



**Workers' Compensation**  
**CLAIM FOR COMPENSATION**

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# Evaluation of Mental Health Conditions or Illnesses Among Firefighters and Peace Officers

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Compensation



Community Health and  
Environmental Policy Program

# SB 542 (Stern) Made It Easier for Firefighters, Peace Officers to Receive Workers' Compensation for PTSD

- Rebuttable presumption that posttraumatic stress disorder (PTSD) in firefighters, peace officers is work-related and thus compensable in workers' compensation
- Presumption in effect for dates of injury between Jan 1, 2020 and Dec 31, 2024
- Goals of legislation:
  - Address mental health and suicide among first responders
  - Reduce perceived stigma
  - Enable first responders to obtain needed mental health care
- Legislature will face choice on extending presumption

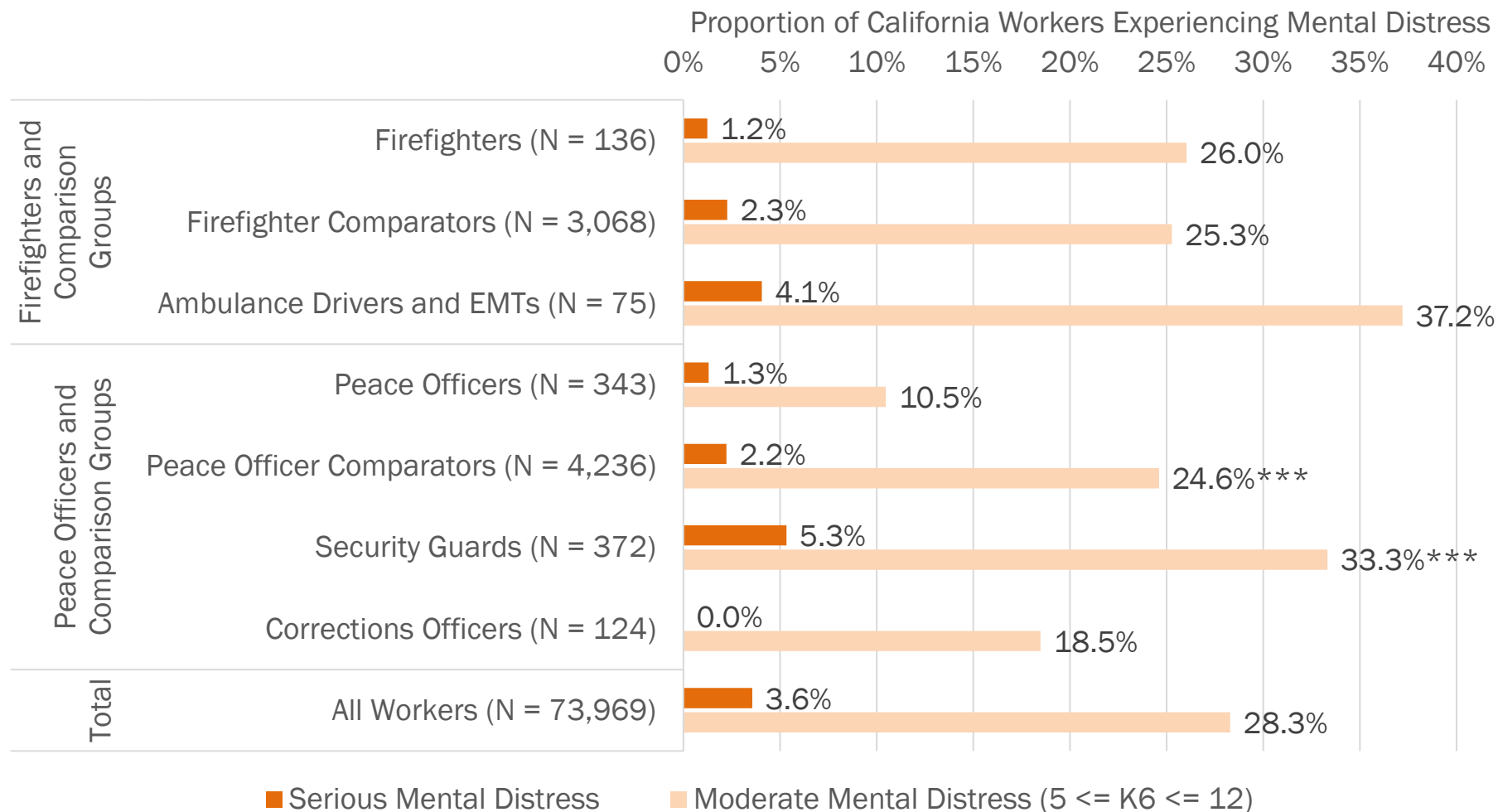
# Evidence on Many Questions Unavailable When SB 542 Was Under Debate

- Assemblymember Daly requested that CHSWC answer 12 research questions that might inform future debate
- RAND conducted a study to address those questions
- Questions spanned many topics, including:
  - How widespread are PTSD, suicide among first responders?
  - How often do WC claims involve PTSD?
  - Are claims involving PTSD frequently denied?
  - Cost impacts of SB 542 for state and local governments
  - Is it possible to prove that PTSD is job-related?
- Final report in press; draft to be posted after meeting

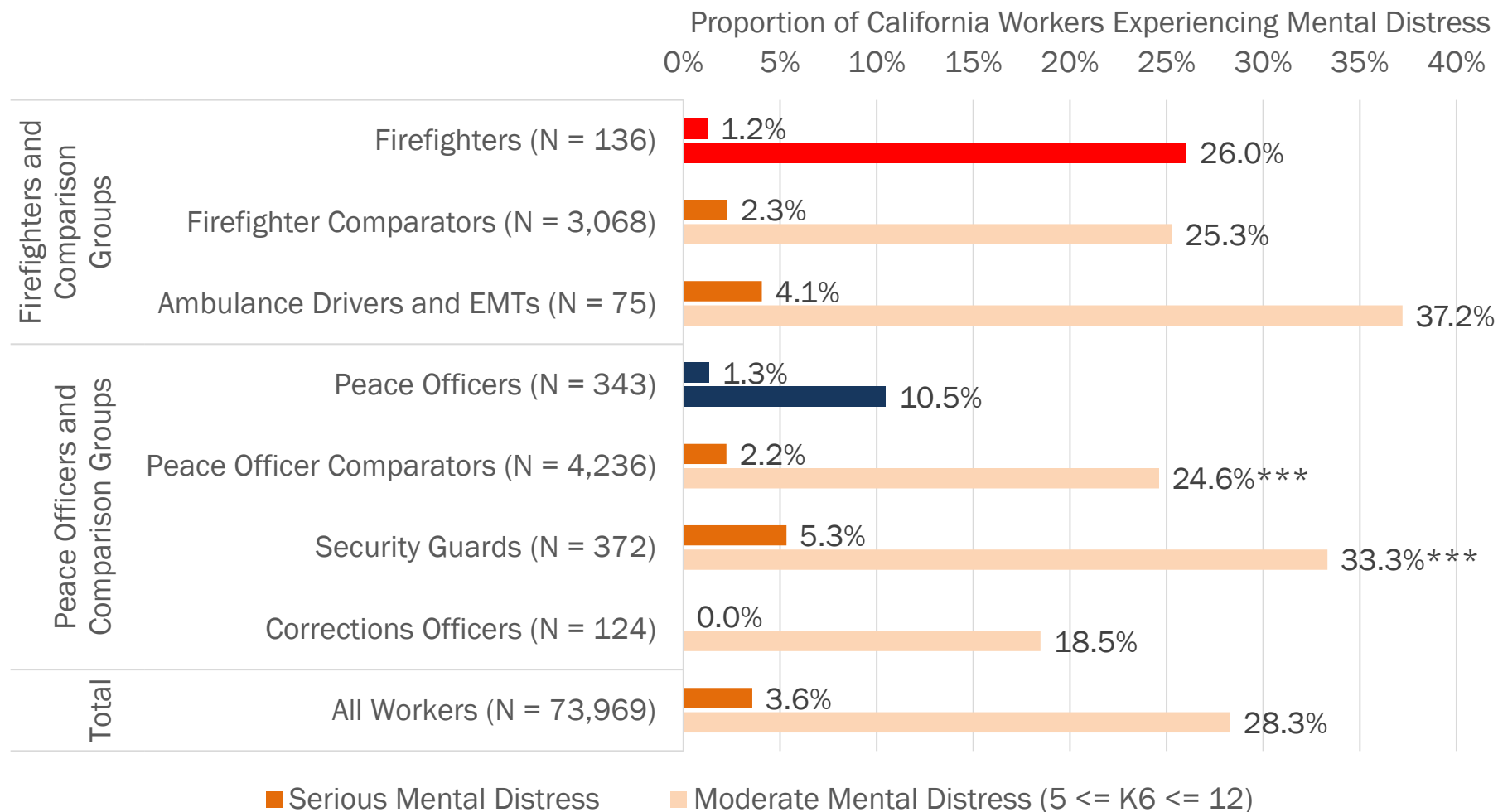
# We Used a Mixed-Methods Approach to Address Research Goals

- Qualitative: Key informant interviews with
  - Firefighters and peace officers who experienced mental health conditions
  - Applicants' attorneys
  - Department chiefs
  - Claim administrators
  - Mental health providers
- Quantitative: analyzed survey, administrative data
  - Analyzed survey data from UCLA California Health Interview Survey (CHIS) 2013-2019
  - Analyzed WCIS claims data (2008-2019 injuries)
  - Modeled costs to state, local governments
- Gathered input from Technical Advisory Group

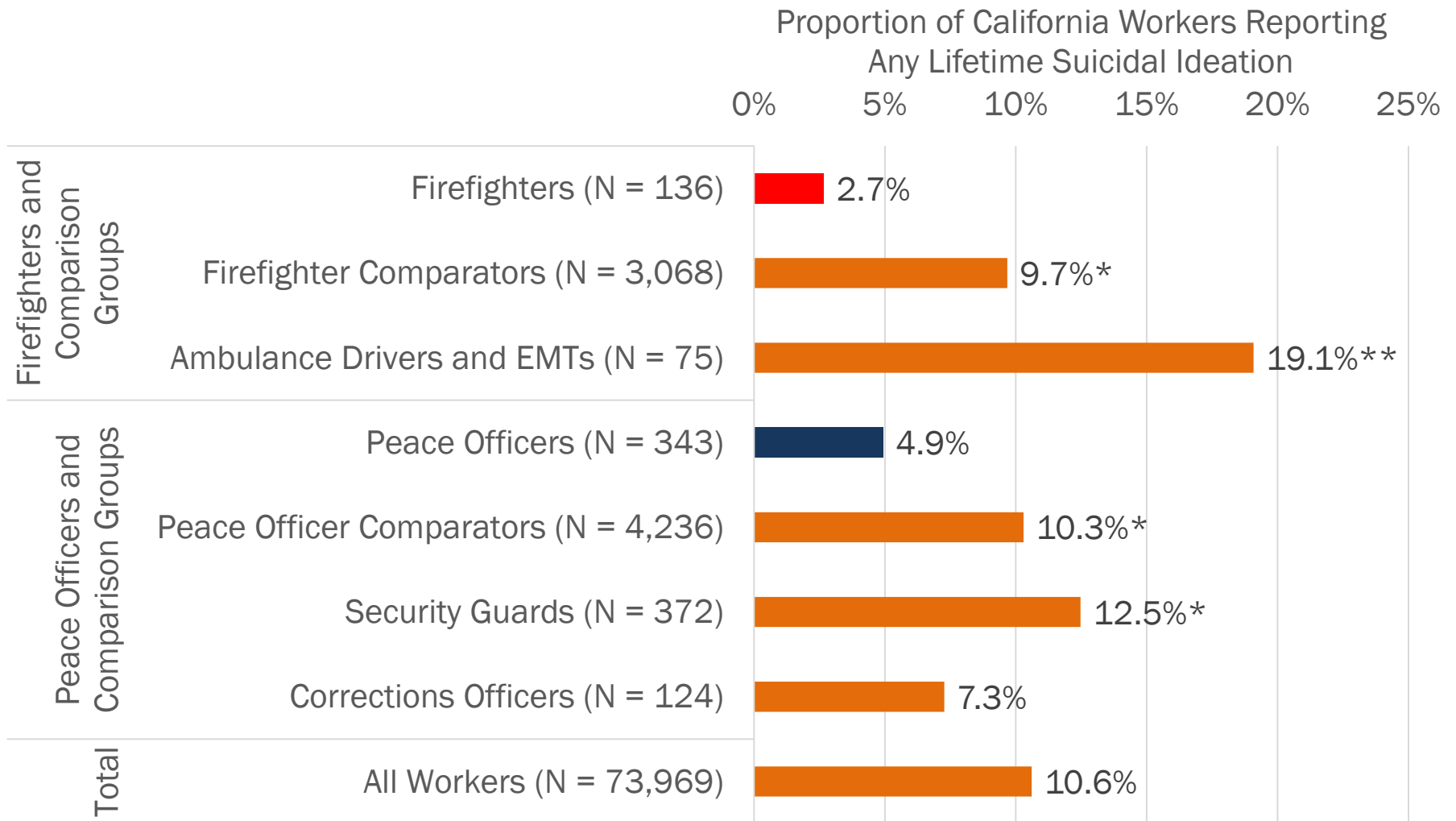
# Moderate, Serious Mental Distress Were Not More Common in First Responders Than in Other Workers



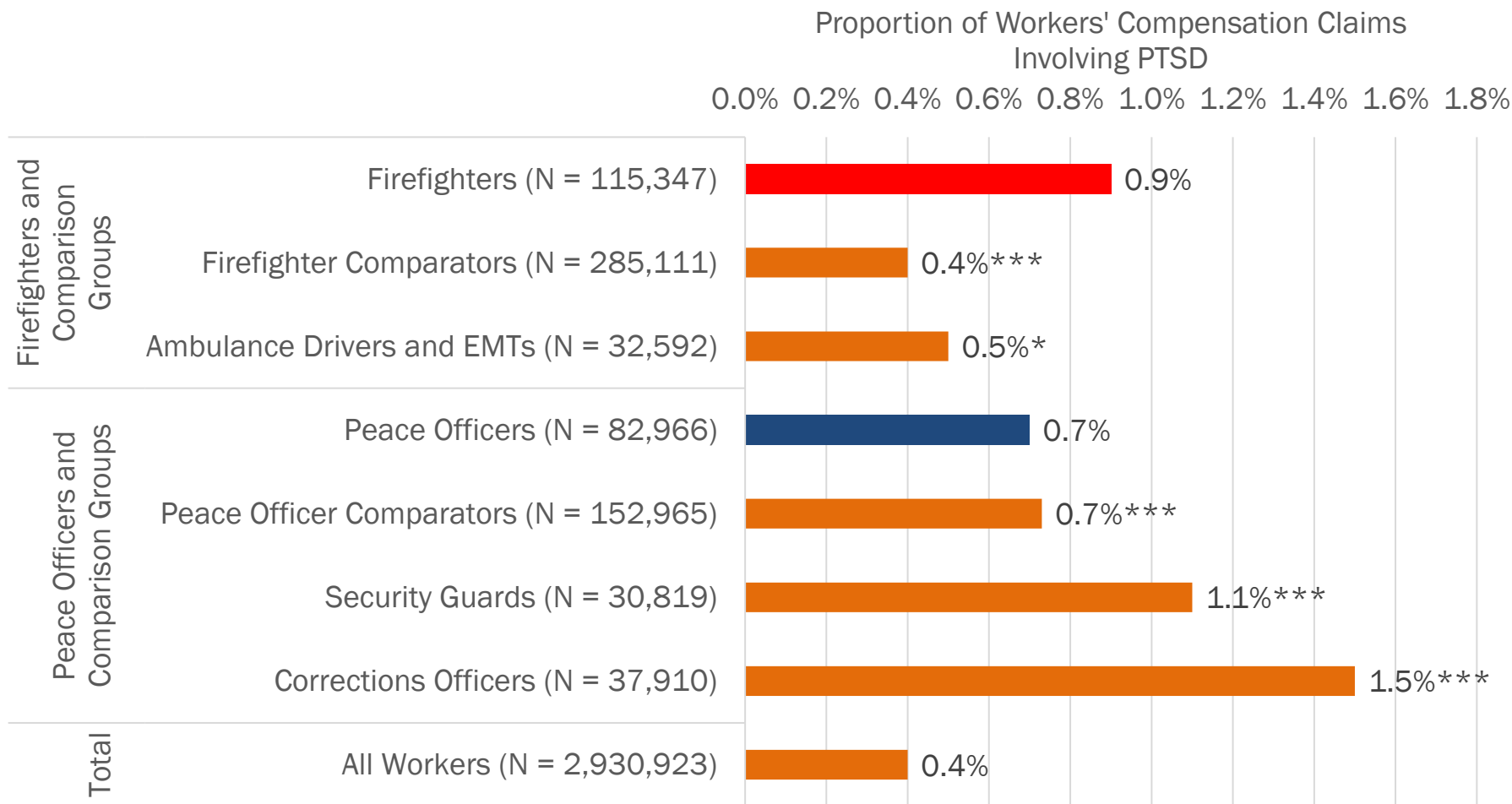
# Moderate, Serious Mental Distress Were Not More Common in First Responders Than in Other Workers



# Suicidal Ideation Was Less Common in First Responders Than in Other Workers



# First Responders' WC Claims Were More Likely to Involve PTSD (as Principal Diagnosis) Than Claims Filed by Others

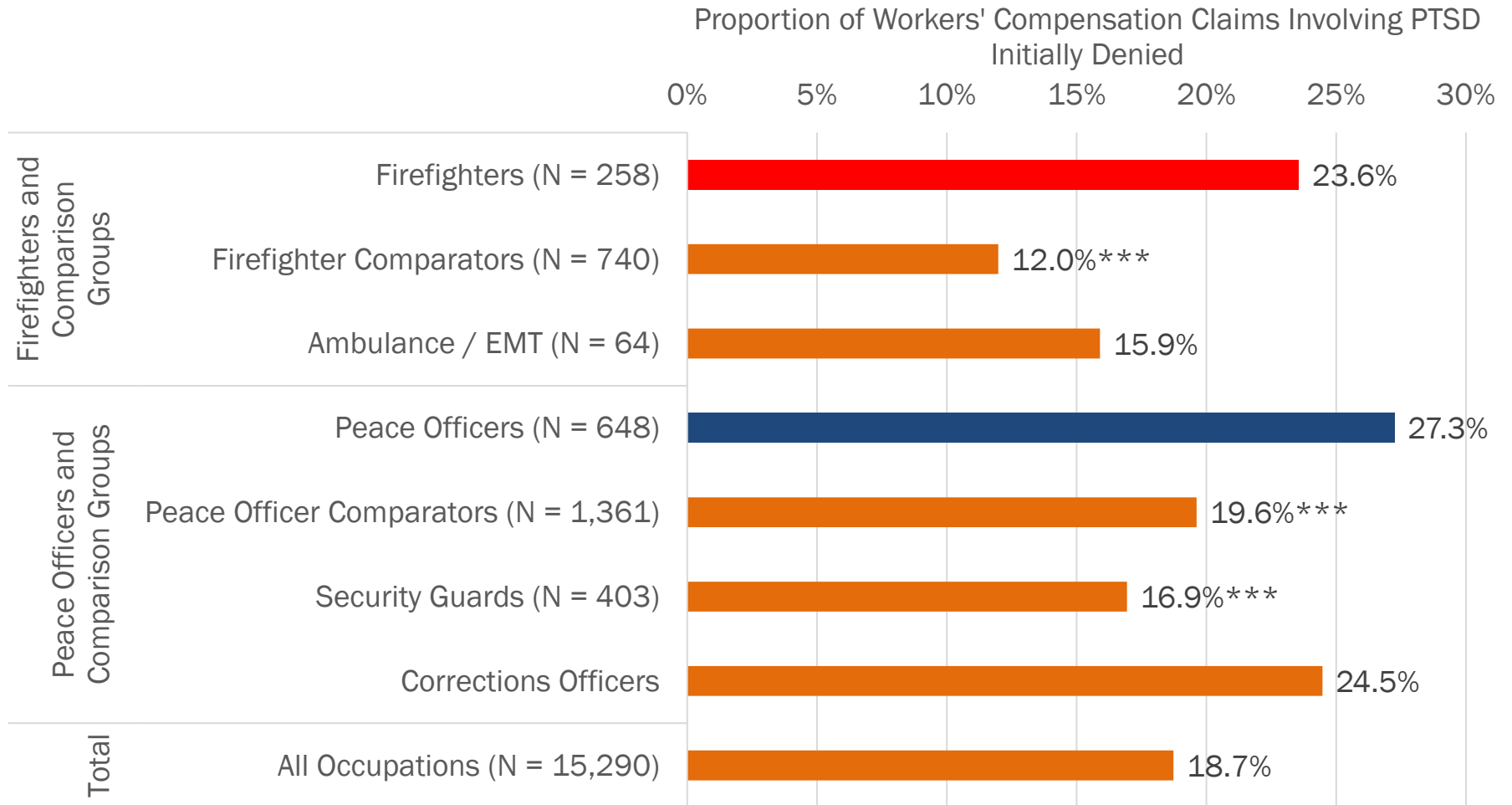


Source: Authors' calculations, 2008-2019 WCIS. "Involving PTSD" = 1+ WC medical bills with primary diagnosis of PTSD.

\* p < 0.10, \*\* p < 0.05, \*\*\* p < 0.01.

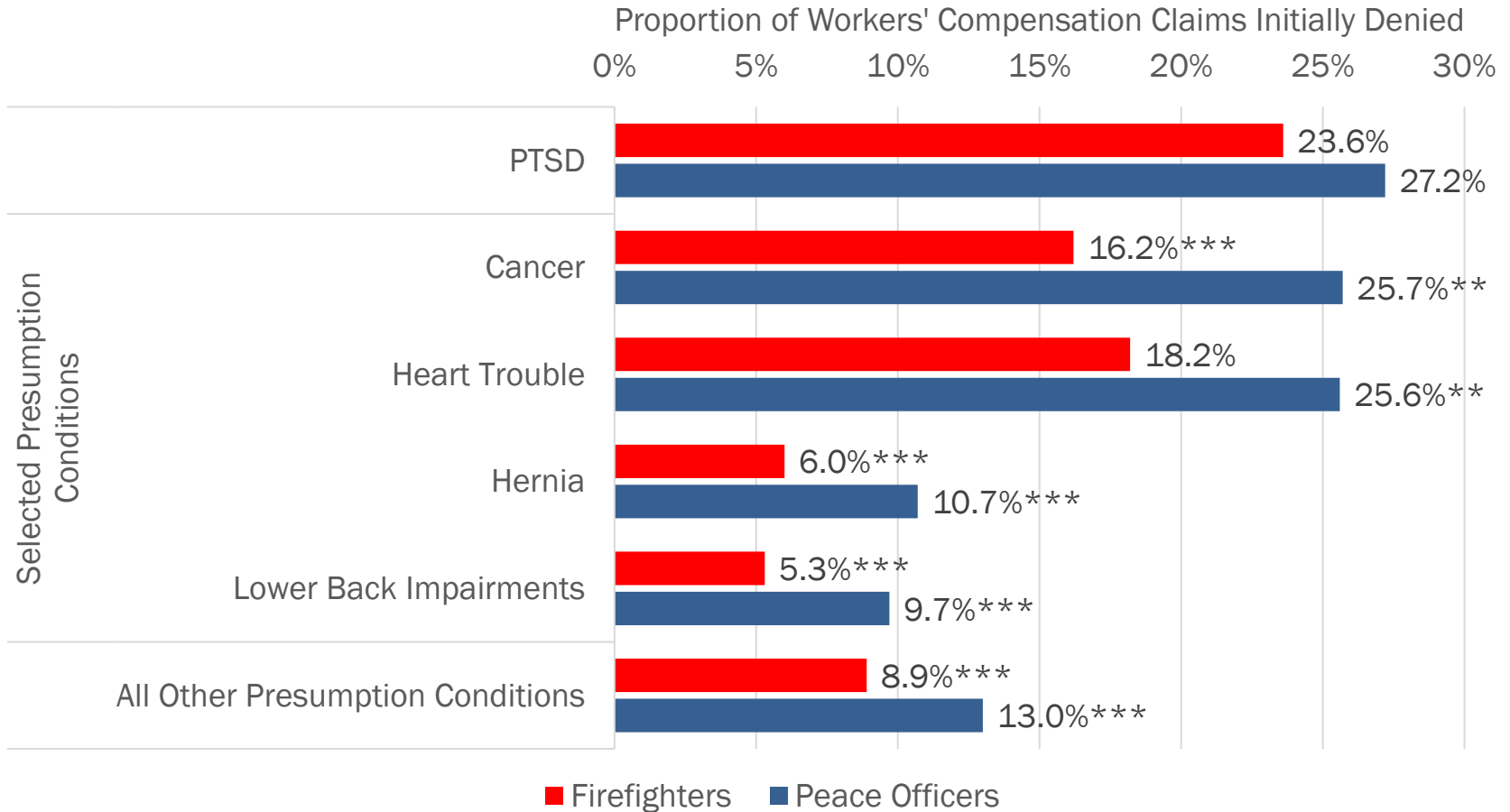


# First Responders' PTSD Claims were Denied More Frequently Than PTSD Claims Filed by Other Workers



Source: Authors' calculations, 2008-2019 WCIS. \*  $p < 0.10$ , \*\*  $p < 0.05$ , \*\*\*  $p < 0.01$ .

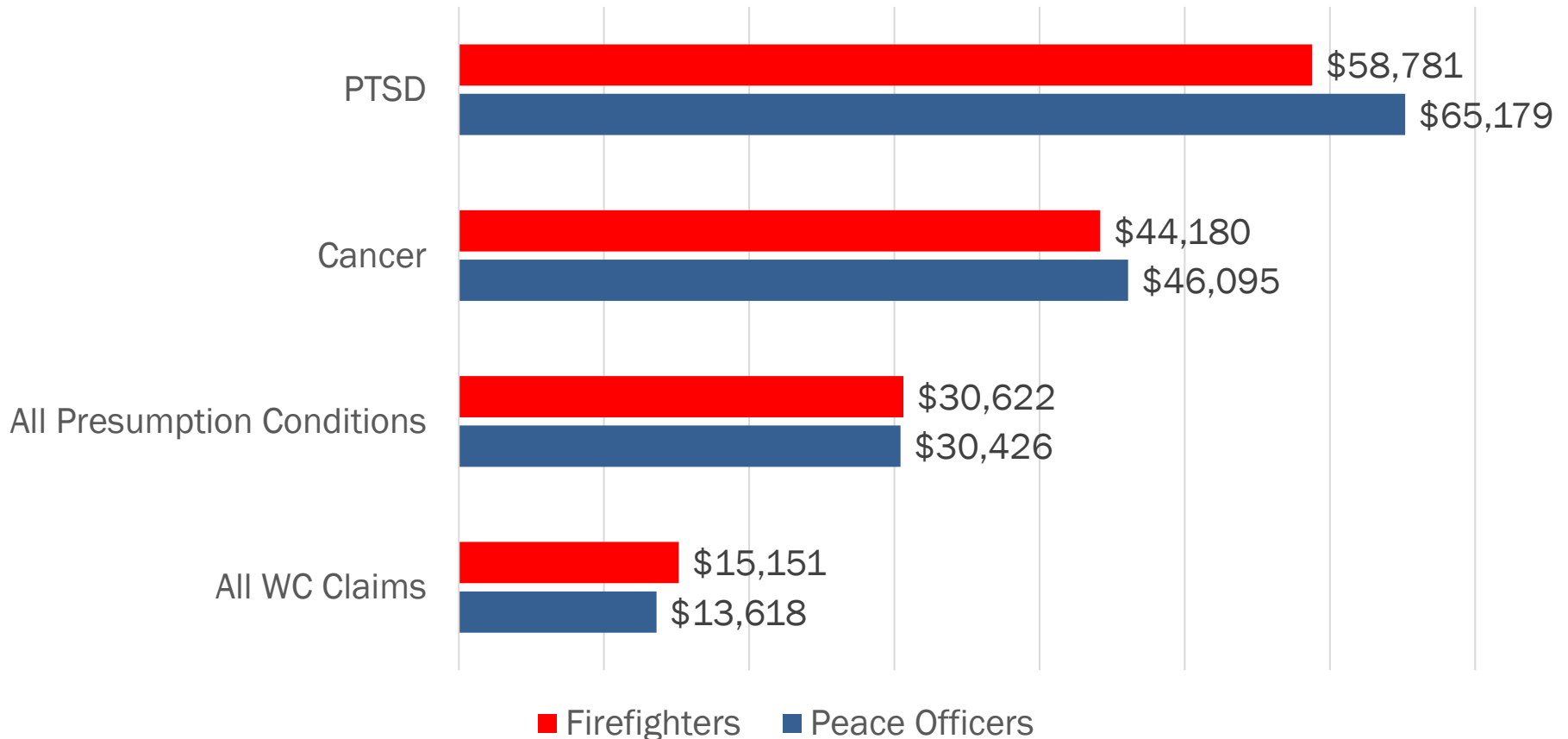
# PTSD Claims Denied More Often Than Other Presumption Conditions



# First Responder Claims Involving PTSD Were Costly Compared to Other Conditions

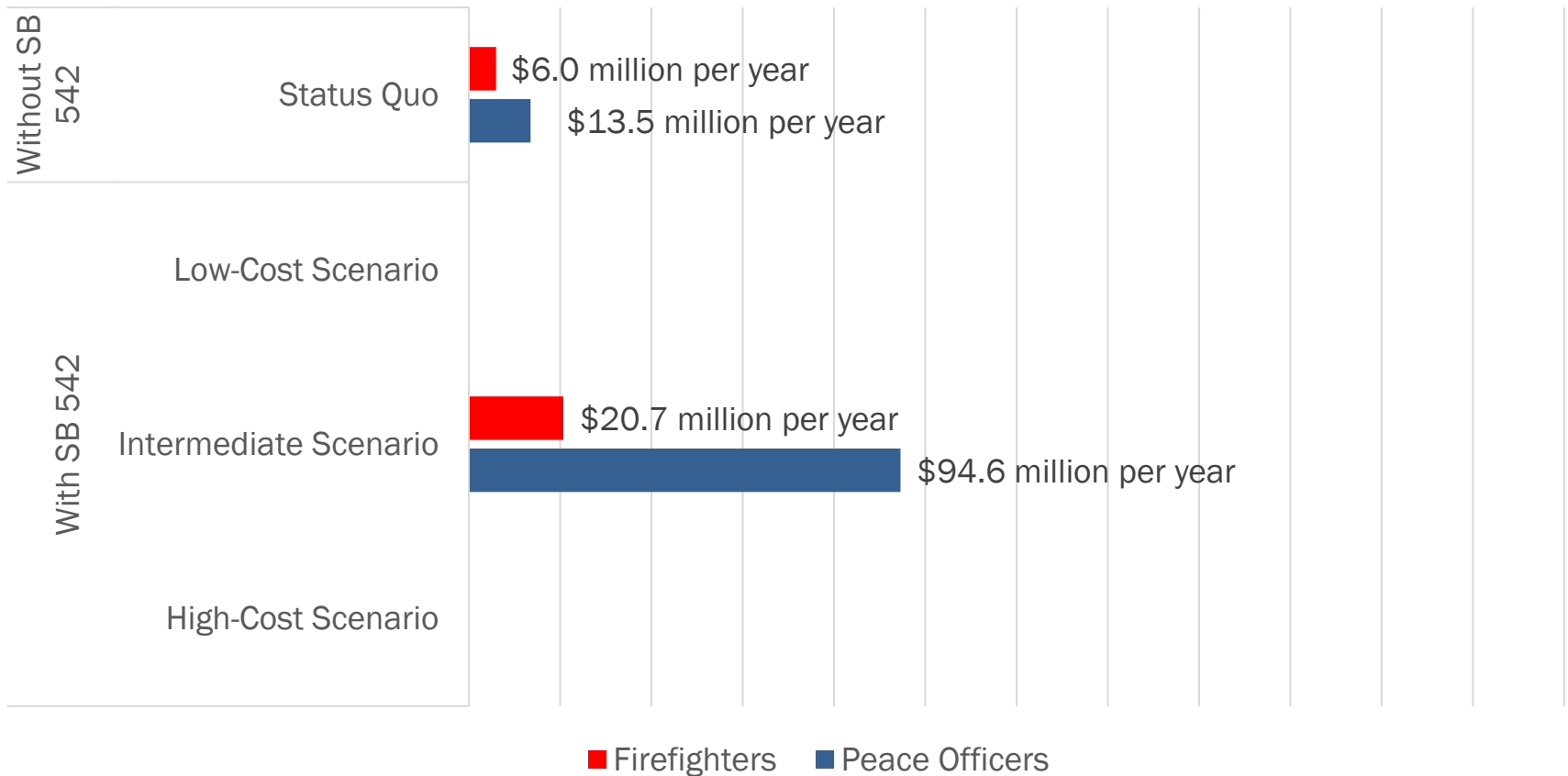
Paid Benefit Costs for First Responder Workers' Compensation Claims,  
by Involvement of PTSD or Other Health Conditions

\$0 \$10,000 \$20,000 \$30,000 \$40,000 \$50,000 \$60,000 \$70,000



# SB 542 Will Increase WC Costs for Cities, Counties, and the State

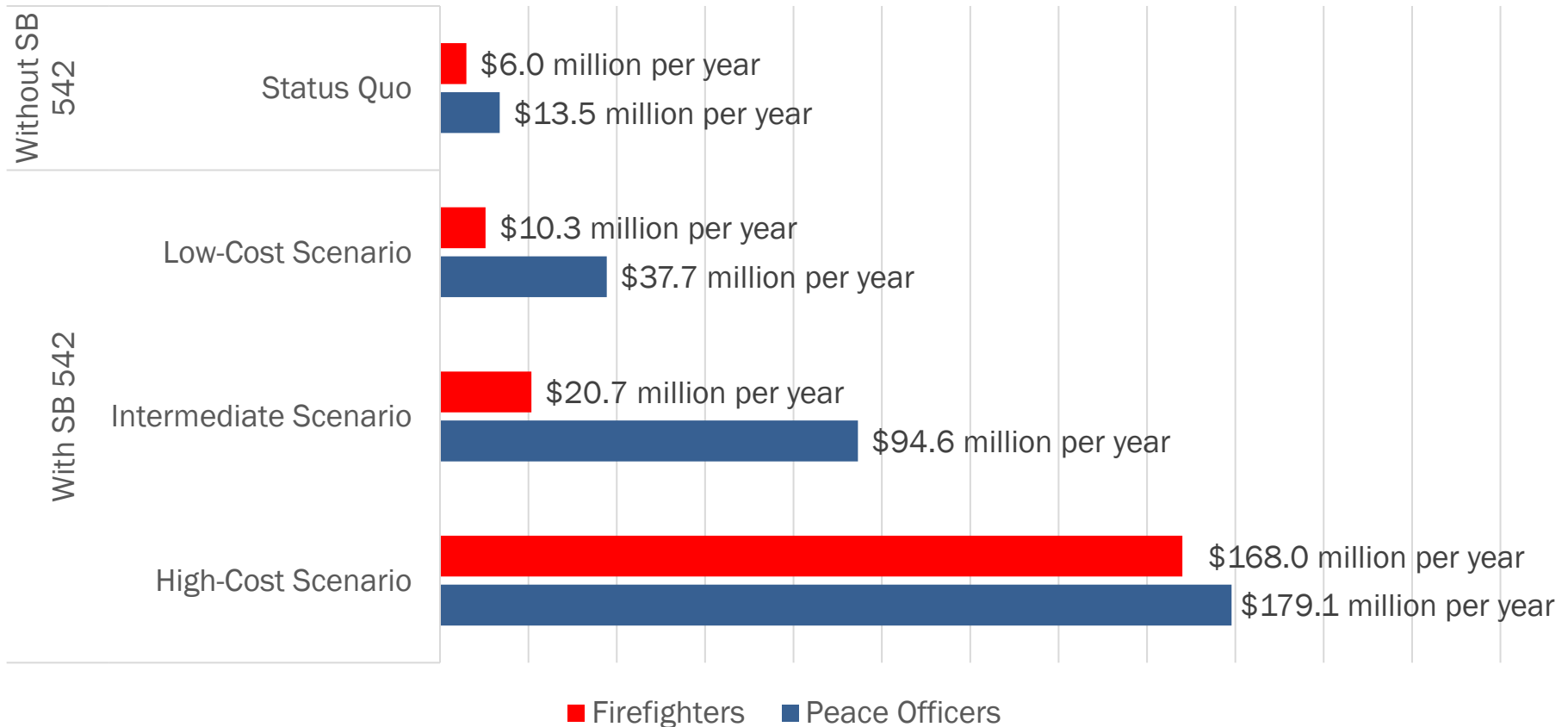
Predicted Average Yearly Cost of Benefits for PTSD Claims, 2020-2024 Injury Dates  
\$0 \$20 \$40 \$60 \$80 \$100 \$120 \$140 \$160 \$180 \$200 \$220 \$240



# Costs Will Depend on PTSD Incidence Rate, Claim Filing Behavior, and Denial Rates, And Are Highly Uncertain

Predicted Average Yearly Cost of Benefits for PTSD Claims, 2020-2024 Injury Dates

\$0 \$20 \$40 \$60 \$80 \$100 \$120 \$140 \$160 \$180 \$200 \$220 \$240



# Mental Health Providers Indicated Mental Health Injury is Feasible to Prove for First Responders

- They are exposed to traumas daily
  - Single incidents or cumulative trauma exposure can cause mental distress, psychiatric injury, and PTSD
  - More exposure to trauma in urban areas
- Their culture is to serve others and be strong, but this can make it hard to seek help
- They face stringent screening before joining the force
- If someone had no symptoms/issues prior to trauma on the job, can infer that mental health is job-related

# First Responders Faced Challenges Getting Adequate and Timely Mental Health Care

- SB 542 intended to encourage first responders to seek out mental health care
- Interviews raised several concerns
  - Most first responders relied on self-pay for care
  - Most did not seek treatment through employer-sponsored insurance (ESI) or group health
  - EAP programs were viewed as ineffective
  - First responders emphasized the need for culturally competent mental health providers
  - First responders had little to no success accessing such providers through EAP, MPNs or ESI

# Study Limitations

- Claims data and interviews reflect experiences of workers with injury dates in 2019 or earlier
  - WCIS data from years 2008-2019
  - Interviews covered experiences of claims filed primarily prior to SB 542
- PTSD, suicide completion not measured in survey data
- Impacts of SB 542 not yet observable in data used for study



# Conclusions and Policy Implications

- Some findings support rationale for PTSD presumption
  - First responders' PTSD claims frequently denied
  - These denials were frequently reversed
  - Firefighter WC claims more likely to involve PTSD
  - Interviews revealed many difficult experiences in WC system
- Some findings substantiate employer concerns about costs
  - Claims involving PTSD have high disability costs and are expensive compared to other WC claims
  - Cost to state and local government highly uncertain, but could be substantial relative to current costs for claims involving PTSD
  - Cost of retroactive presumption may be more modest if retroactive claims involve medical care but no new disability benefits
- We did not find worse mental health or higher suicide risk
- Findings have limitations and must be interpreted with care

# Many Important Questions Could Not Be Addressed and Call for Further Research

- Data on PTSD prevalence, incidence unavailable
  - Add questions to CHIS (PTSD Checklist)
  - Analyze restricted data files from federal surveys
- Productivity, job retention benefits of mental health treatment for first responders is unknown
  - Quantify costs of productivity loss and turnover
  - Quantify benefits of earlier, more effective treatment
- *Ex post* evidence on effects of SB 542
  - Impacts on claim volumes, denials, and reversals
  - Actual costs to state and local government

# We Also Identified Challenges That May Call for Policy Solutions Beyond SB 542

- First responders reported difficulty accessing and paying for mental health care even when workers' compensation claims were accepted
  - Culturally competent providers hard to find
  - Fragmentation of health care payers delayed care
  - Direct care provision used by some departments to address these issues, but we don't know if this is cost-effective or succeeds in helping first responders
- Trauma-exposed occupations not covered by SB 542 may have worse mental health than first responders
  - EMT/Ambulance, Security Guards, Corrections Officers

