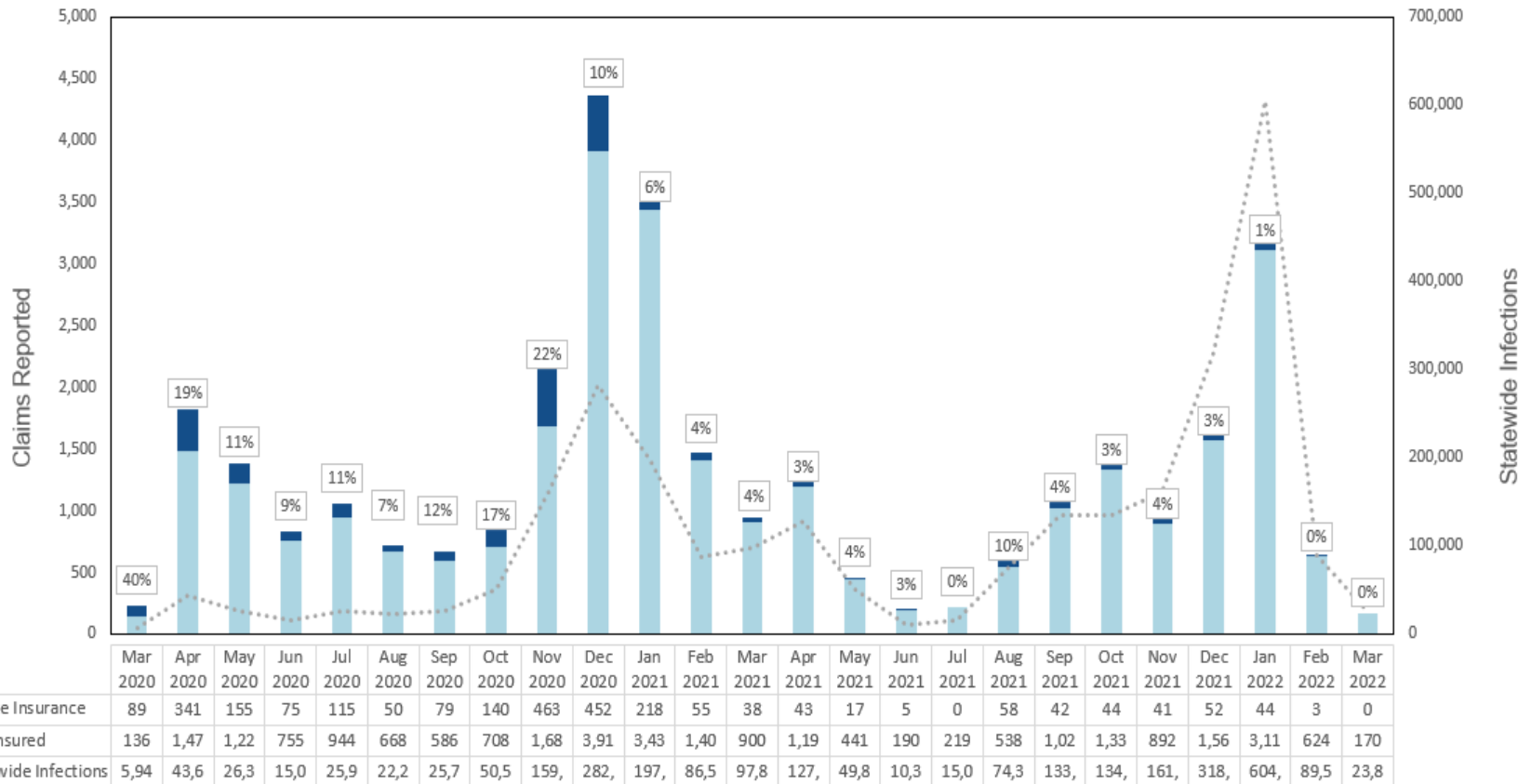
# 2022

# Table of Contents

	Page Number:
PA COVID-19 Infection Rates and WC Claim Counts	3
Share of Claims by Type of Injury	4
Open Claim Severity by Type of Claim	5
Closed Claim Severity by Type of Claim	6
Distribution of Claims and Incurred Losses by Type of Claim	7
Indemnity Claim Distribution by Incurred Loss Size	8
Indemnity Claims Closure Rates	9
Distribution of COVID-19 Indemnity Claims by Class	10
Indemnity Claims Reporting Patterns	11
Claimant Age Distribution	12
Weeks of Temporary Disability Payments	13
Medical Payments by Category	14
Medical Payments for Mental Health Claims	15
Medical Payments for Telemedicine	16
Long COVID-19 Claims	17

# PA COVID-19 Infection Rates and WC Claim Counts

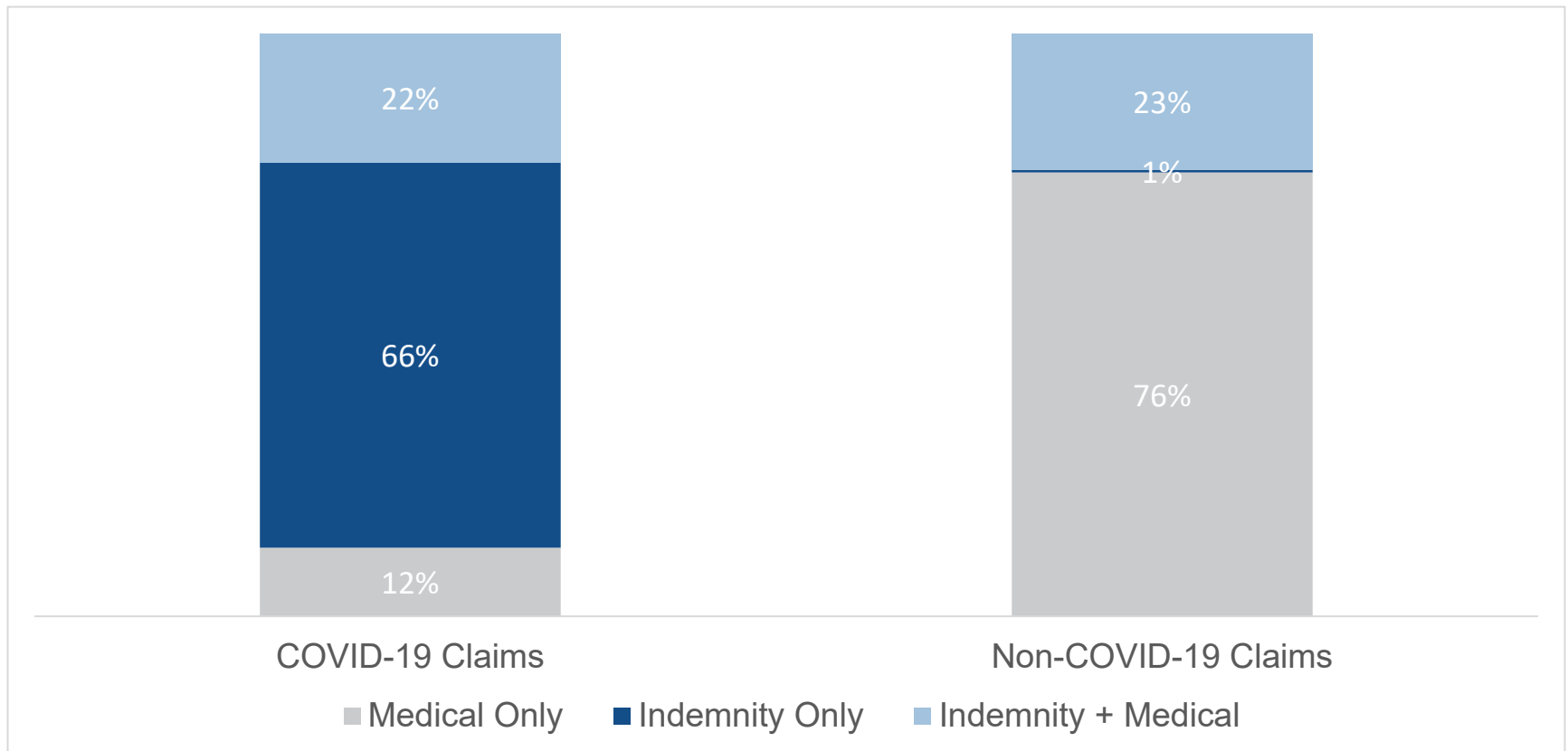
Pennsylvania Workers Compensation (WC) claims align with the overall statewide infection rate patterns across the waves of the pandemic. Claims covered through private insurance were a much smaller percentage of those claims covered thru the self-insured market.



Source: PA Department of Labor and Industry COVID Claim Statistics, New Workers Compensation Claims Received, PCRB Indemnity Data Call

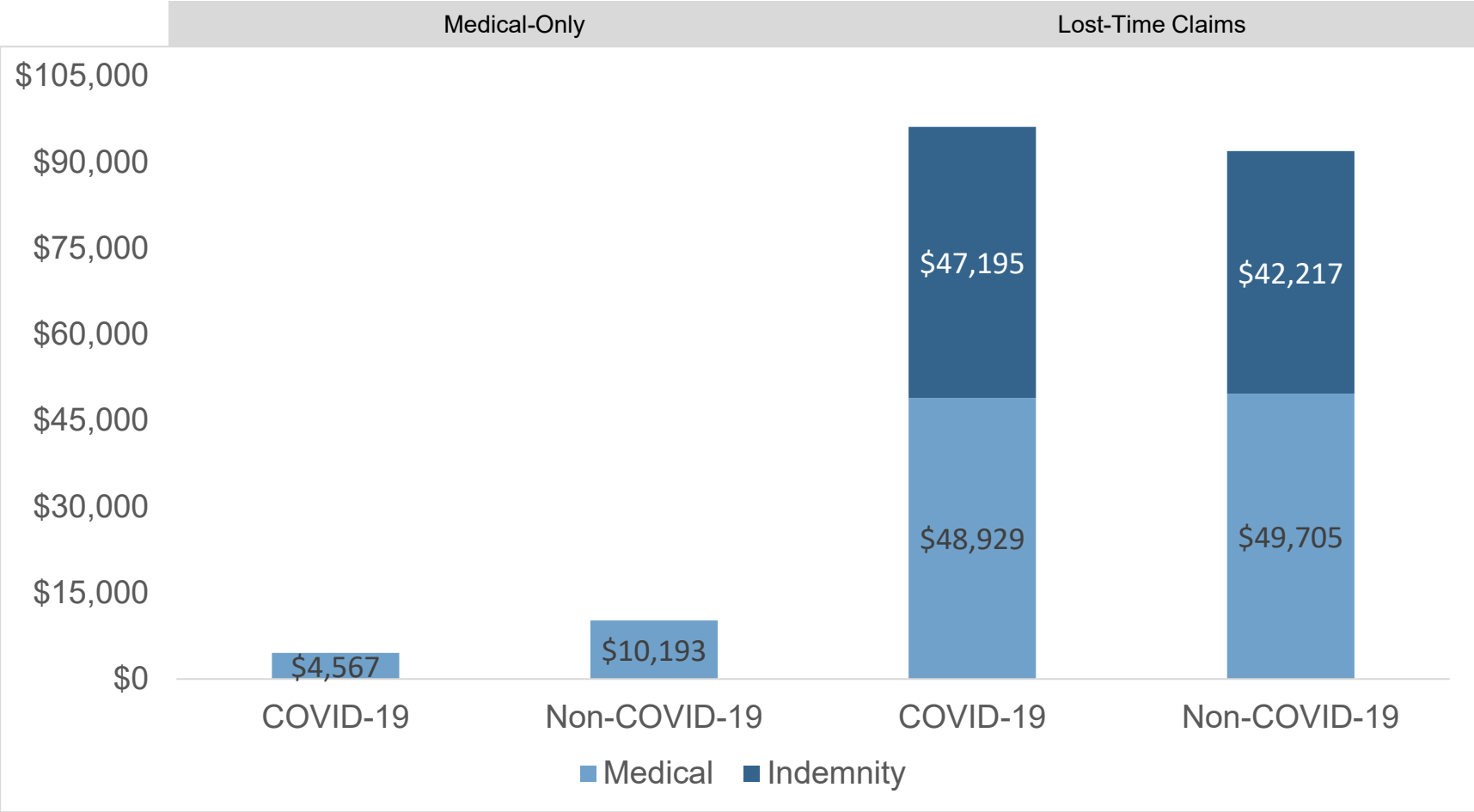
# Share of Claims by Type of Injury

COVID-19 Workers Compensation claims are categorized as: Medical-Only, Indemnity-Only and indemnity claims with an associated medical component (Ind + Med). Historically, Medical-Only claims make up most of the WC claims. Unlike this typical distribution, most COVID-19 claims are Indemnity-Only.



# Open Claim Severity by Type of Claim

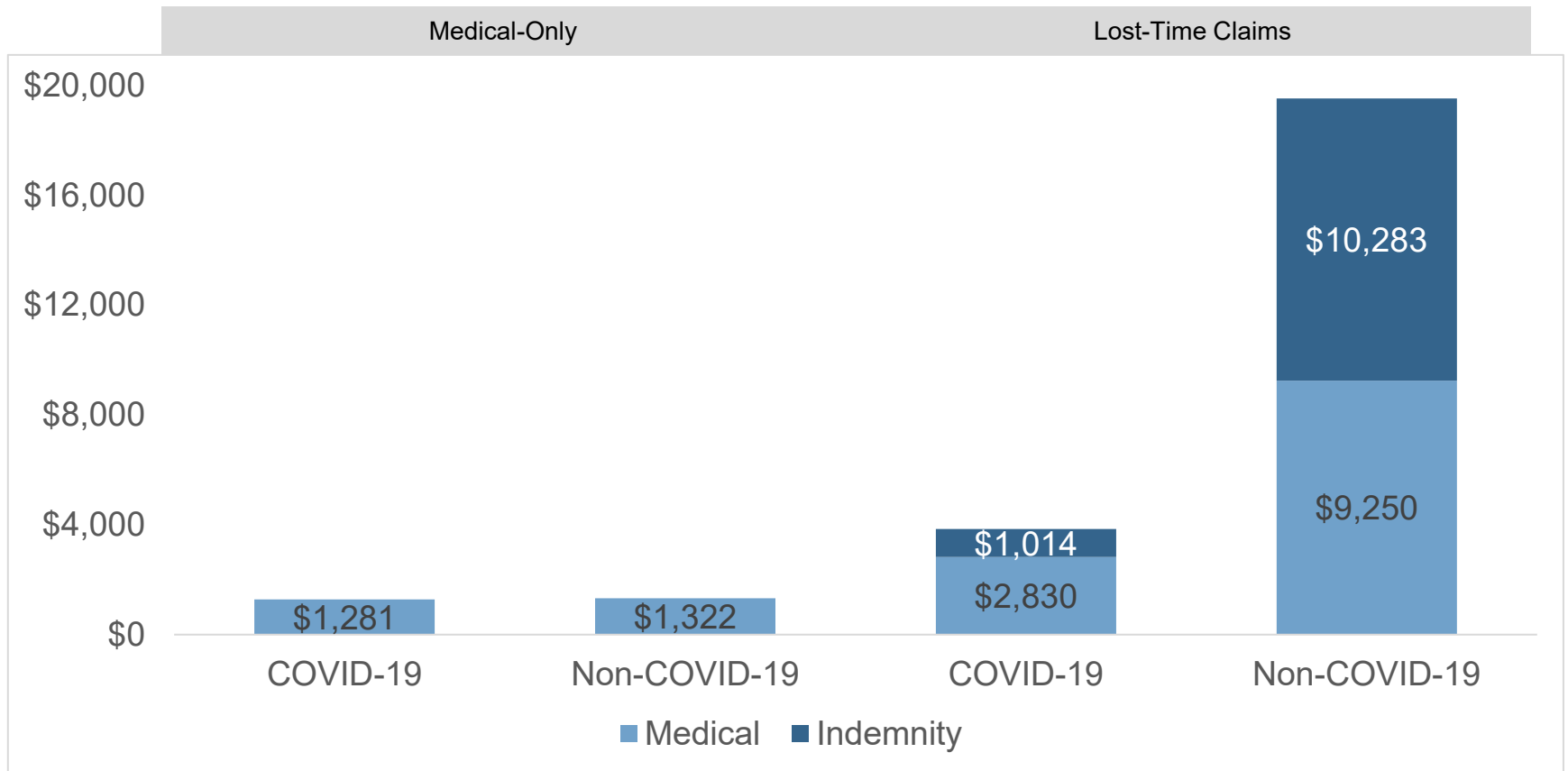
The average severity of open COVID-19 WC claims is less than Non-COVID-19 claims for Medical Only add claims and larger for Lost time claims.



Source: PA Unit Statistical Reports for Accident Dates 4/1/20-6/1/22 submitted by January 31, 2023.

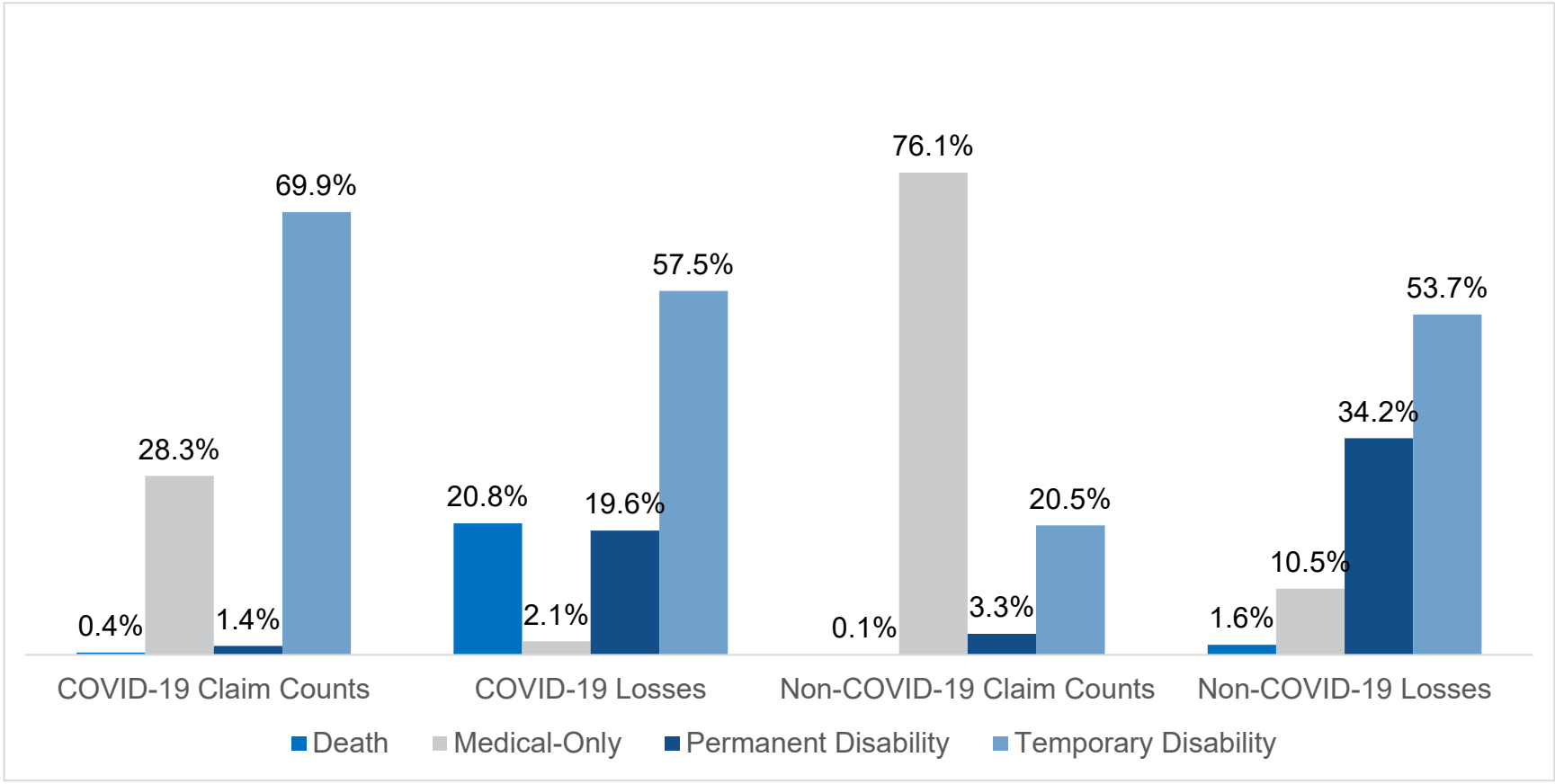
# Closed Claim Severity by Type of Claim

The average severity of closed Medical Only claims is similar for COVID-19 and Non-COVID-19 claims. The average severity of closed Lost Time claims is much higher for Non-COVID-19 claims than COVID-19 claims.



# Distribution of Claims and Incurred Losses by Type of Claim

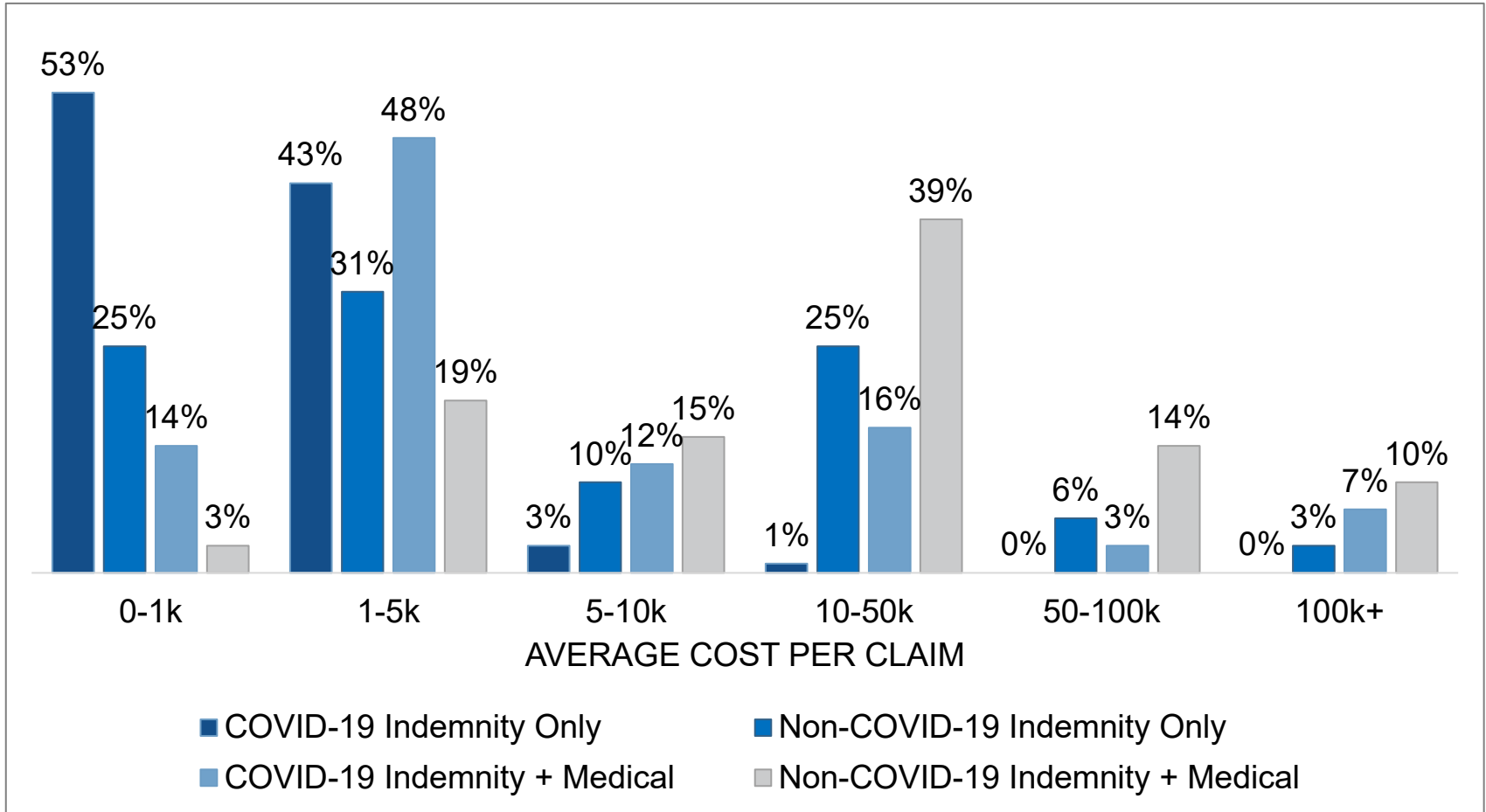
The majority of claim counts and losses for COVID-19 claims are Temporary Disability claims. For Non-COVID-19 claims, the majority of losses are Temporary Disability claims.



Source: PA Unit Statistical Reports for Accident Dates 4/1/20-6/1/22 submitted by January 31, 2023.

# Indemnity Claim Distribution by Incurred Loss Size

Most COVID-19 Indemnity Only and Indemnity + Medical claims have a cost equal to or less than \$5,000. There are 63% Non-COVID-19 claims that exceed at least \$10,000 per claim while only 26% of COVID-19 claims are greater than \$10,000.

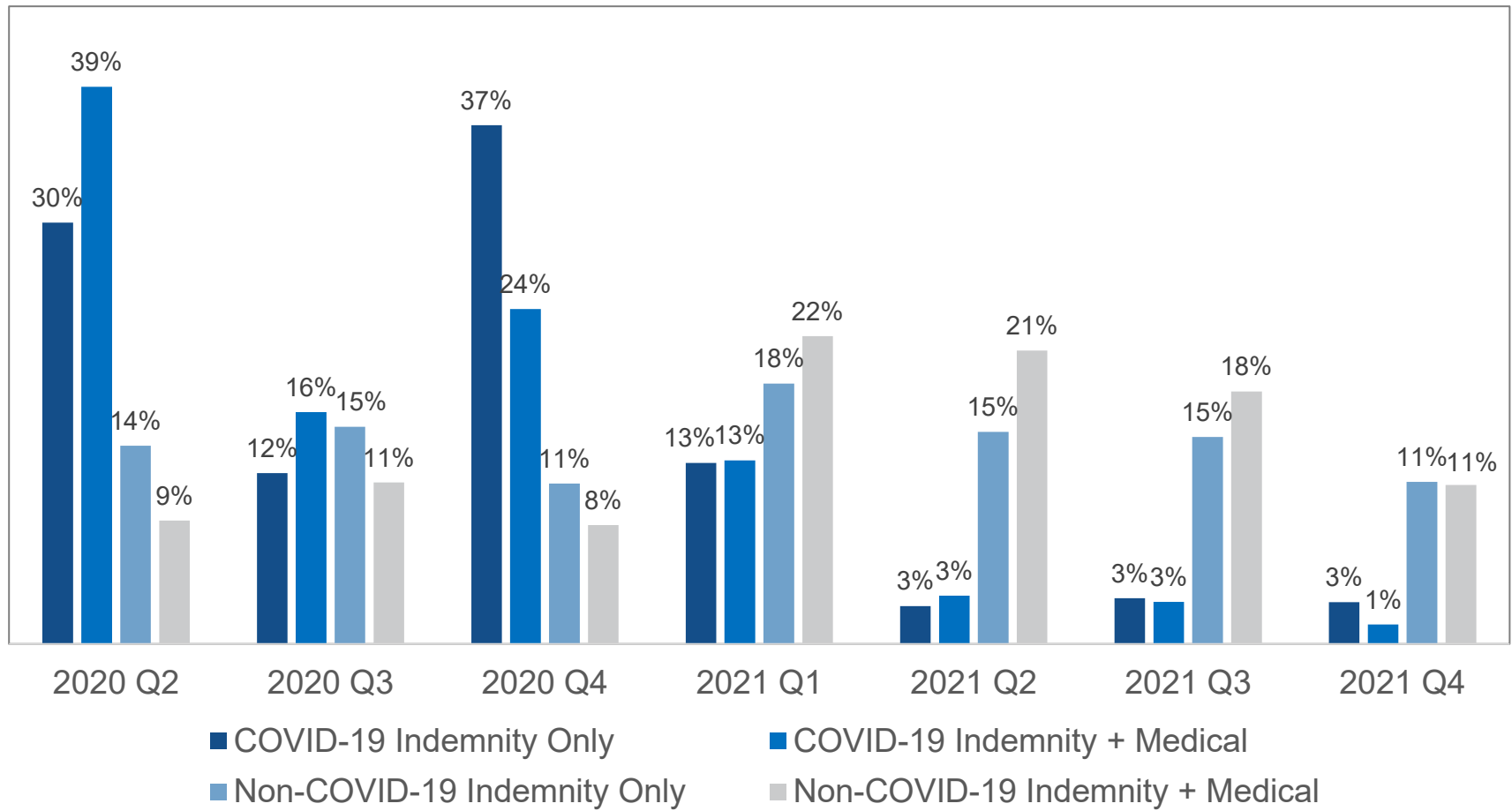


Source: PA Unit Statistical Reports for Accident Dates 4/1/20-6/1/22 submitted by January 31, 2023.



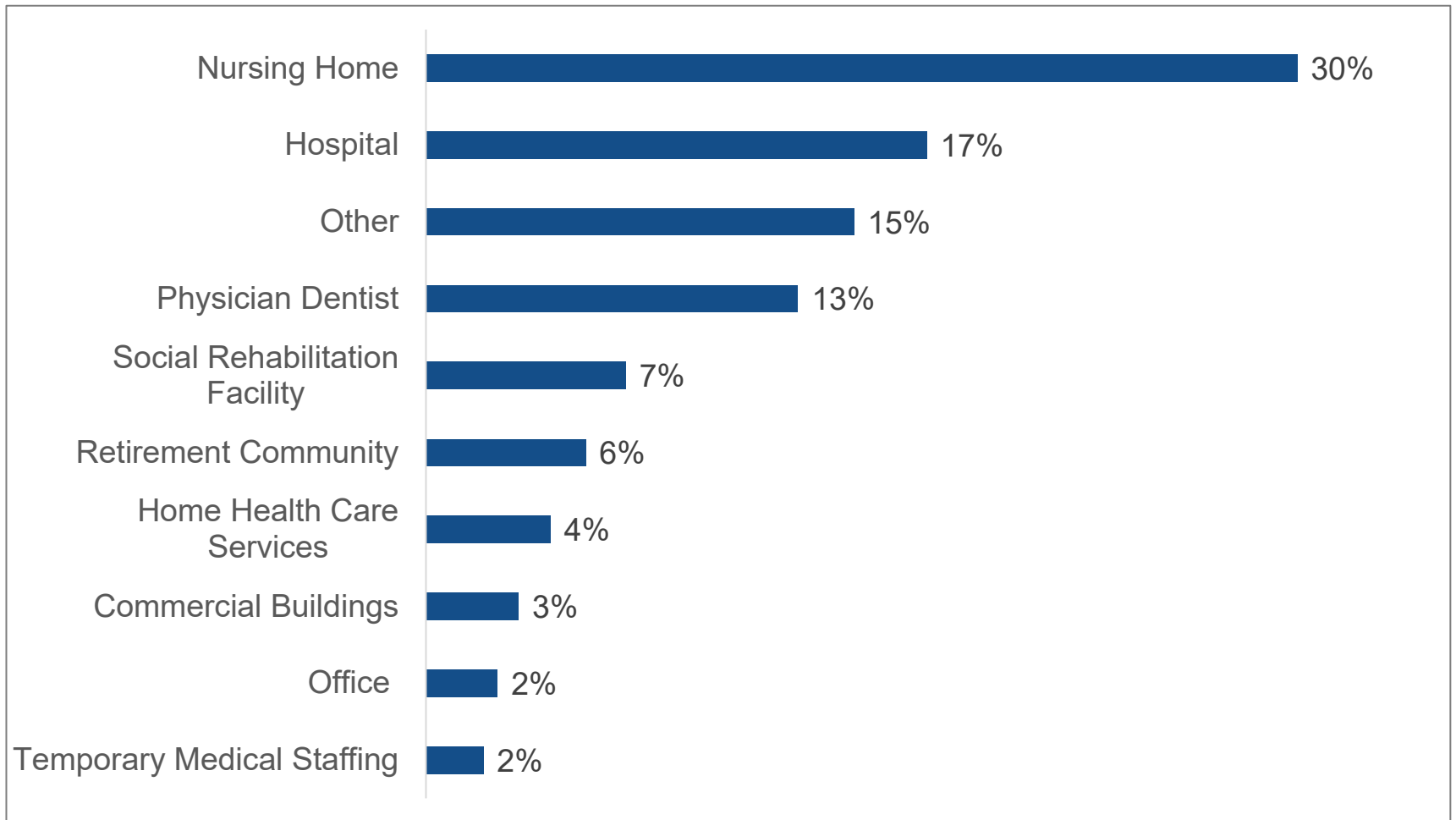
# Indemnity Claims Closure Rates

During 2020, COVID-19 claims closed more quickly than Non-COVID-19 claims and that pattern reversed during 2021.



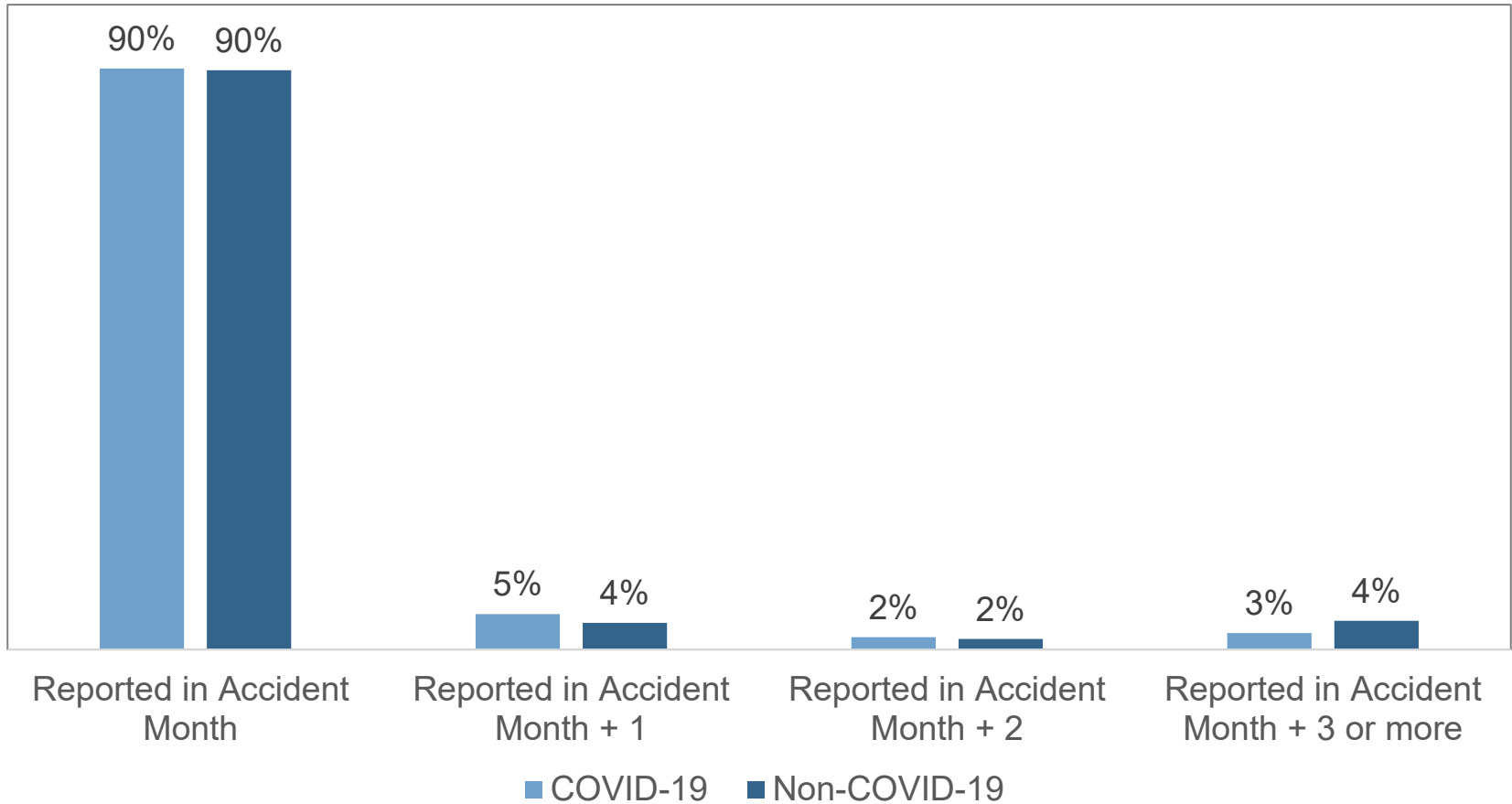
# Distribution of COVID-19 Indemnity Claims by Class

85% of the COVID-19 claims come from the nine classifications shown below. 79% of the COVID-19 claims are from the healthcare sector.



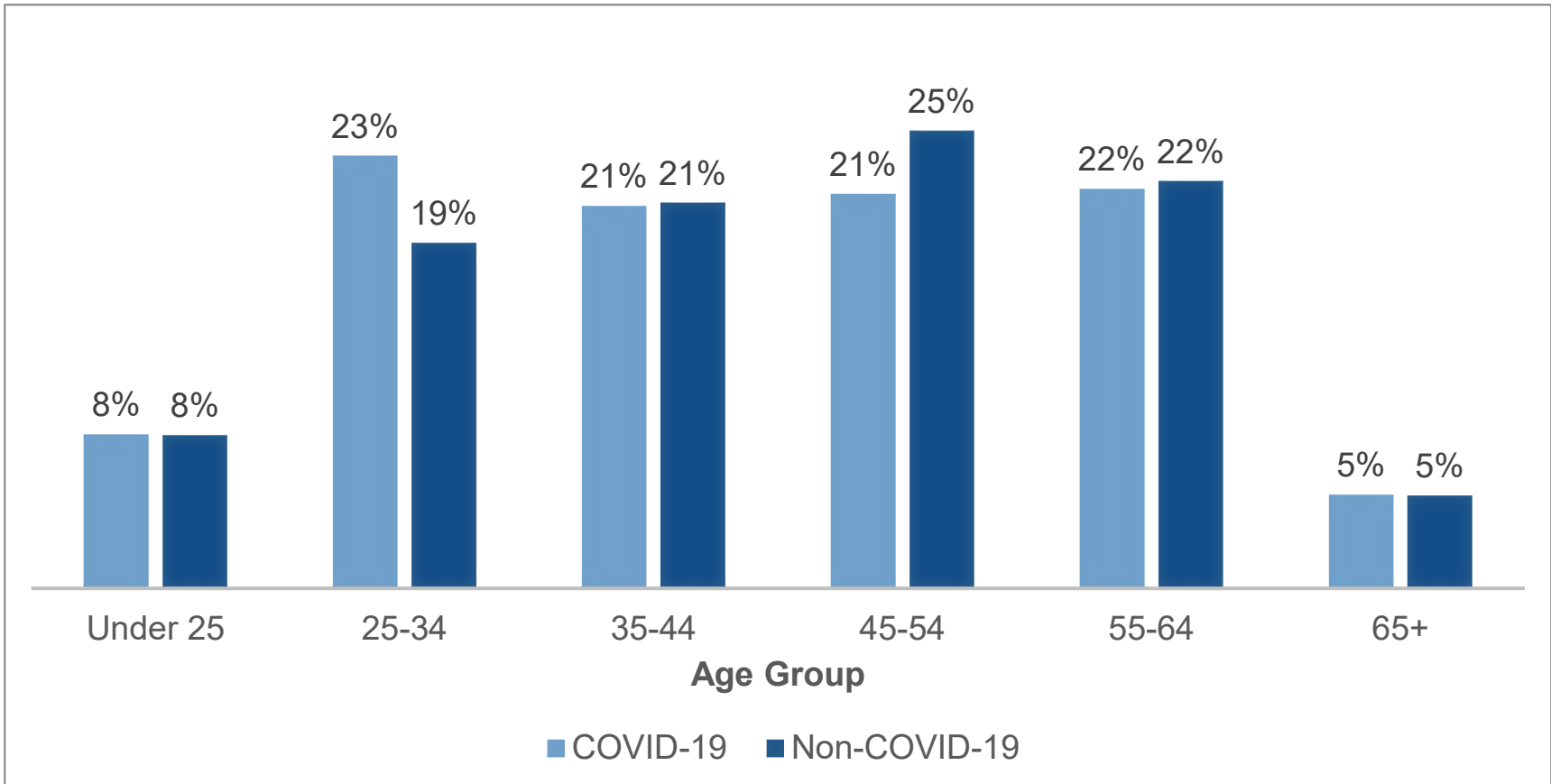
# Indemnity Claims Reporting Patterns

There is no significant difference in reporting patterns for indemnity claims between COVID-19 and Non-COVID-19 claims. The majority of claims are reported within one month of the accident date.



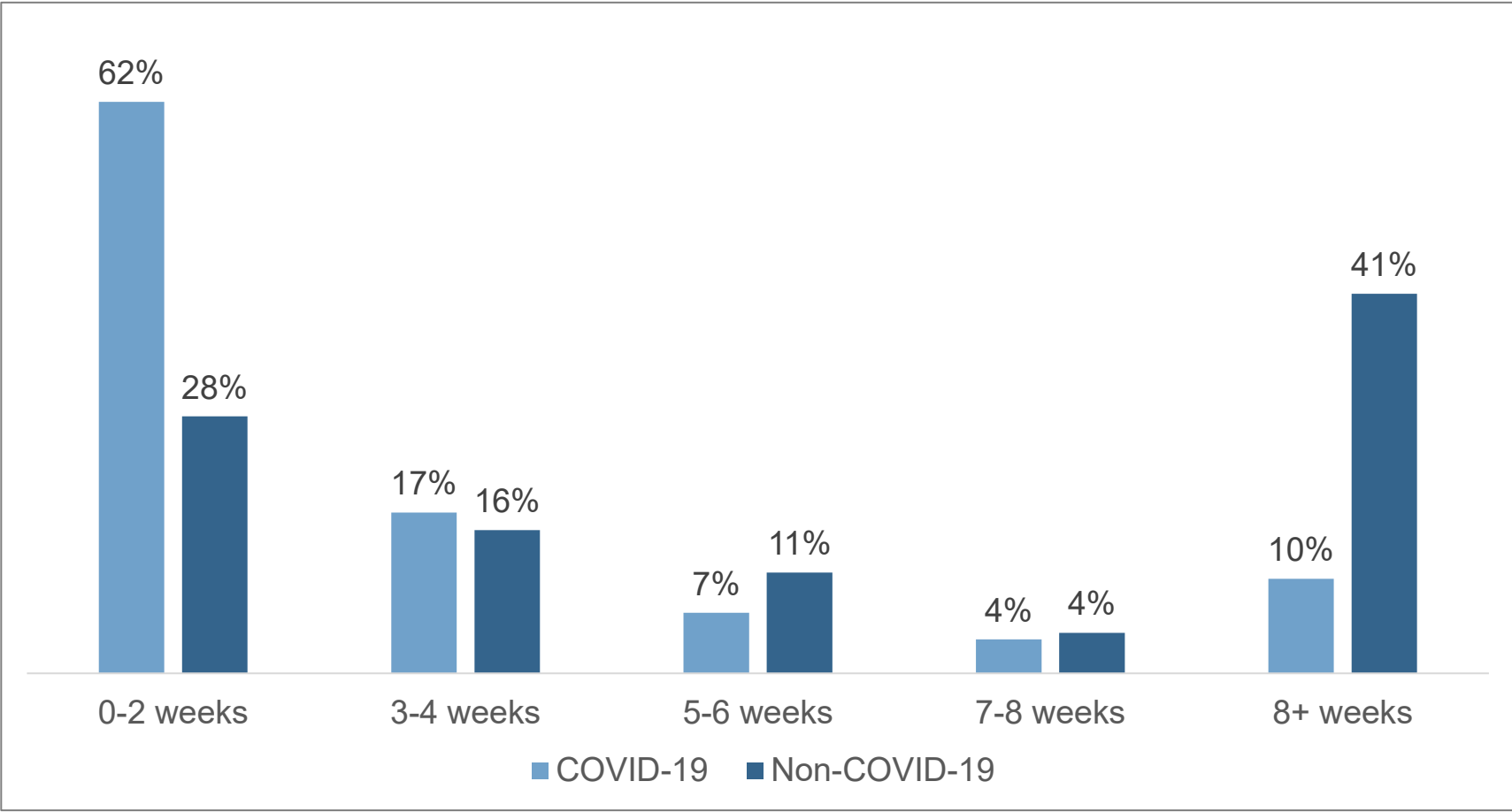
# Claimant Age Distribution

The age distribution appears to be normally distributed amongst the six age groups. As expected, there are less claimants within the under 25 and greater than 65 age groups with each age group having approximately the same percentage of claimants despite being either COVID-19 or Non-COVID-19 claims.



# Weeks of Temporary Disability Payments

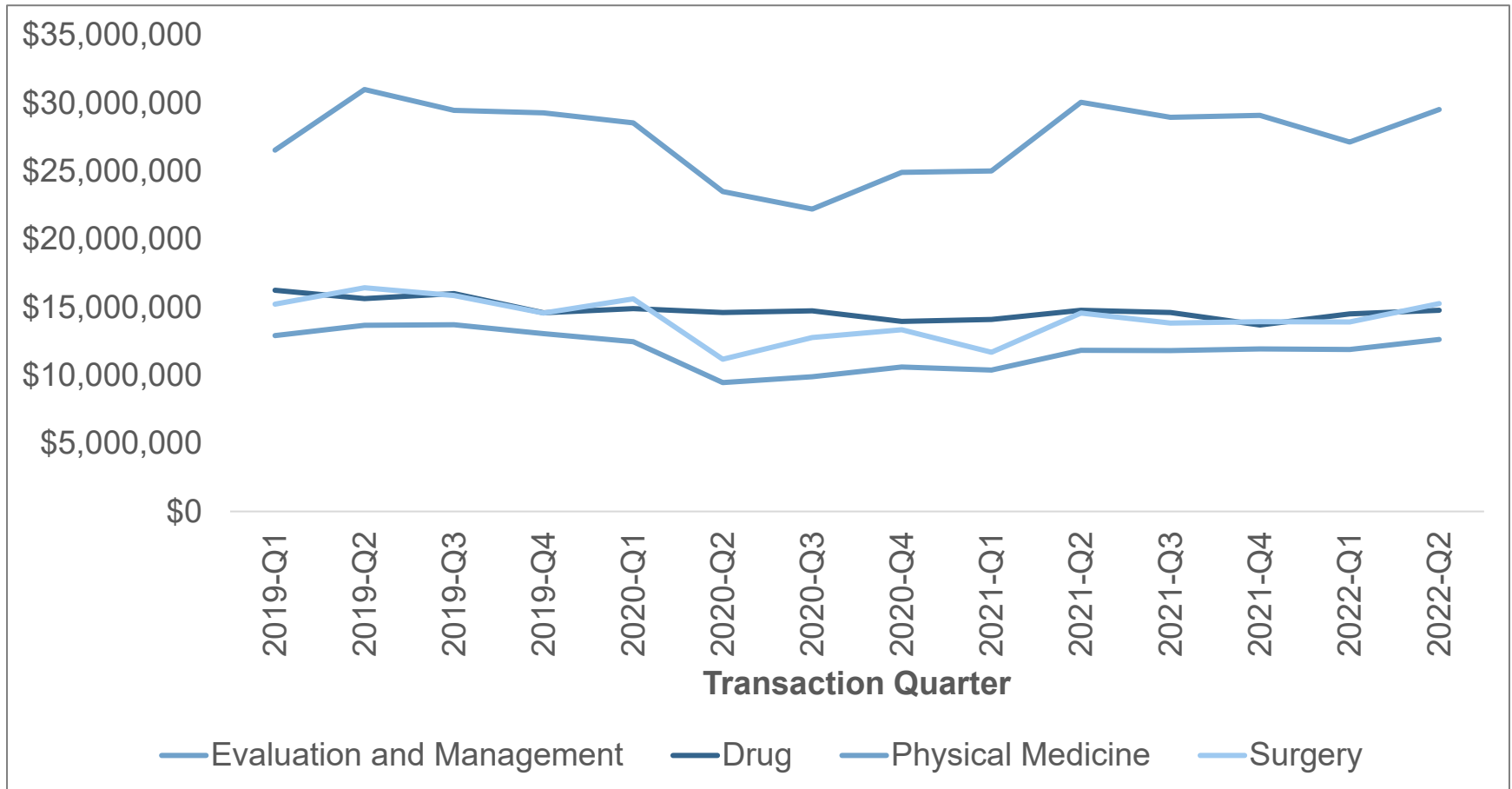
The duration of Temporary Disability payments for COVID-19 claims is generally much shorter than for Non-COVID-19 claims. The majority of COVID-19 claims incur two weeks or less of disability payments which coincides with the advised quarantine period for COVID-19.



Source: PA Indemnity Data Call for Accident Dates 4/1/20-6/1/22 submitted by January 31, 2023.

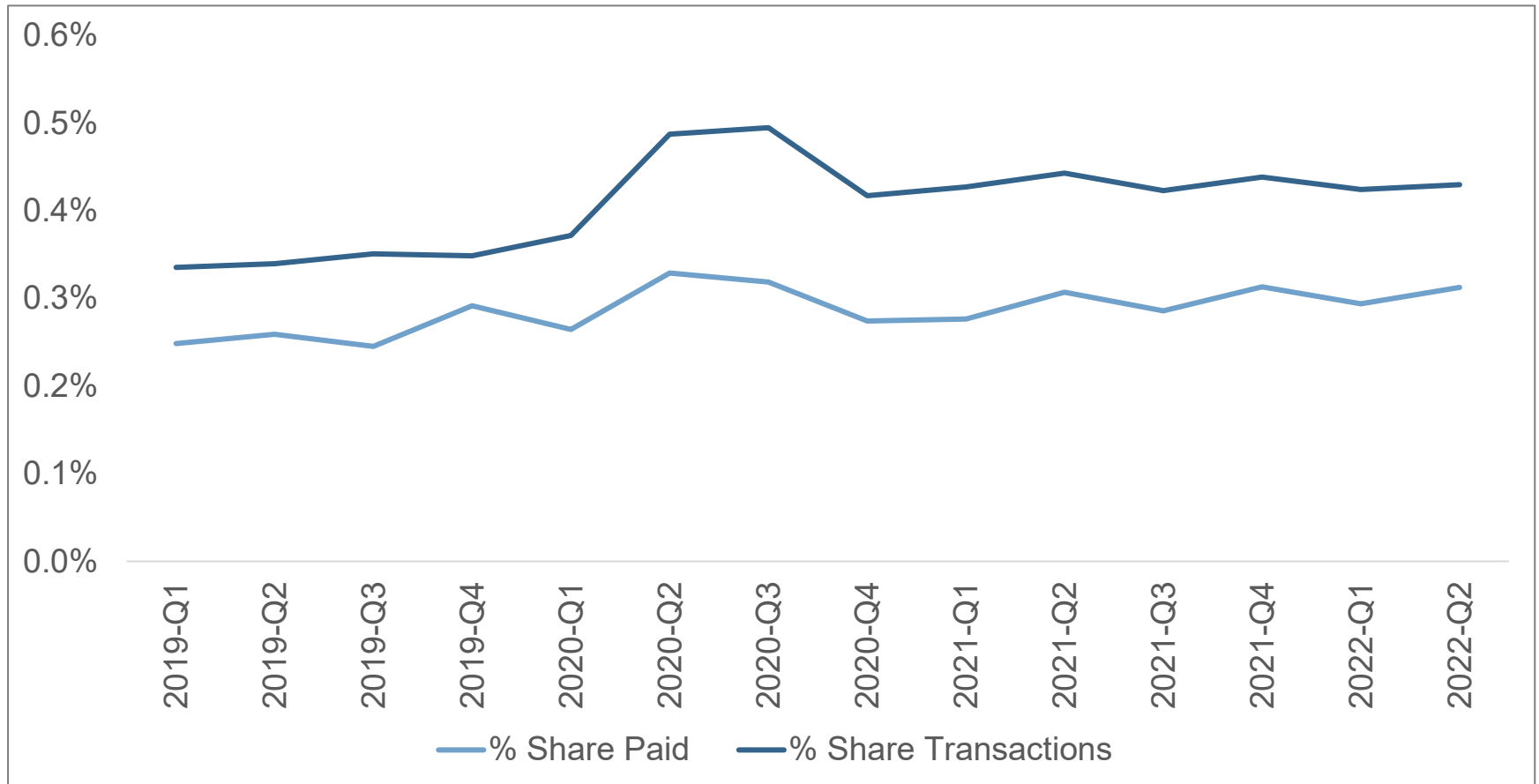
# Medical Payments by Category

There is a decrease in medical payments that begins during 2020-Q2 and lasts for roughly a year until payments increase in 2021-Q2. After this quarter, medical payments gradually rise to more normal levels in 2022-Q2.



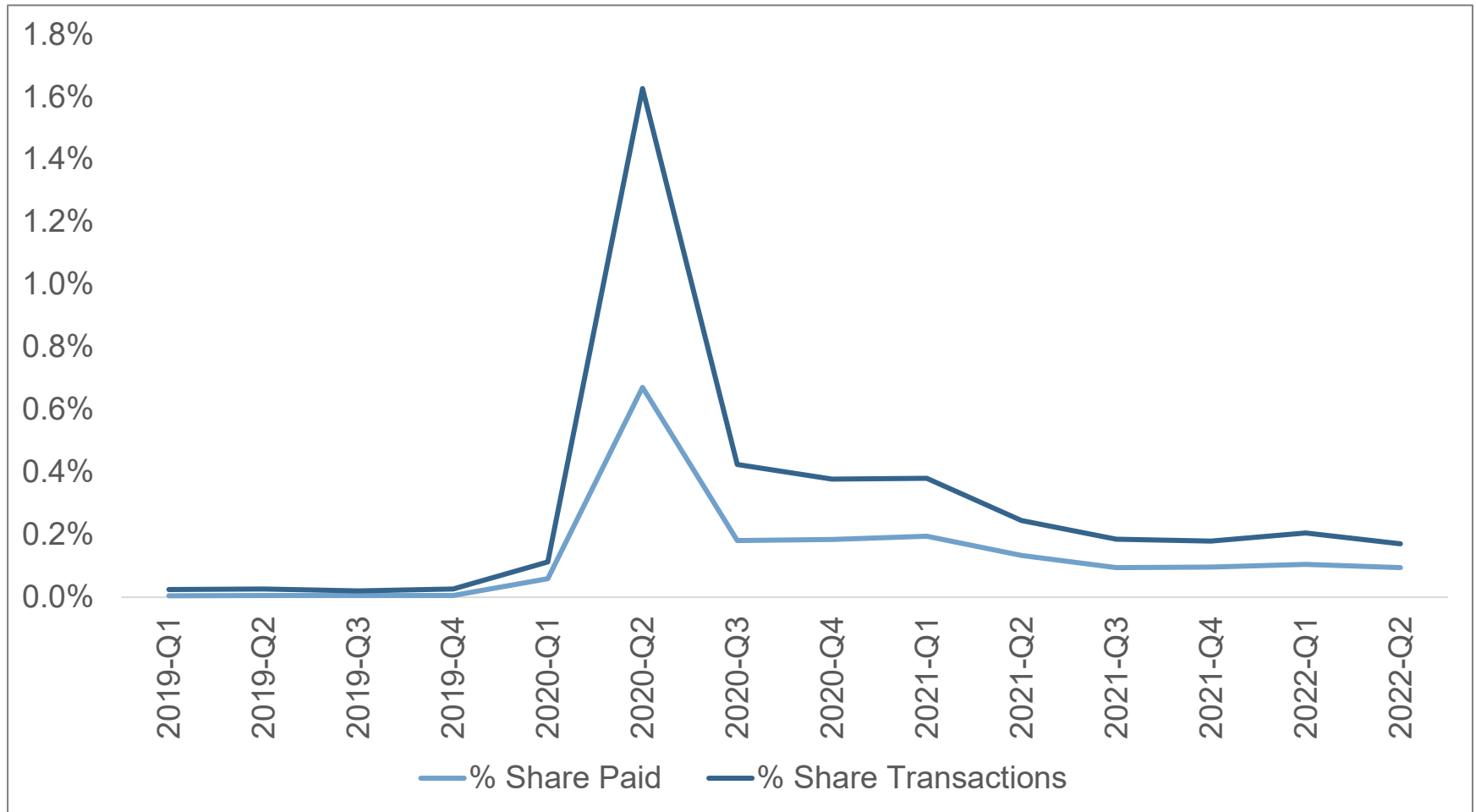
# Medical Payments for Mental Health Claims

Claims including mental health procedures have become more prevalent during the pandemic with the paid amount peaking during the third quarter of 2020 and remaining elevated during 2021 and 2022 compared to pre-pandemic levels.



# Medical Payments for Telemedicine

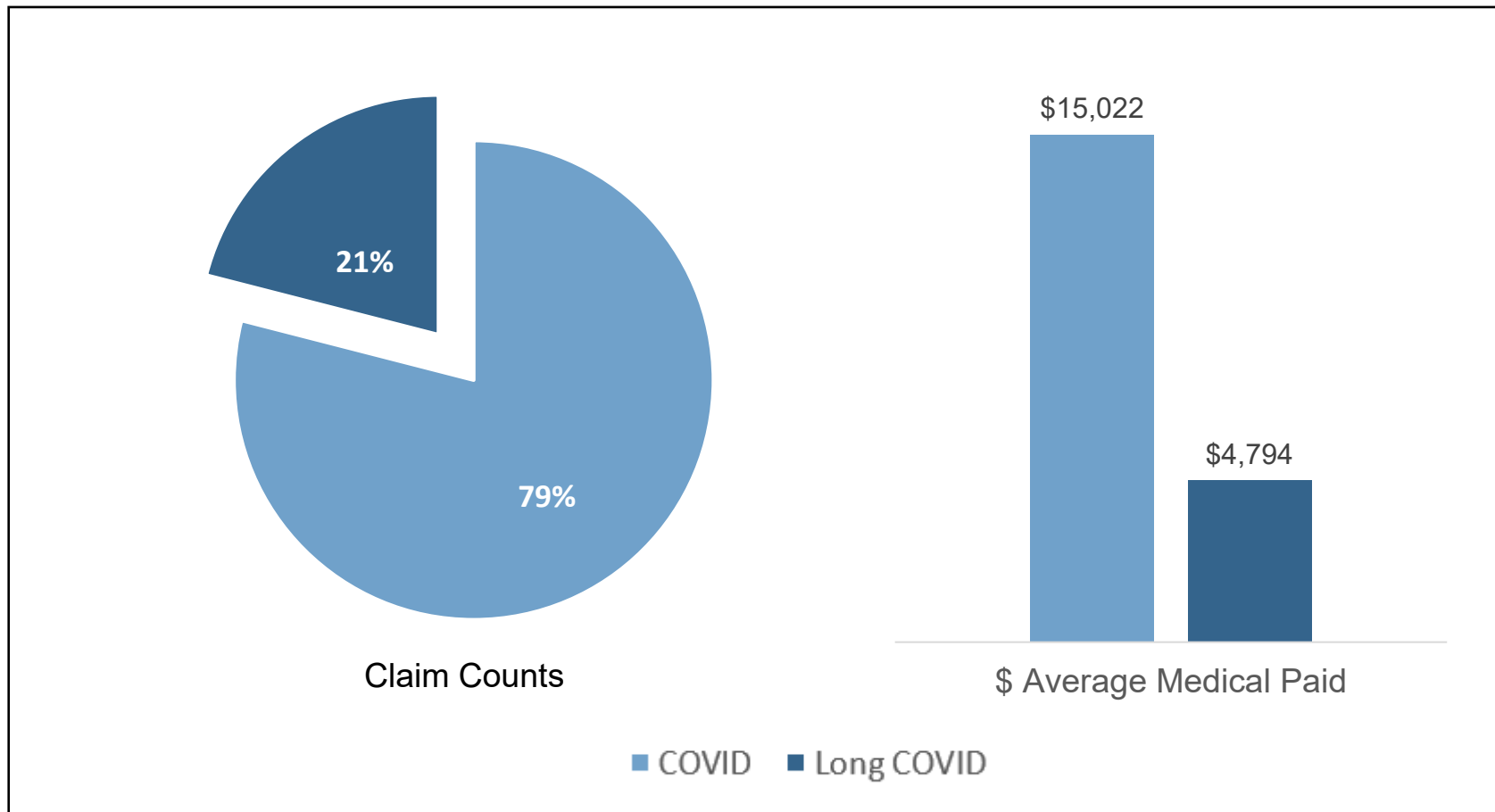
Telemedicine transactions were reported at higher levels during 2020 and remained higher than pre-pandemic levels since then.





# Long COVID-19 Claims

Long COVID claims are reported with diagnosis categories of Fatigue, Cognitive Communication Deficit, Weakness, Shortness of Breath, Dyspnea and Pneumonia.



COVID-19 claims from the Unit Statistical Reports were identified where Nature of Injury code 83 and Cause of Injury code 83 were reported on loss records.

COVID-19 claims from the Indemnity Data Call were identified where Nature of Injury code 83 and Cause of Injury code 83 were reported on quarterly records.

COVID-19 claims from the Medical Data Call were identified where Accident Date is greater than 12/1/19 and the Primary or Secondary ICD Diagnostic Code was from the following table:

Code	Description
B34.2	Coronavirus infection, unspecified
B97.2	Coronavirus as the cause of diseases classified elsewhere
B97.21	SARS-associated coronavirus causing diseases classd elswhr
B97.29	Oth coronavirus as the cause of diseases classd elswhr
J12.81	Pneumonia due to SARS-associated coronavirus
J12.82	Pneumonia due to coronavirus disease 2019
U07.1	COVID-19, virus identified
U09.9	Post COVID-19 condition, unspecified



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