

# Long COVID-19 and Disability Accommodations in the Workplace

Long COVID is broadly defined as signs, symptoms and conditions that continue or develop after initial SARS-CoV-2 infection. The signs, symptoms, and conditions are present four weeks or more after the initial phase of infection. Long COVID is not one condition. It represents many potentially overlapping conditions, likely with different biological causes and different sets of risk factors and outcomes. Since there is no one diagnostic test for long COVID, healthcare providers reach a diagnosis by ruling out other conditions and/or illnesses, which can be a lengthy process. While the effects of long COVID vary from person to person, symptoms may include fatigue, cognitive impairment, nervous system dysfunction, lingering respiratory symptoms, headaches, dizziness, heart palpitations, organ damage and more.

Despite growing awareness and an increased response to [long COVID](#) and its associated conditions, policymakers, researchers, and healthcare providers continue to grapple with understanding its long-term impact. These conditions will certainly have implications for communities, healthcare systems, the economy, the workforce and the well-being of future generations.

While there is still much to learn about long COVID, existing data suggest its impact on the labor force has been significant. [According to the U.S. Government Accountability Office](#), long COVID has potentially affected up to 23 million Americans, reportedly keeping as many as 1 million people out of work. States, local governments,



and their employers will benefit when they develop and implement policies and practices that help workers with long COVID stay at work or return to work when ready.

## The Potential Impacts and Costs of Long COVID

Data from the [National Health Interview Survey](#), a long-running public health survey, estimated that 6.9% of adults experienced long COVID in 2022, and more than [200 symptoms](#) have been associated with long COVID. These symptoms vary from person to person in severity and length, making a potential long COVID diagnosis difficult. People are often unsure whether symptoms such as fatigue, chest pain, digestive issues, physical mobility problems, depression, and/or

anxiety should be attributed to long COVID or to a separate illness. Other studies have found the following:

- Within six months following initial infection, [one-third of COVID-19 patients experienced neurological or psychological symptoms](#) such as anxiety, depression, post-traumatic stress disorder and psychosis.
- Adults ages 35–49 (8.9%) were more likely than adults ages [18–34 \(6.9%\), 50–64 \(7.6%\), and 65 and older \(4.1%\) to ever have long COVID.](#)
- In addition to age, [long COVID has had a varied impact on people across rural and metropolitan areas as well as race and socioeconomic status.](#)

A close look at [labor force data](#) suggests the U.S. faces a labor shortage: approximately 9 million jobs remained unfilled as of December 2023 with only approximately 5.8 million workers actively looking for work. This gap has left state and local governments, private companies, and small companies struggling and understaffed. Economists' explanations for the labor shortage vary but include workers' concerns about low wages, poor working conditions, difficulty accessing childcare and fear of contracting COVID-19.

[Research](#) from Harvard Kennedy School has linked long COVID to decreased labor force participation and lost earnings. While the studies differ substantially in their methodologies and findings, a growing body of research suggests long COVID is a contributing factor to workforce shortages, with data showing that [45%](#) of long COVID patients reduced their work hours due to chronic fatigue or cognitive impairment.

A [2022 Kessler Foundation survey](#) of nearly 3,800 managers reported 40% of their employees had lasting physical or mental effects after COVID-19 infection, with 58% of those managers saying the employees received workplace accommodations. Yet, lost wages for workers experiencing long COVID symptoms are still [estimated](#) to be between \$170 billion and \$230 billion annually.

## Long COVID and the ADA

In 2021, the federal government issued guidance from the [U.S. Equal Employment Opportunity Commission](#), [U.S. Department of Health and Human Services](#) and the [U.S. Department of Justice](#) clarifying that long COVID could be considered a disability under Titles I (employment), II (state and local government), and III (public accommodations) of the [Americans with Disabilities Act \(ADA\)](#), [the Rehabilitation Act of 1973](#), and [Section 1557 of the Patient Protection and Affordable Care Act](#).

If long COVID substantially limits one or more major life activities, employers covered by the [ADA](#) must provide reasonable accommodations absent undue hardship. An individual assessment is necessary to determine whether a person's COVID-related conditions or symptoms substantially limit a major life activity. Given the time and complexity involved in reaching a long COVID diagnosis, it is worth noting that employers have the option of offering short-term accommodations pending fuller information and may even offer accommodations when someone does not meet the criteria of an ADA disability or have a definitive diagnosis of long COVID.

[Long COVID accommodations](#) vary on a case-by-case basis, due to the many potential associated conditions. However, rest breaks, a plan of action during flare-ups, remote work and periods of intermittent leave to aid in treatment or recovery are common long COVID accommodations. If an employee's productivity in their current position is severely compromised, an employer may also explore reskilling, or providing education and/or training to prepare the worker for a new position.

# Long COVID Policy Action

At the [federal level](#), steps are being taken to address long COVID. For example, the National Institutes of Health launched the \$1.66 billion [Researching COVID to Enhance Recovery Initiative](#), which combines data across more than 200 research sites. In addition, [the U.S. Department of Justice and U.S. Department of Health and Human Services issued guidance](#) stating that the condition may be a disability under the ADA. [HHS also launched the Office of Long COVID](#) and will stand up a [long COVID federal advisory committee](#) this year. In March 2023, Congress introduced [the Care for Long COVID Act \(H.R. 1616\)](#), which addresses research on and improves access to supportive services for people with long COVID.

Currently, at least six states, including [Alabama](#), [Massachusetts](#), [Minnesota](#), [New Hampshire](#), [New Jersey](#), and [New York](#), have introduced legislation regarding the impacts of long COVID. In May 2023, Alabama appropriated funding ([SB87](#)) for a study on the impacts of long COVID.

Also in May 2023, Minnesota passed [SF 2995](#), which established a program to conduct community assessments and epidemiologic investigations to monitor and address the impacts of long COVID and its related conditions. This program provides information and resources for communities and patients, informs health professionals about risks and detection, and promotes evidence-based practices around long COVID and related conditions.

In 2022, Colorado created the role of Senior Policy Advisor on Long COVID and Post Viral Illness in the Office of Saving People Money on Healthcare. In its first year, the policy advisor focused on [collecting data and developing recommendations on Colorado's response to and preparedness for the short and long term impacts of long COVID](#).

To further assist employers with providing reasonable accommodations, Minnesota's Department of Employment and Economic Development created the Employer Reasonable Accommodation Fund (ERAF) ([2023 Minn. Laws, Chap. 53, Art. 15, Sec. 31, Subd. 9](#)). Small to mid-sized Minnesota employers can request reimbursement for expenses related to providing reasonable accommodations for job applicants and employees with disabilities, including those with long COVID. In addition to processing reimbursements, the ERAF coordinator is available for technical assistance and consultation at no cost to employers.

New York introduced [SB S898](#) during the 2023 legislative session. SB S898 directs the New York Department of Labor to study the impact of long COVID on employees and the labor market and issue a report of its findings and recommendations to the governor and legislature.

In 2023, Massachusetts introduced [HB 2147](#), establishing a commission to identify the socioeconomic, medical, public health, mental health, social, and fiscal needs related to the state's surveillance, care, and treatment of people with long COVID. Both bills are still pending.

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