

Employment and Material Hardship Among Nonelderly Adults with Long COVID in December 2022

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Urban Institute Well-Being and Basic Needs Survey

- Funded by the Robert Wood Johnson Foundation
- Nationally representative, internet-based survey of 7,881 adults ages 18 to 64 with and without household internet access
- Fielded in December 2022 in English and Spanish
- Respondents reporting a confirmed or suspected COVID-19 infection were asked:

“Are you experiencing symptoms more than four weeks after having COVID-19 that are not explained by something else? This is often referred to as ‘long COVID.’

Some examples of symptoms include tiredness or fatigue; difficulty thinking, concentrating, or remembering (sometimes referred to as ‘brain fog’); difficulty breathing or shortness of breath; joint or muscle pain; fast-beating or pounding heart (also known as heart palpitations); chest pain; dizziness on standing; menstrual changes; changes to taste or smell; or inability to exercise.”

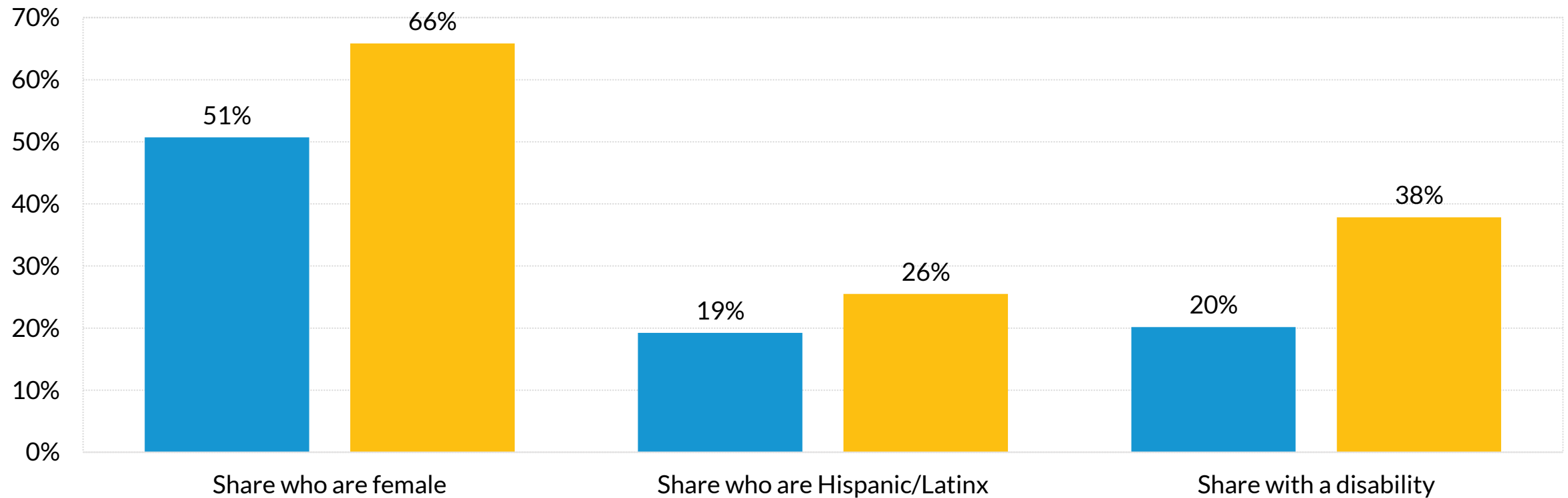
Nearly 1 in 5 with COVID-19 Reported Long COVID

Reported ever having COVID-19	58%
Told by doctor or other health professional they had COVID-19 or tested positive for COVID-19	46%
Among adults who ever had COVID-19, reported current Long COVID symptoms lasting 4 weeks or more	18%
Experienced symptoms for 3 months or more	13%

Source: Well-Being and Basic Needs Survey, December 2022.

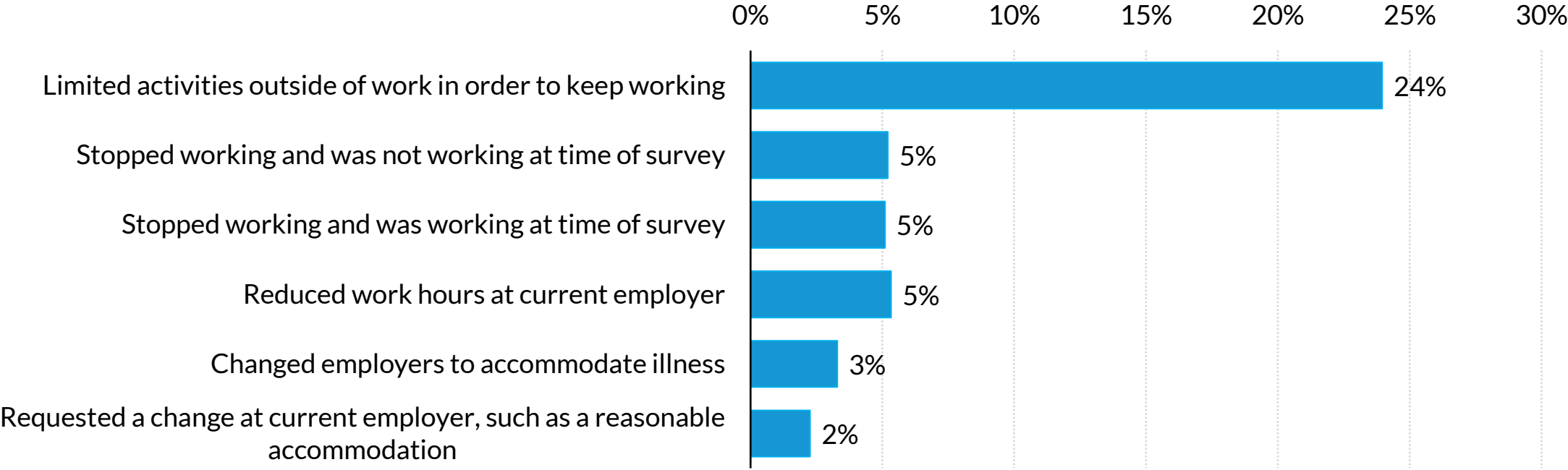
Adults with Long COVID Were Disproportionately Female, Hispanic/Latinx, and Had Disabilities

■ All adults ■ Adults with Long COVID



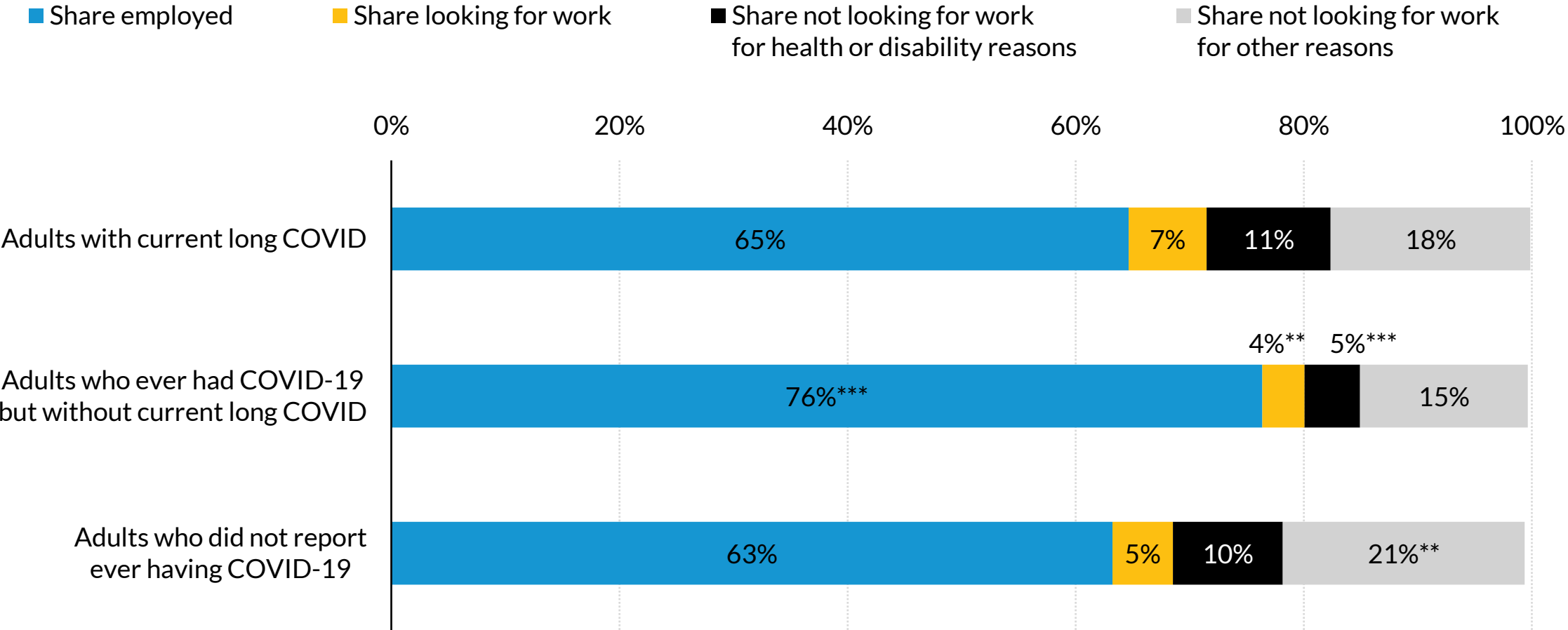
Source: Well-Being and Basic Needs Survey, December 2022.

1 in 10 Adults with Long COVID Stopped Working, and 1 in 4 Limited Other Activities to Continue Working



Source: Well-Being and Basic Needs Survey, December 2022.

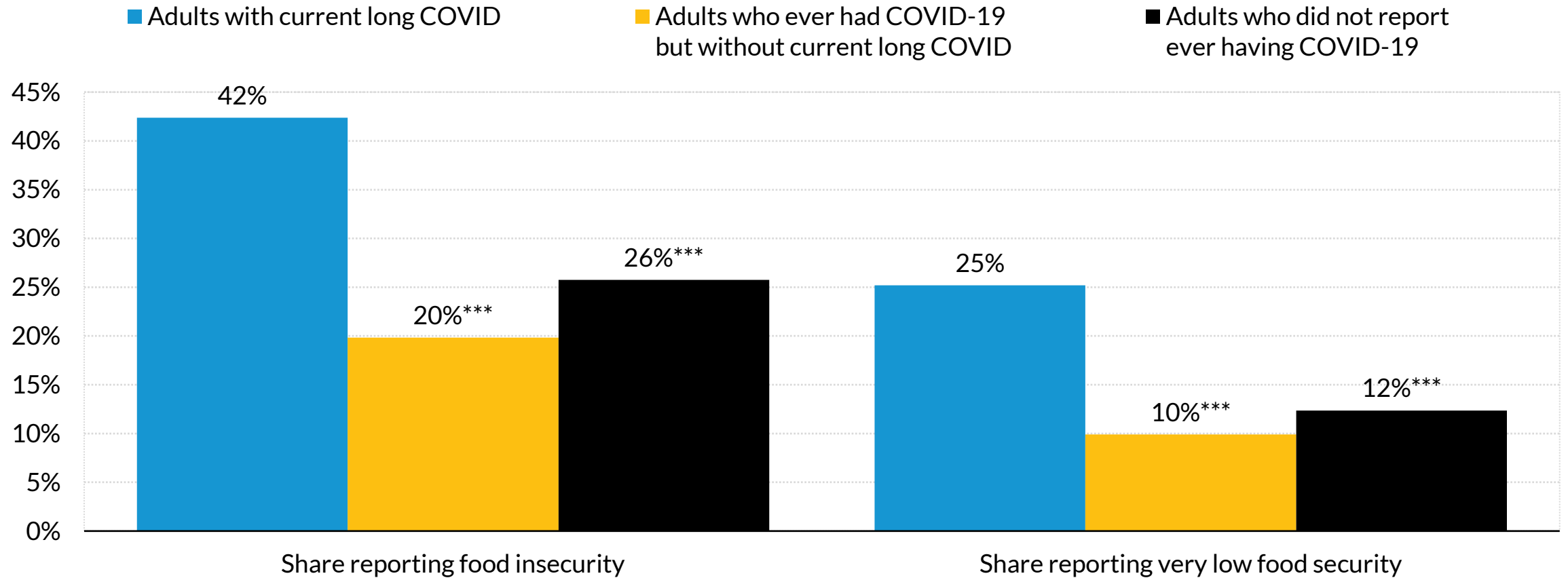
Employment Rates Differed by Long COVID Status



Source: Well-Being and Basic Needs Survey, December 2022.

*/**/*** Estimate differs significantly from estimate for adults with Long COVID at the 0.10/0.05/0.01 level, using two-tailed tests.

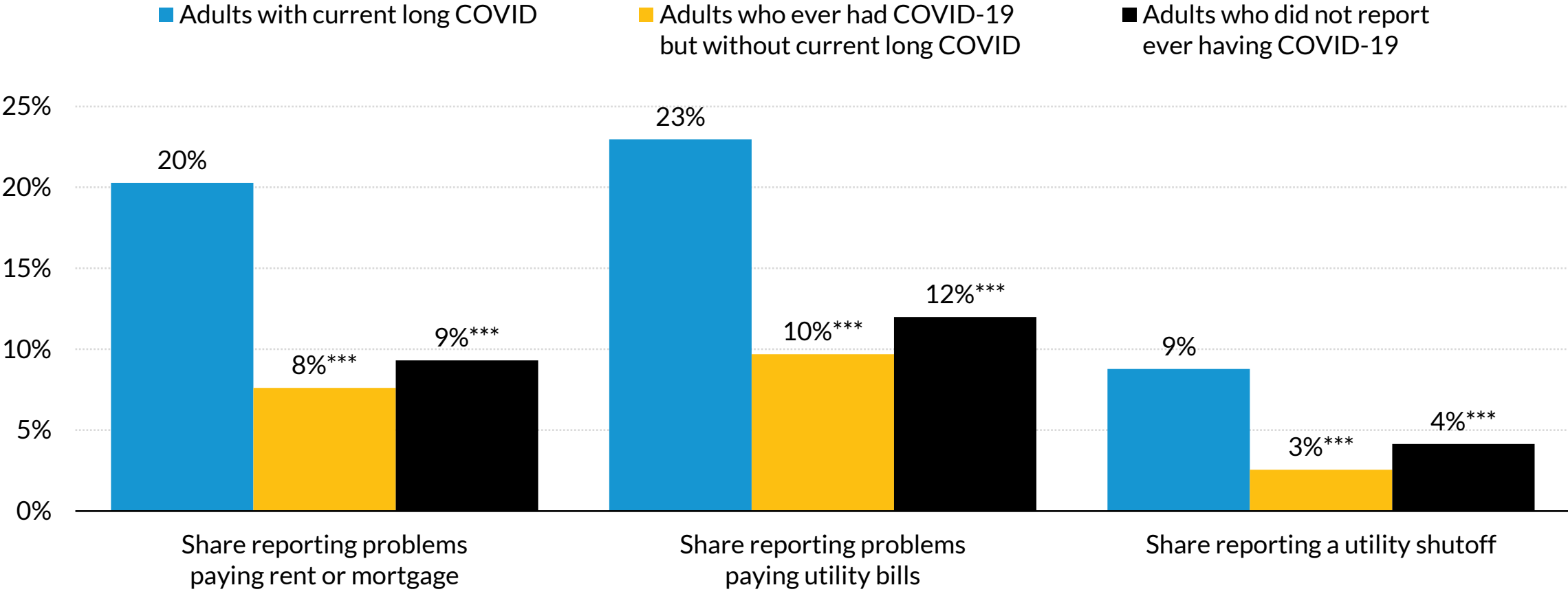
Over 4 in 10 Adults with Long COVID Reported Food Insecurity



Source: Well-Being and Basic Needs Survey, December 2022.

*/**/*** Estimate differs significantly from estimate for adults with Long COVID at the 0.10/0.05/0.01 level, using two-tailed tests.

1 in 5 Adults with Long COVID Had Problems Paying the Rent or Mortgage



Source: Well-Being and Basic Needs Survey, December 2022.
*/**/** Estimate differs significantly from estimate for adults with Long COVID at the 0.10/0.05/0.01 level, using two-tailed tests.

A Previous Urban Institute Survey Also Highlighted Health Care Access and Affordability Challenges

- “Health Care Access and Affordability Among US Adults Aged 18 to 64 Years with Self-reported Post-COVID-19 Condition.” *JAMA Network Open*. 2023;6(4):e237455.
- Analysis of data from the Health Reform Monitoring Survey, June 2022



Original Investigation | Health Policy

Health Care Access and Affordability Among US Adults Aged 18 to 64 Years With Self-reported Post-COVID-19 Condition

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Abstract

IMPORTANCE Many US adults report having post-COVID-19 condition (PCC), but little is known about their access to health care.

OBJECTIVE To estimate the association of PCC with access and affordability challenges among US adults aged 18 to 64 years.

DESIGN, SETTING, AND PARTICIPANTS This survey study used data from the Health Reform Monitoring Survey, a probability-based internet survey conducted June 17 to July 5, 2022. Participants included a nationally representative sample of 9484 US adults ages 18 to 64 years drawn from the Ipsos KnowledgePanel.

MAIN OUTCOMES AND MEASURES Self-reported PCC was defined as experiencing symptoms more than 4 weeks after first having COVID-19 that were not explained by another condition or factor. Access and affordability outcomes included having a usual place of care; forgoing care in the past 12 months because of costs, difficulty finding clinicians, or difficulty using health insurance; having problems paying family medical bills in the past 12 months; and having past-due medical debt.

RESULTS Of 19 162 panel members recruited for the survey, 9599 individuals completed the survey (completion rate, 50.1%) and 9484 respondents were included in the final analytic sample (4720 females [50.6%, weighted]; mean [SD] age, 41.0 [13.5] years). A total of 3382 respondents (36.4%; 95% CI, 34.7%-38.2%) reported ever being diagnosed with COVID-19, among whom, 833 respondents (22.5%; 95% CI, 20.9%-24.2%) reported currently having PCC. After adjustment for differences in demographic, health, and geographic characteristics, adults with PCC were more likely

Key Points

Question Are adults with post-COVID-19 condition (PCC) more likely than other adults to experience health care access and affordability challenges?

Findings In this survey study of 9484 US adults aged 18 to 64 years, a statistically higher rate of respondents with self-reported PCC did not obtain needed health care in the past year because of cost compared with adults without PCC. Adults with PCC were also more likely to have unmet needs because of difficulties getting timely appointments or health plan authorization, among other challenges with health care institutions or health insurance.

Meaning These findings suggest that improved health care access for adults with PCC may require developing clinical protocols and addressing insurance-related barriers.

Conclusions

- Nearly 1 in 5 adults with COVID-19 reported long COVID symptoms in Dec. 2022
- Almost 4 in 10 adults with long COVID reported a disability
- Long COVID affected employment and work hours, and many limited other activities in order to keep working
- We observed stark disparities in material hardship among people with and without long COVID
- Many adults with long COVID have experienced challenges navigating the health care system and paying for care

Early Insights on Long COVID, Chronic Illness, and Economic Well-Being

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