

# Bi-Weekly COVID-19 Update



**SPECIAL EDITION: LONG COVID**

**Dr Mark Cunningham-Hill**

Medical Director NEBGH

Monday July 11<sup>th</sup>, 2022

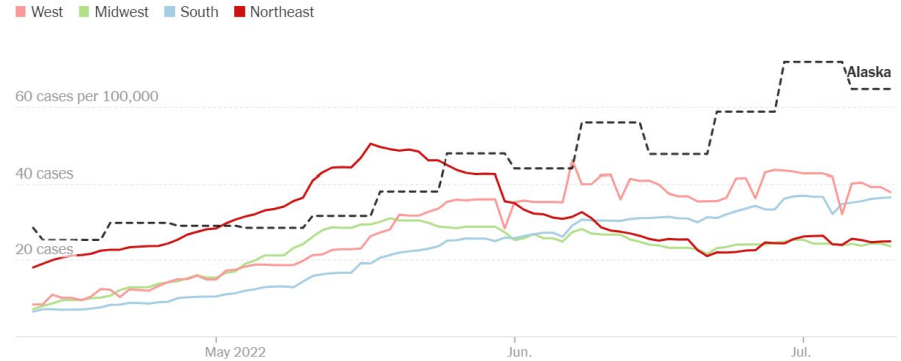
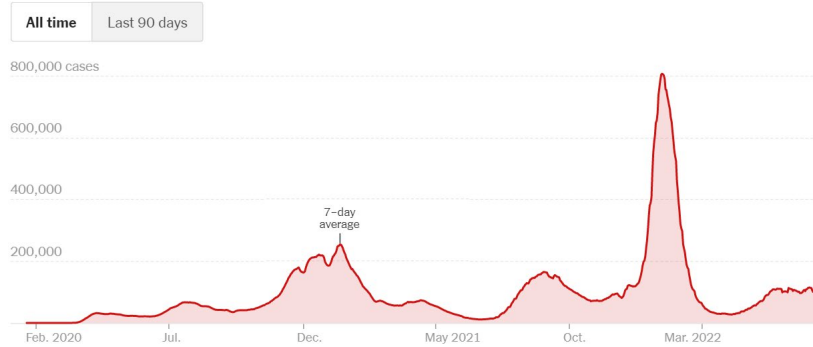
# Special Guest



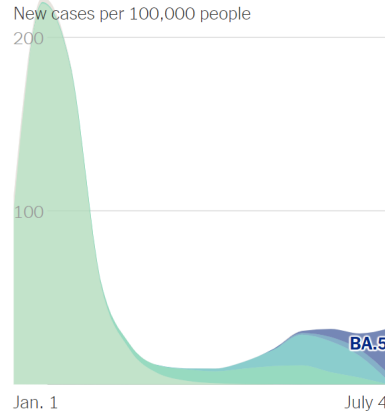
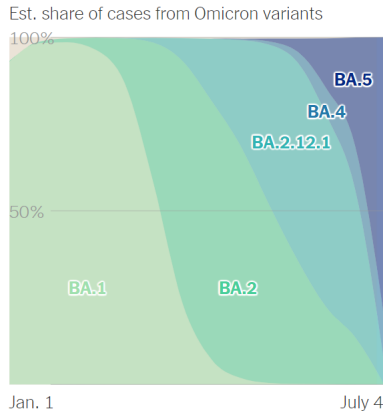
**Robin Gelburd**  
President  
*FAIR Health*

# Pandemic Current State

## New reported cases



## United States



BA.5 is highly infectious similar to BA.2 and BA.2.12.1 – most likely becoming dominant because of increased immune evasion

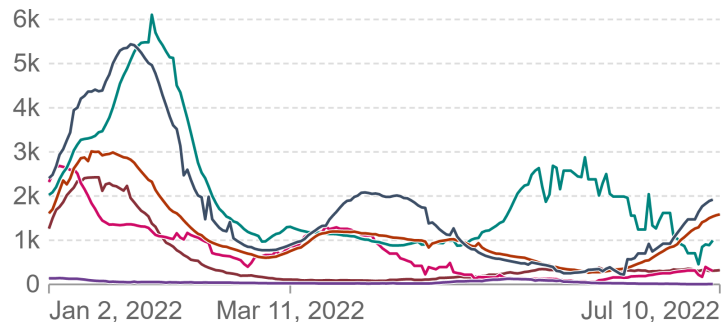
So, what does that mean for the US and NE?

# Confirmed COVID-19 cases, deaths, hospital admissions, and patients in ICU per million people

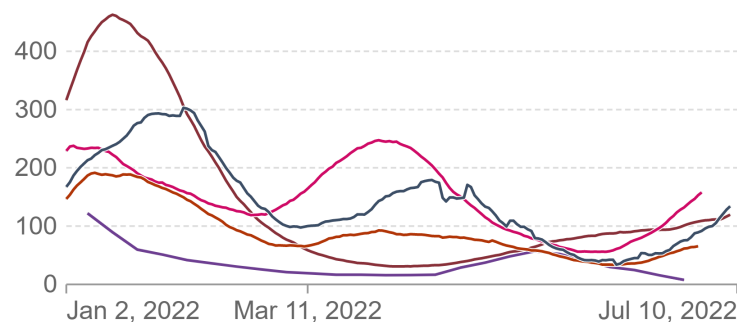
Limited testing and challenges in the attribution of cause of death means the cases and deaths counts may not be accurate.

■ France ■ Italy ■ Portugal ■ South Africa ■ United Kingdom ■ United States

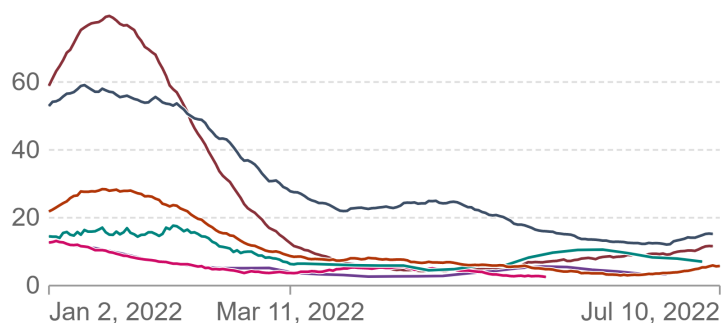
## New cases (per 1M)



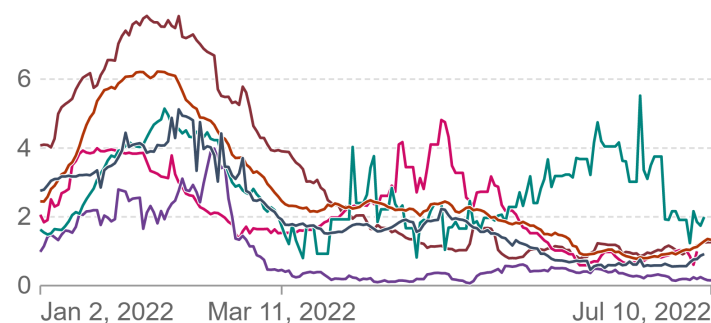
## Hospital admissions (per 1M)



## Patients in ICU (per 1M)



## New deaths (per 1M)



# For the US

- Modest BA.5 surge July and August
  - Home testing and decreased frequency of States reporting data means size of wave is underestimated
- 4+ weeks behind Europe .... Another 4+ weeks of waning immunity
- However, still protection from vaccinations, boosters, and January Omicron wave, but:
  - Increased hospitalizations – especially in areas with lower vaccination and booster rates
  - Increased deaths – especially in the 50+ age group who are unvaccinated and/or un-boosted
- What you can do:
  - Get yourself and those around you vaccinated
  - Make sure you have had all your eligible boosters
  - Continue to wear a high quality (KN95, KR94 or N95) mask when in public indoor spaces
  - Make sensible choices

# FAIR Health Study on Patients Diagnosed with Post-COVID Conditions

Robin Gelburd, President

July 11, 2022



# FAIR Health Mission

- FAIR Health is a national, independent 501(c)(3) nonprofit organization dedicated to bringing transparency to healthcare costs and health insurance information through data products, consumer resources and health systems research support
- FAIR Health provides fair and neutral information to all those we serve, including consumers, payors, providers, researchers, government entities and more





# The FAIR Health Private Claims Repository

**36+**  
Billion

Medical and Dental  
Claims from 2002 to  
the Present

*Updated on a monthly  
basis*

**2+**  
Billion

New Claims  
Every Year

**493**

Regions in the  
United States

Nationwide  
Coverage

70+  
Contributors

Quality  
Testing and  
Control

Includes  
Medicare  
Advantage  
Claims





# FAIR Health: Certified CMS Qualified Entity (QE)



**Complete collection of Medicare Parts A, B and D claims data for all 50 states and Washington, DC**

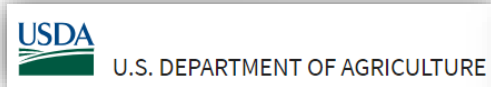
**Entrusted with QE data due to national breadth of FH private claims/state-of-the-art security protections**

**Medicare data from 2013 to present**

**40+ billion Medicare claims**

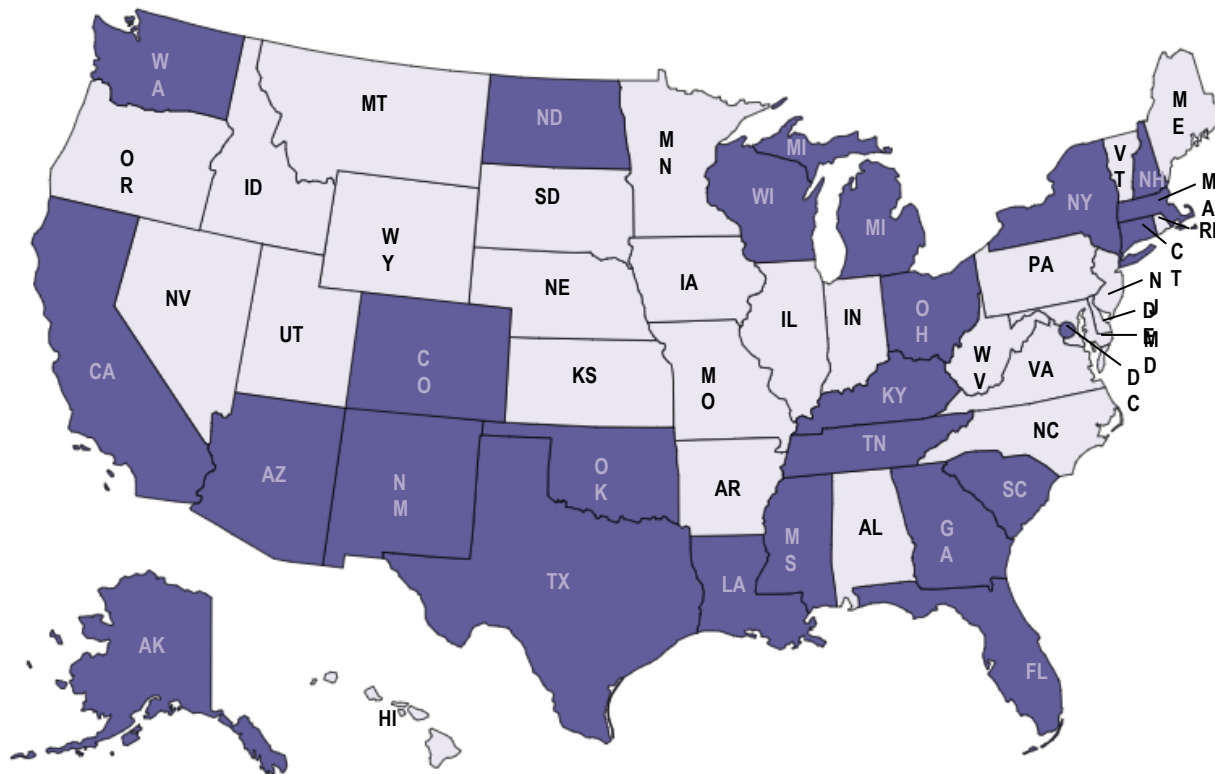


# Interaction with Federal Agencies and Officials



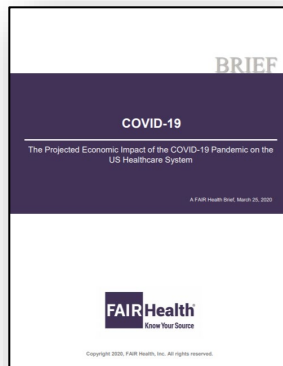
Office for the Advancement of Telehealth

# FAIR Health State Policy Connections: Laws, Regulations, Programs and Policy

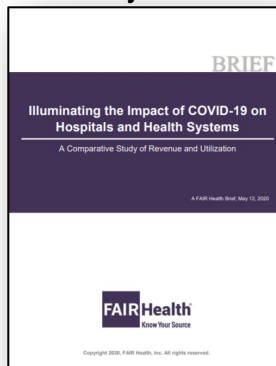


# FAIR Health COVID-19 Studies

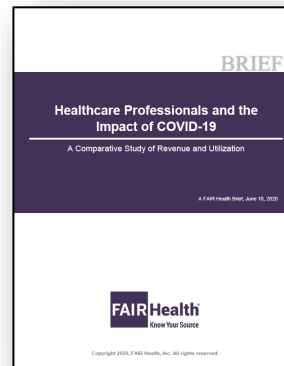
March 2020



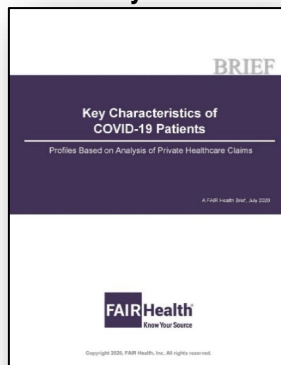
May 2020



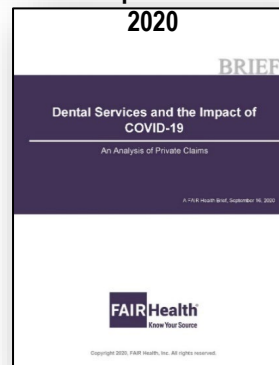
June 2020



July 2020

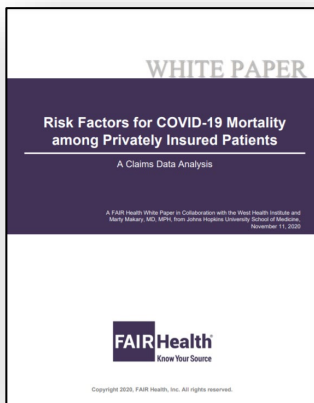


September 2020

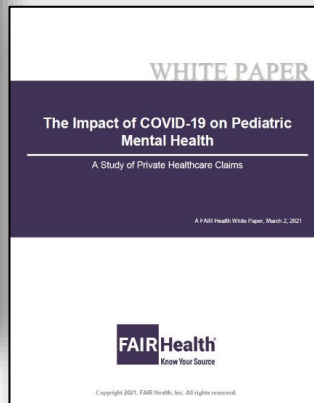


# FAIR Health COVID-19 Studies Continued

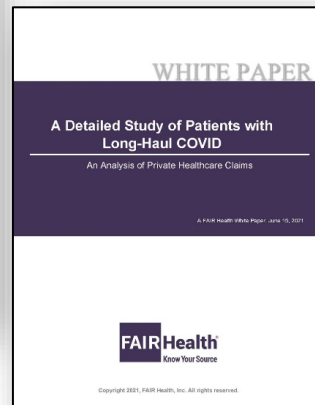
November 2020



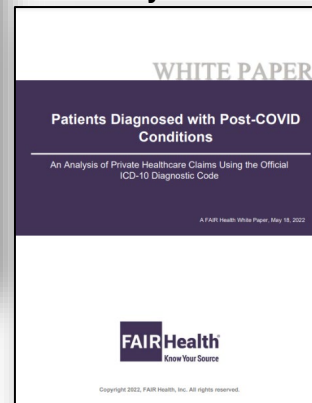
March 2021



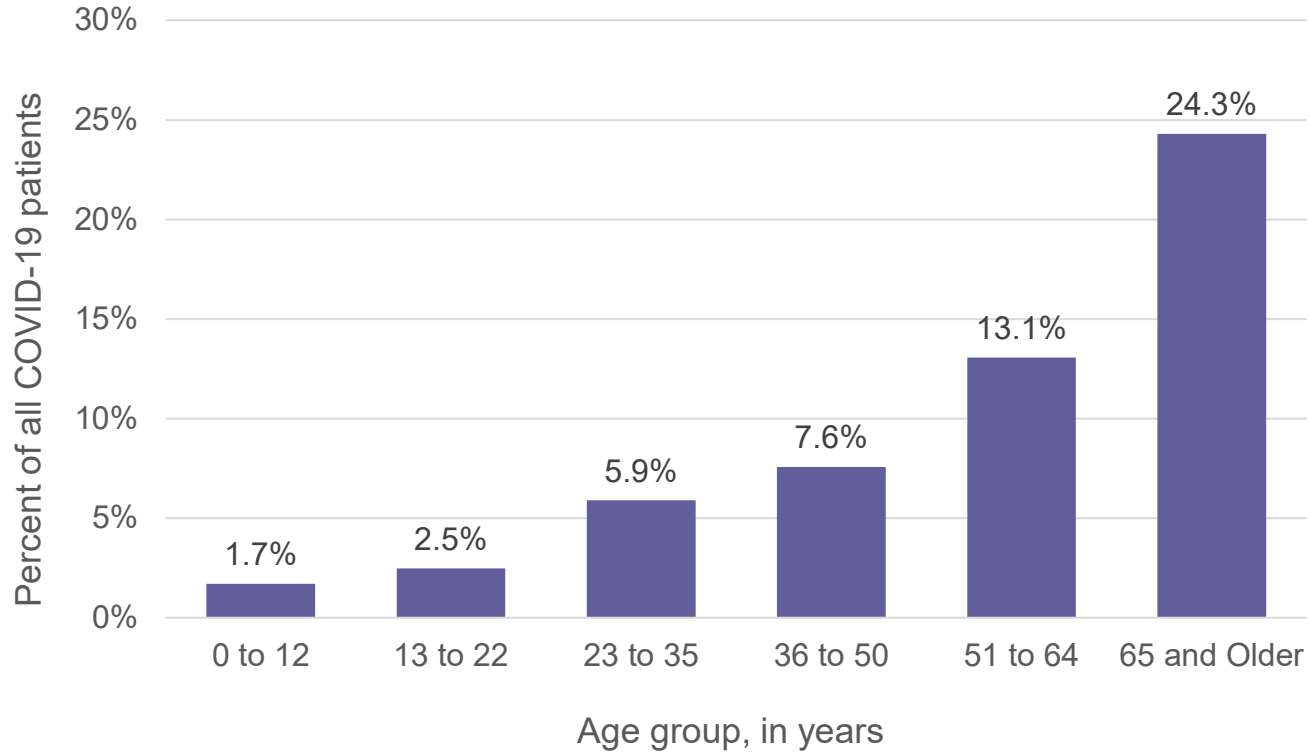
June 2021



May 2022

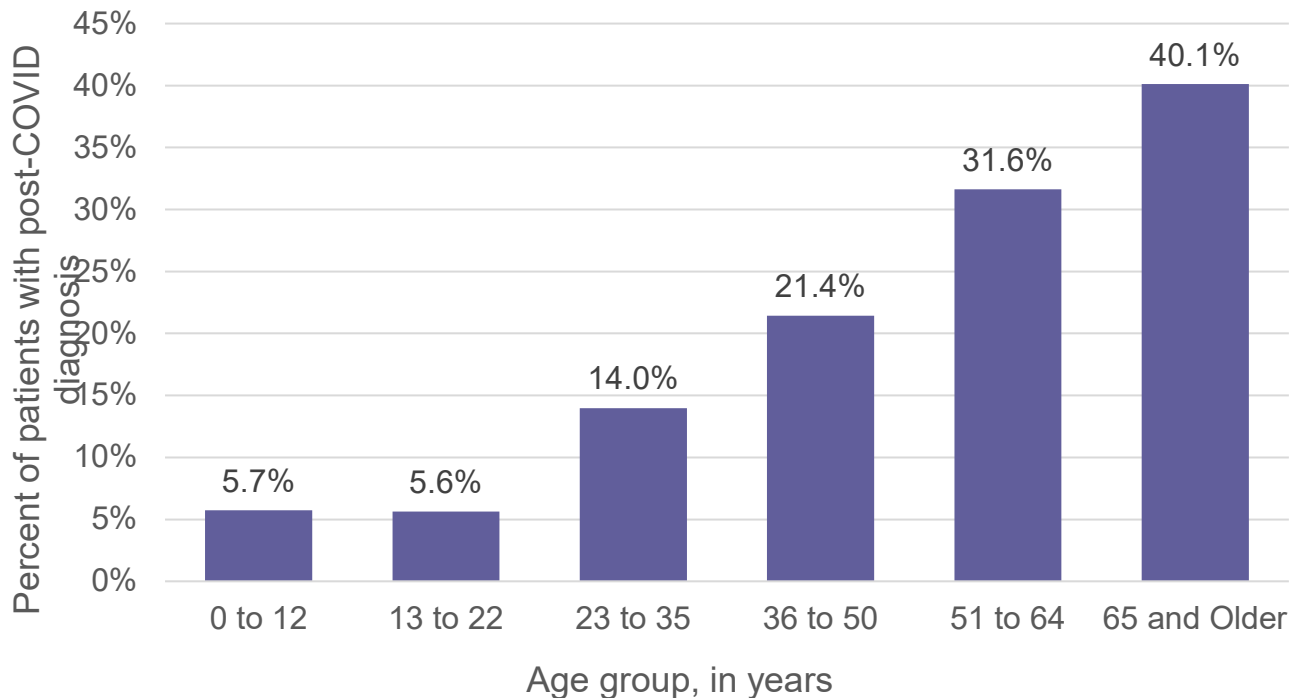


# COVID-19 Hospitalizations by Age, April 2020 to January 2022

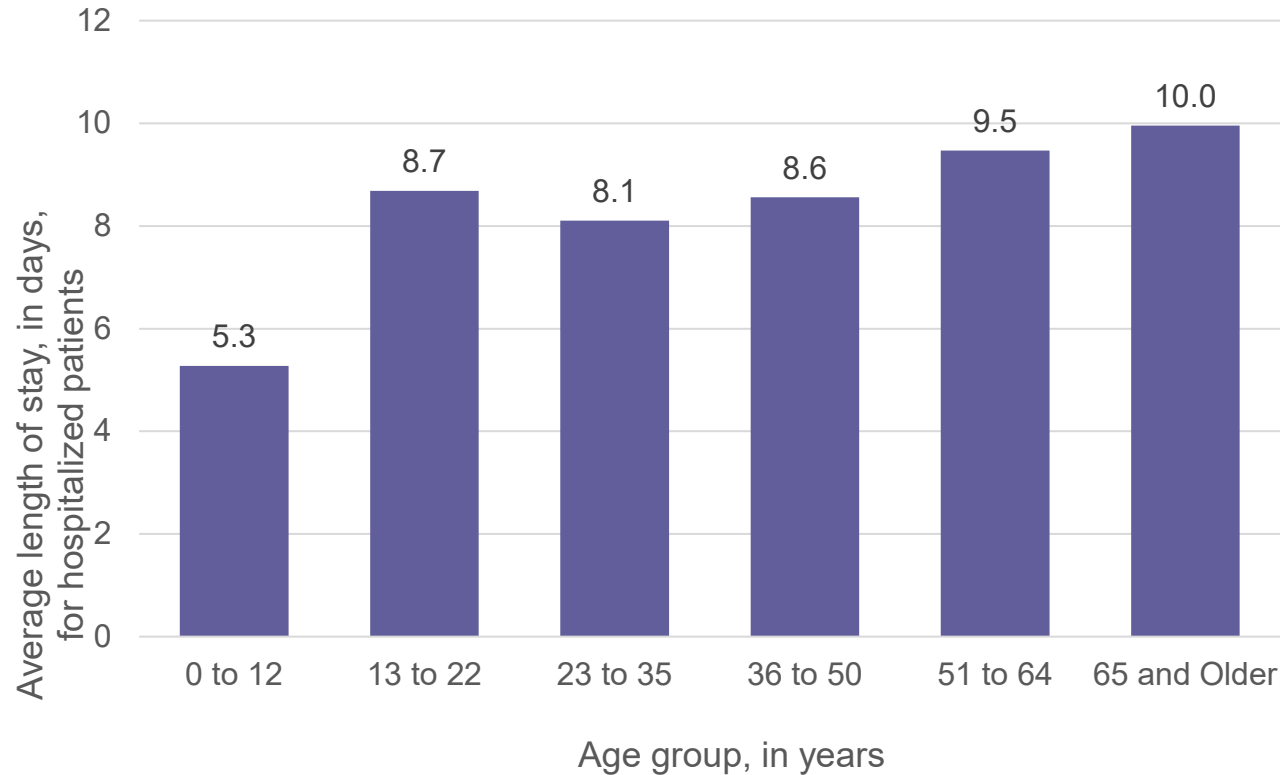




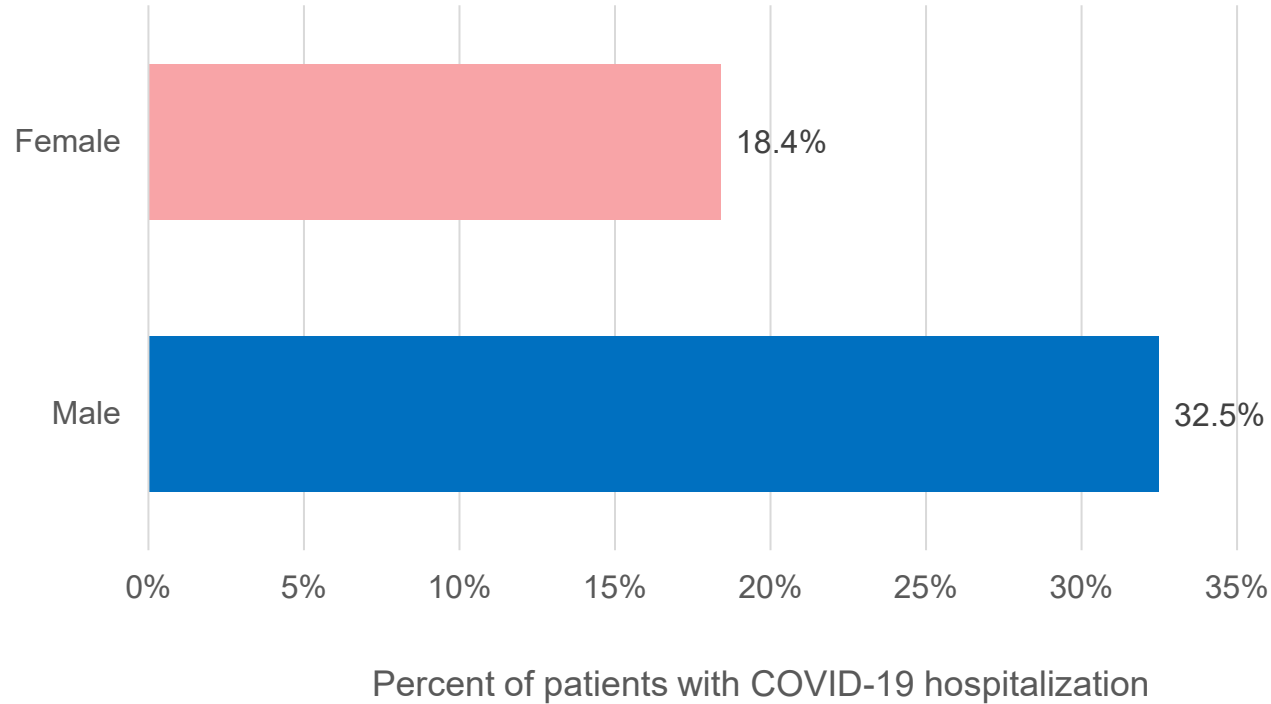
# COVID-19 Hospitalizations in Patients with U09.9 Post-COVID Diagnosis by Age, October 2021 to January 2022



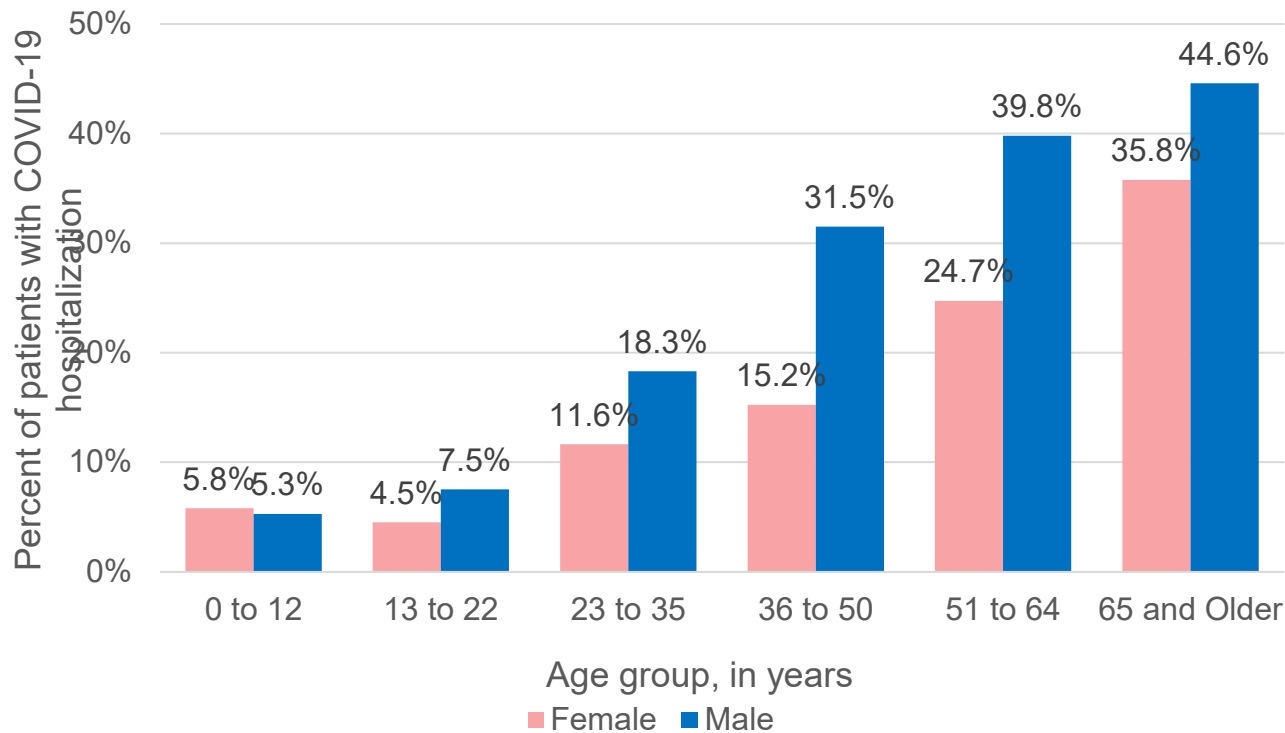
## Average Length of Stay, in Days, for COVID-19 Hospitalizations in Patients with U09.9 Post-COVID Diagnosis by Age, October 2021 to January 2022



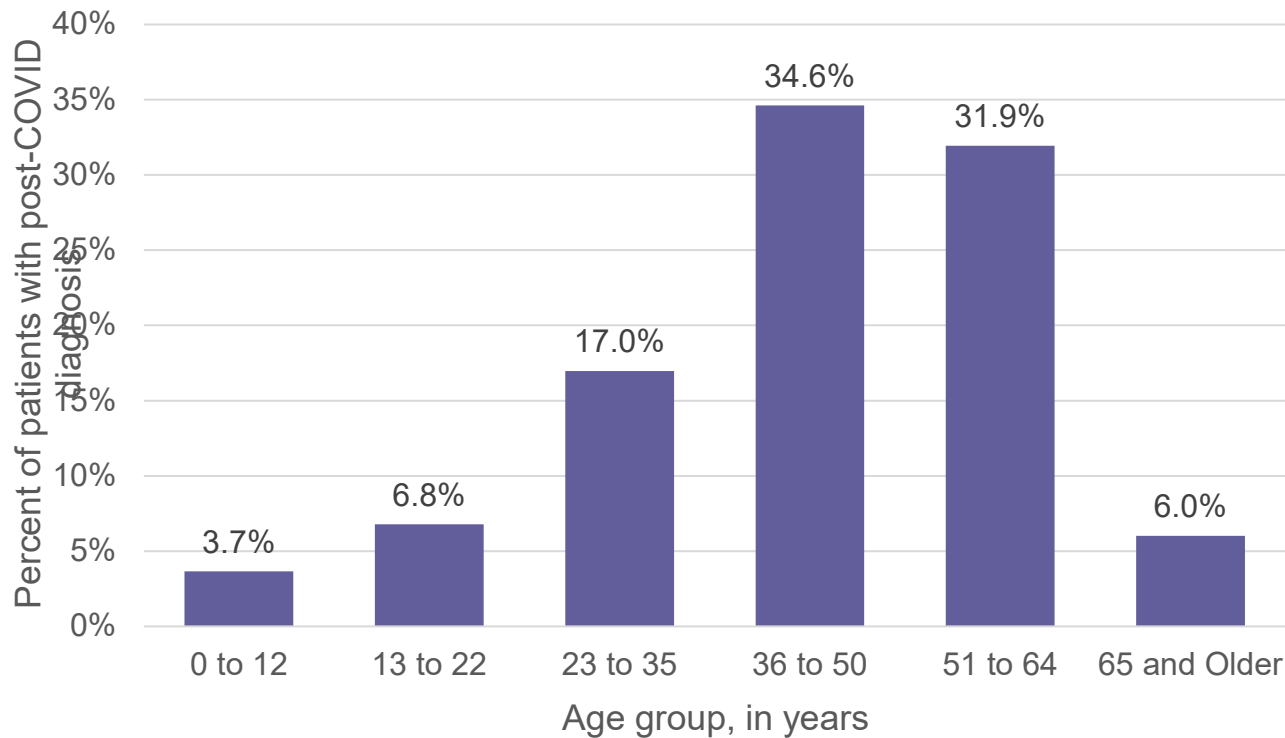
# COVID-19 Hospitalizations in Patients with U09.9 Post-COVID Diagnosis by Gender, October 2021 to January 2022



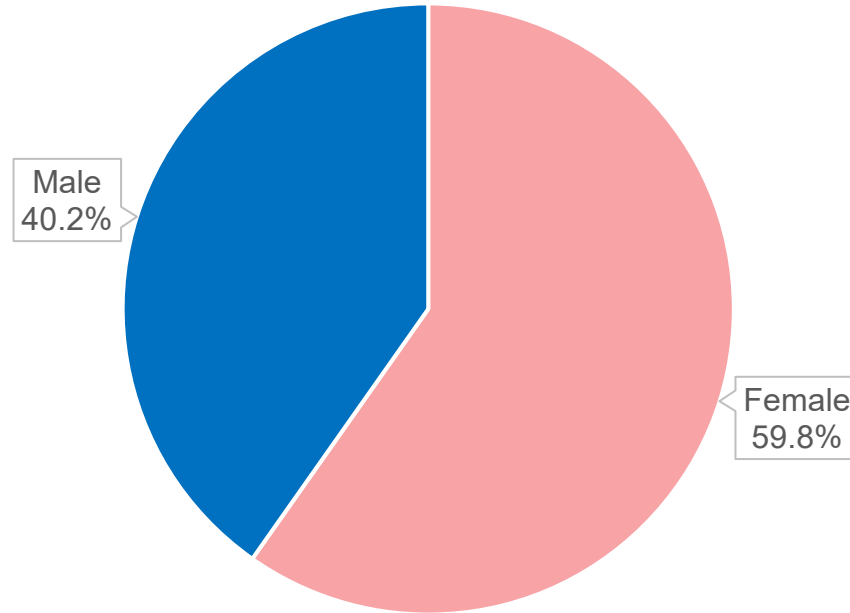
# COVID-19 Hospitalizations in Patients with U09.9 Post-COVID Diagnosis by Age and Gender, October 2021 to January 2022



# Patients with U09.9 Post-COVID Diagnosis by Age, October 2021 to January 2022

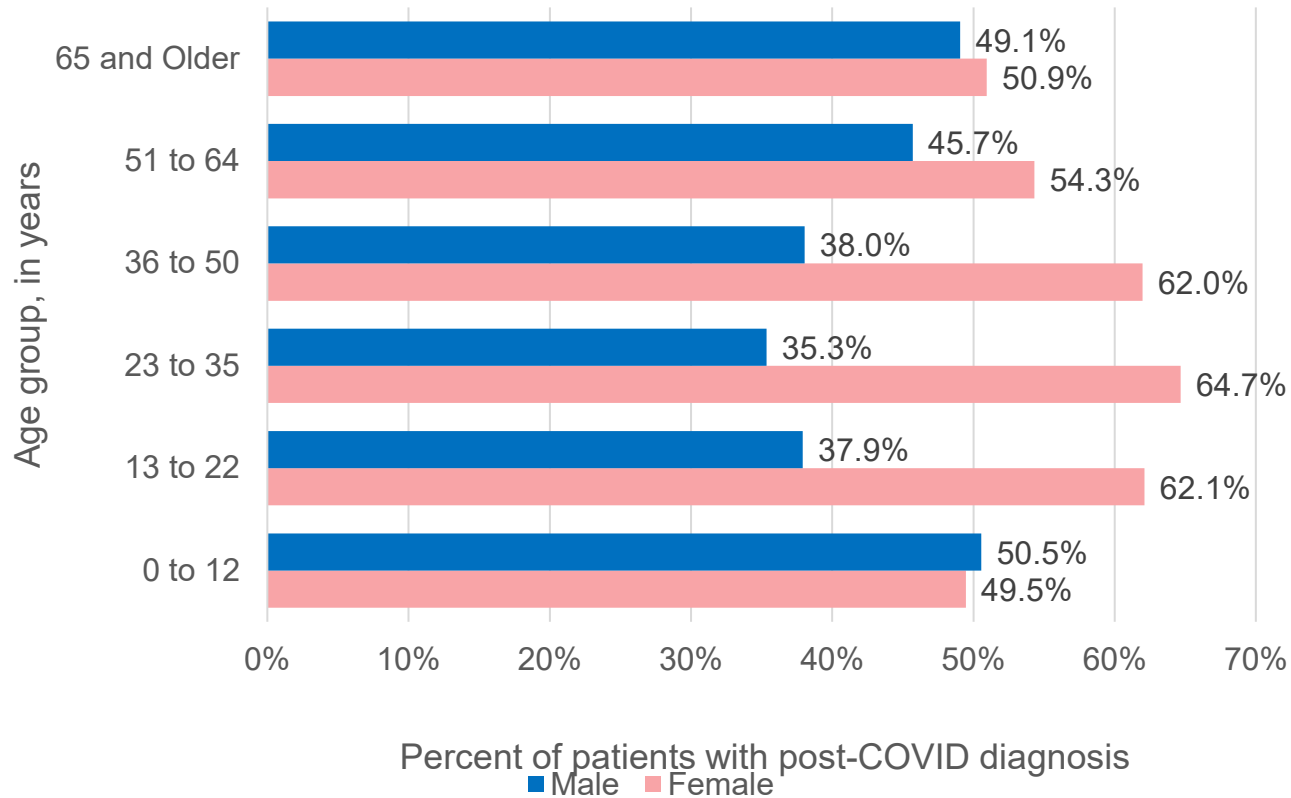


# Patients with U09.9 Post-COVID Diagnosis by Gender, October 2021 to January 2022

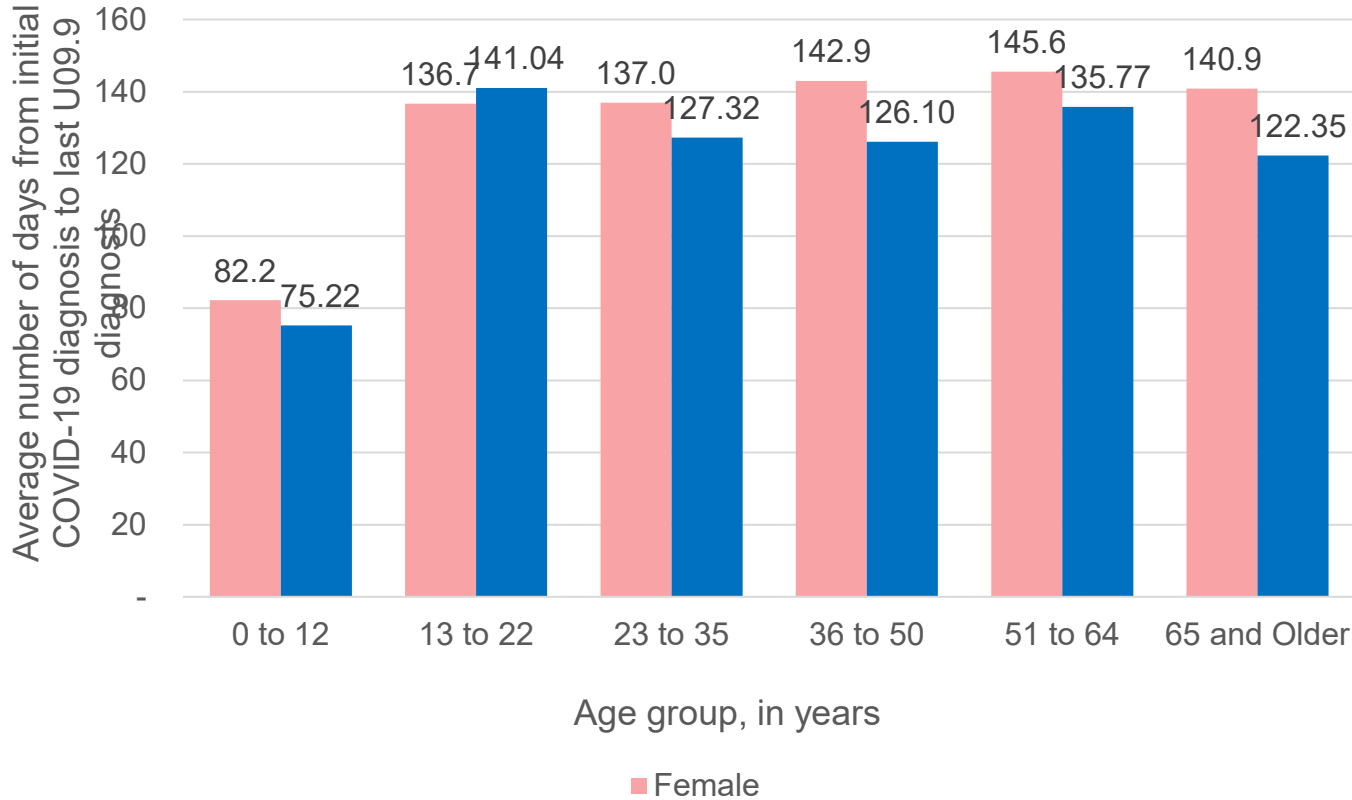




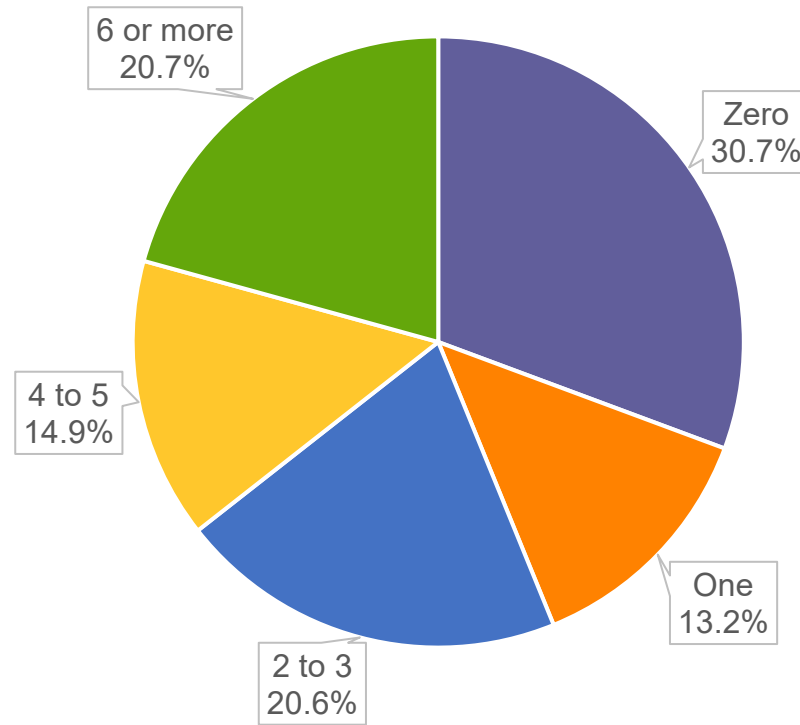
# Patients with U09.9 Post-COVID Diagnosis by Age and Gender, October 2021 to January 2022



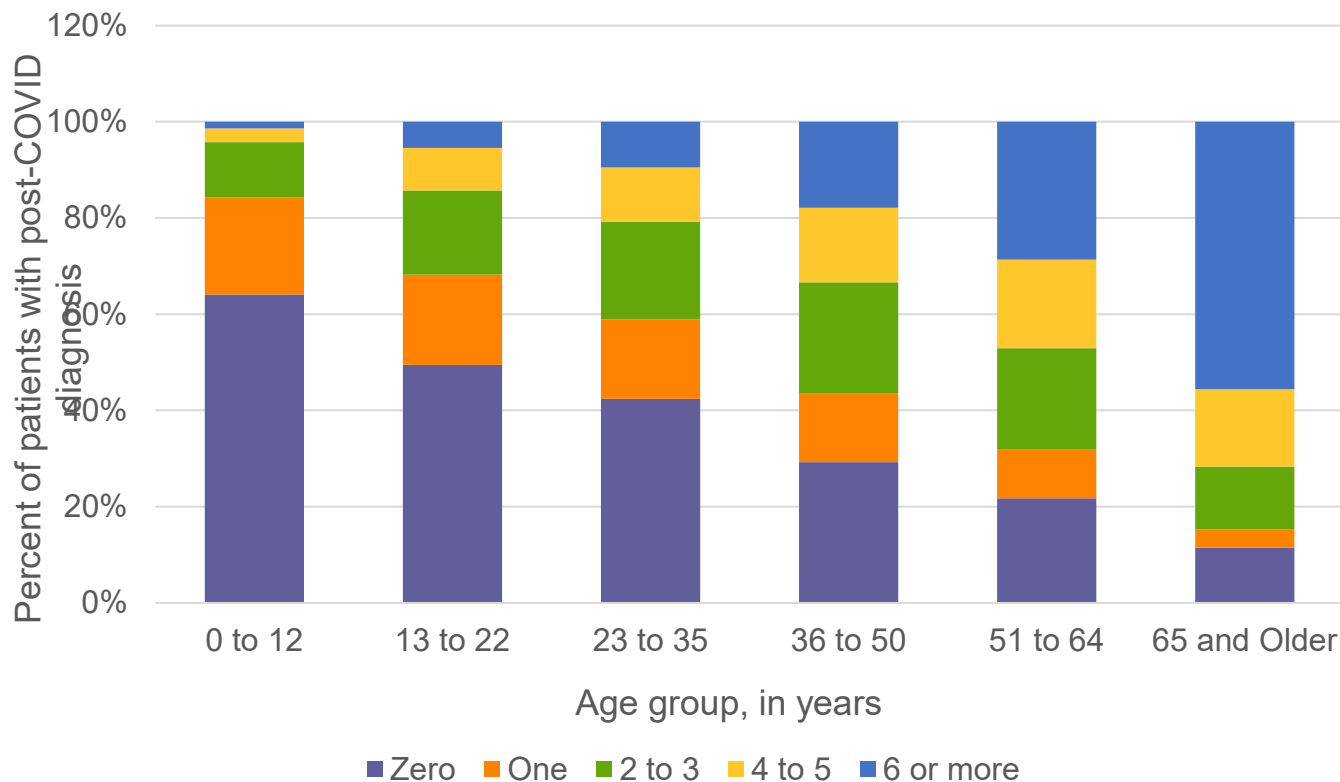
# Average Number of Days from Initial COVID-19 Diagnosis to Last U09.9 Post-COVID Diagnosis, by Age and Gender, October 2021 to January 2022



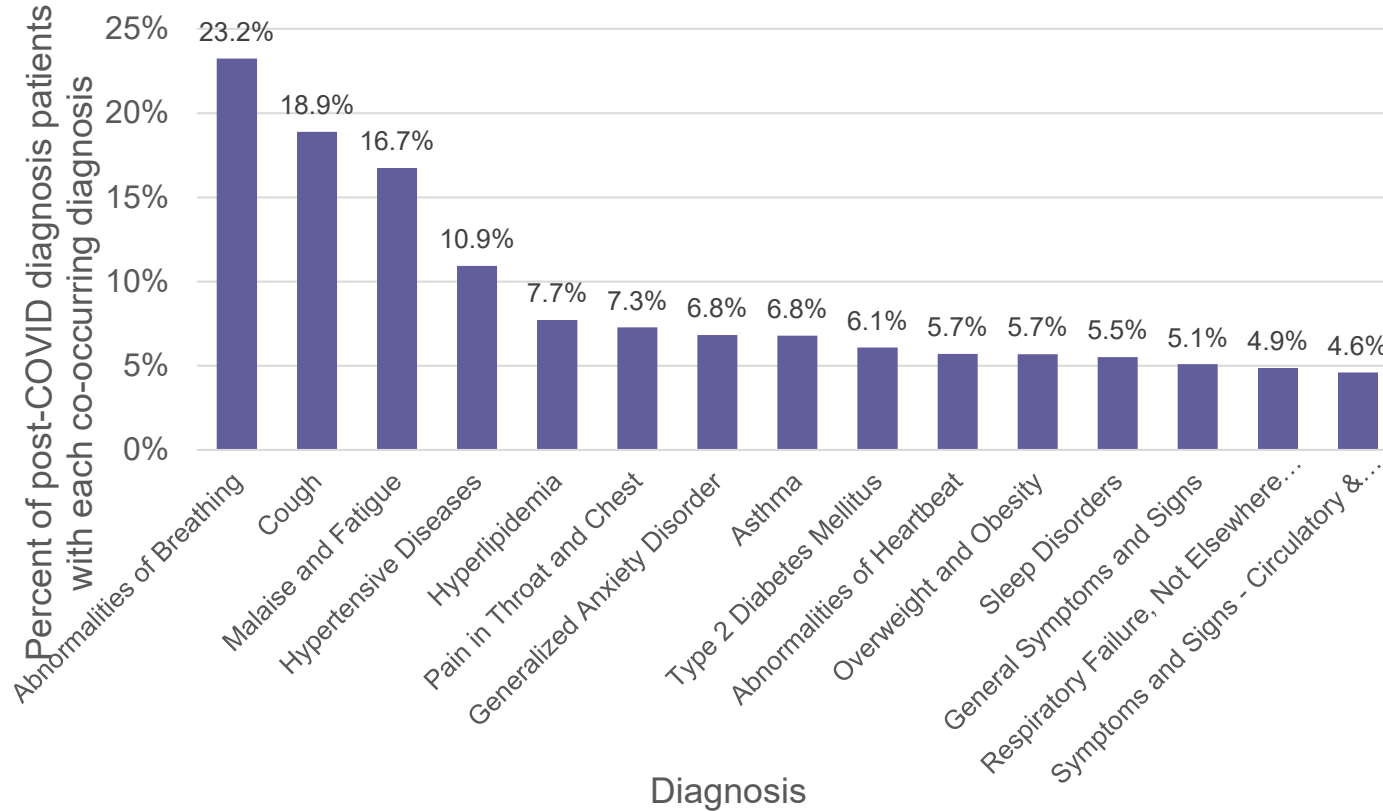
# Preexisting Chronic Comorbidities in Patients with U09.9 Post-COVID Condition, October 2021 to January 2022



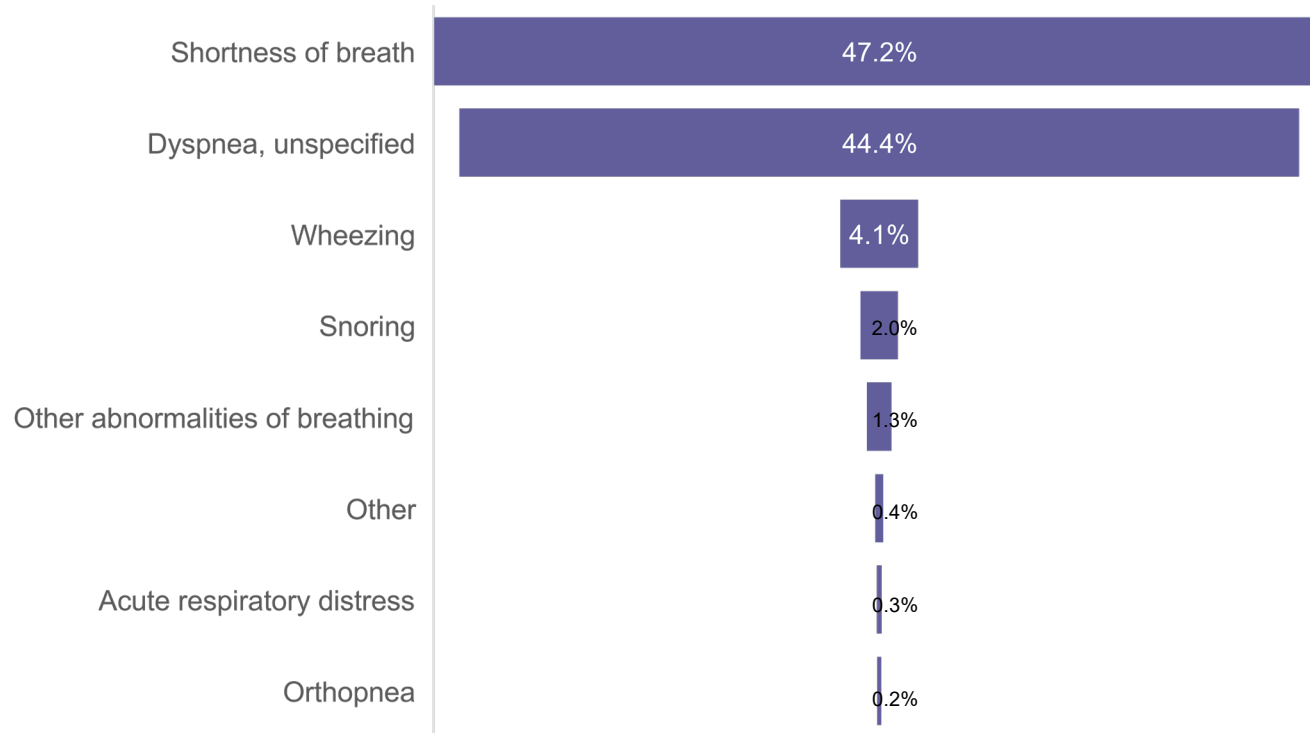
# Preexisting Chronic Comorbidities in Patients with U09.9 Post-COVID Condition by Age, October 2021 to January 2022



# Fifteen Diagnoses Most Commonly Co-occurring with U09.9 Post-COVID Diagnosis, October 2021 to January 2022

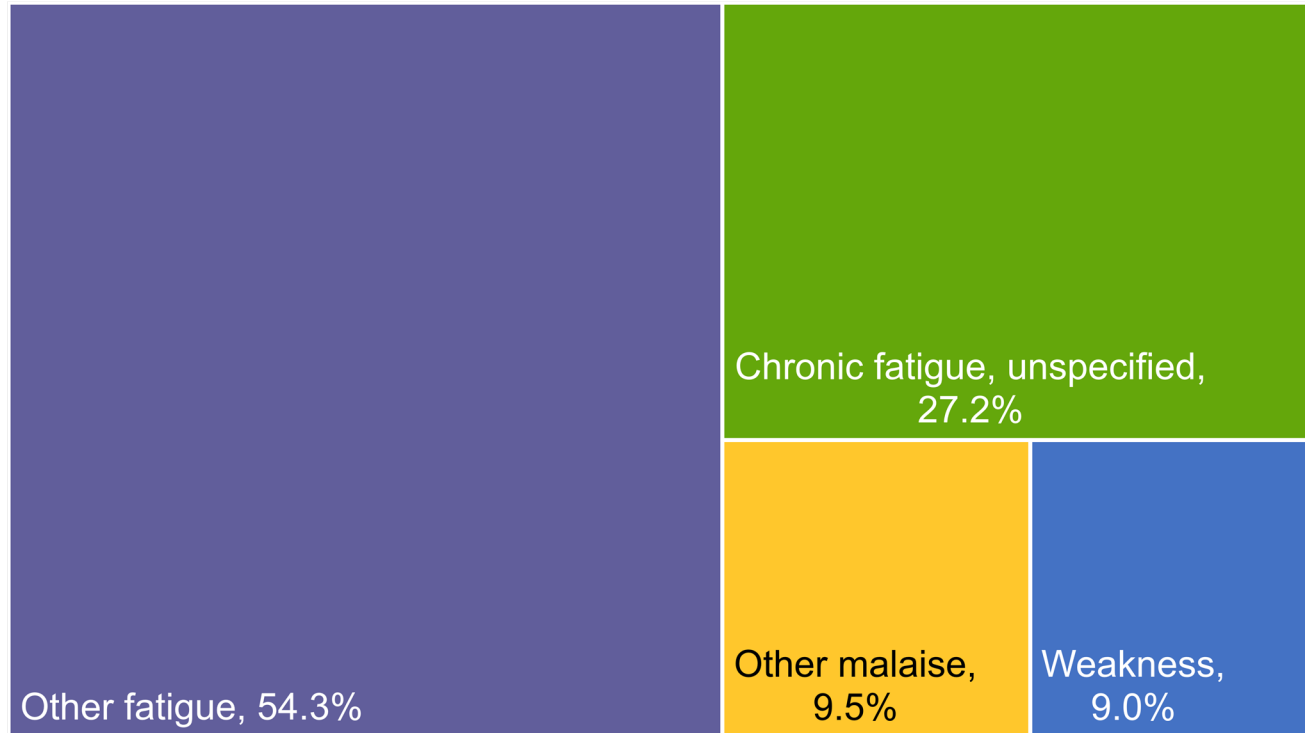


## Diagnoses within the Category Abnormalities of Breathing Most Commonly Co-occurring with U09.9 Post-COVID Diagnosis, October 2021 to January 2022

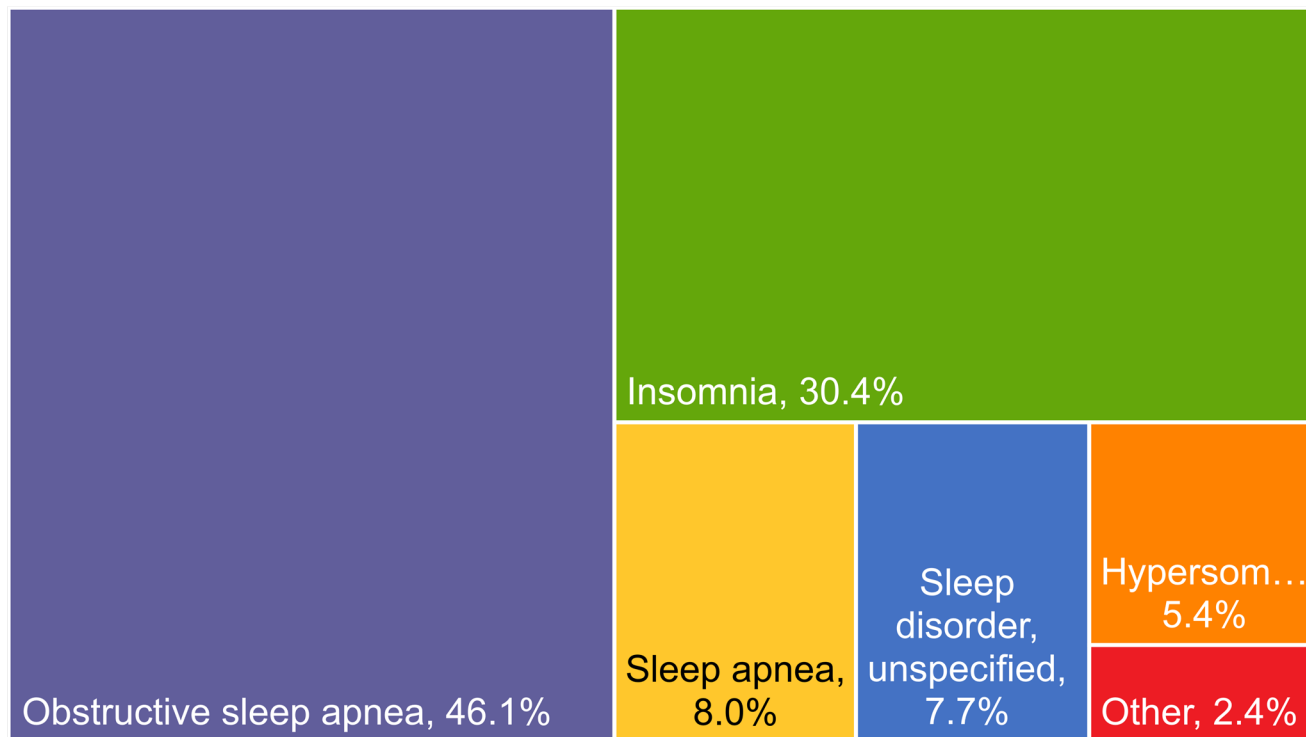




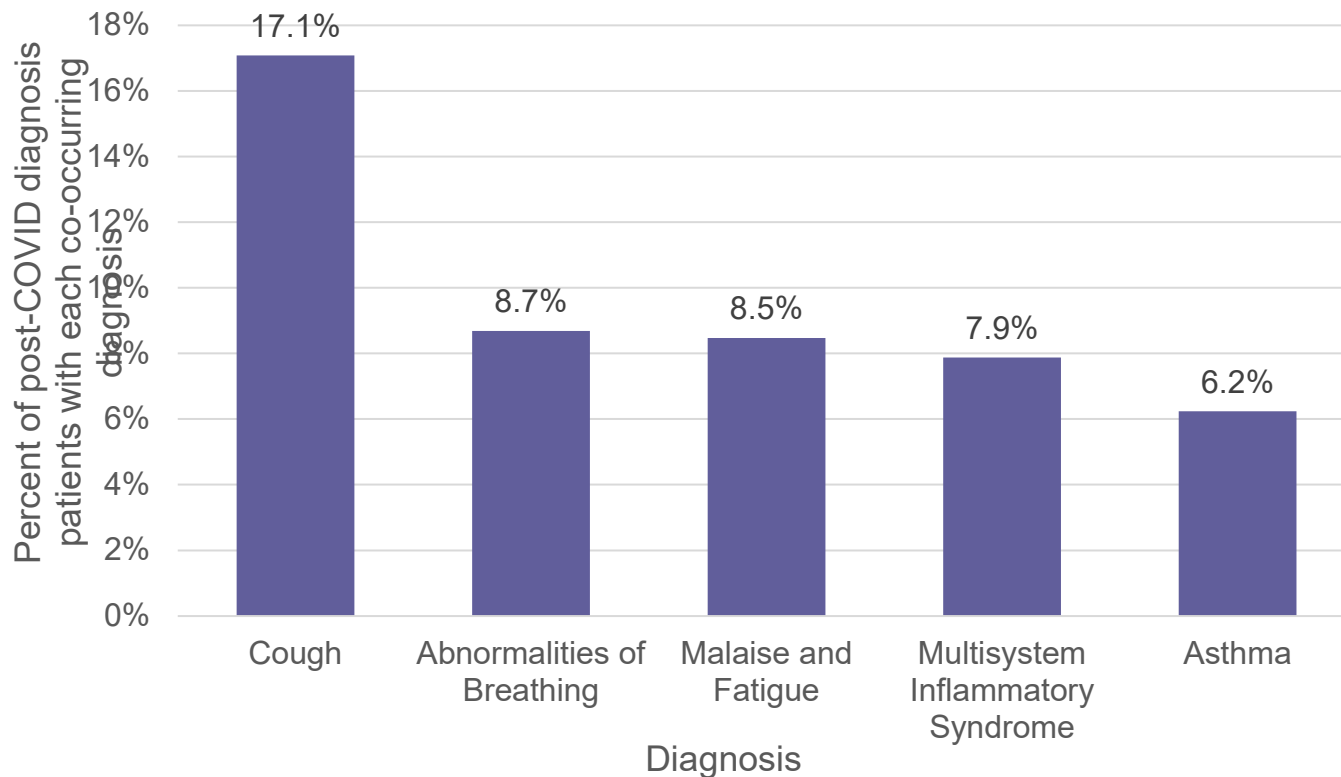
## Diagnoses within the Category Malaise and Fatigue Most Commonly Co-occurring with U09.9 Post-COVID Diagnosis, October 2021 to January 2022



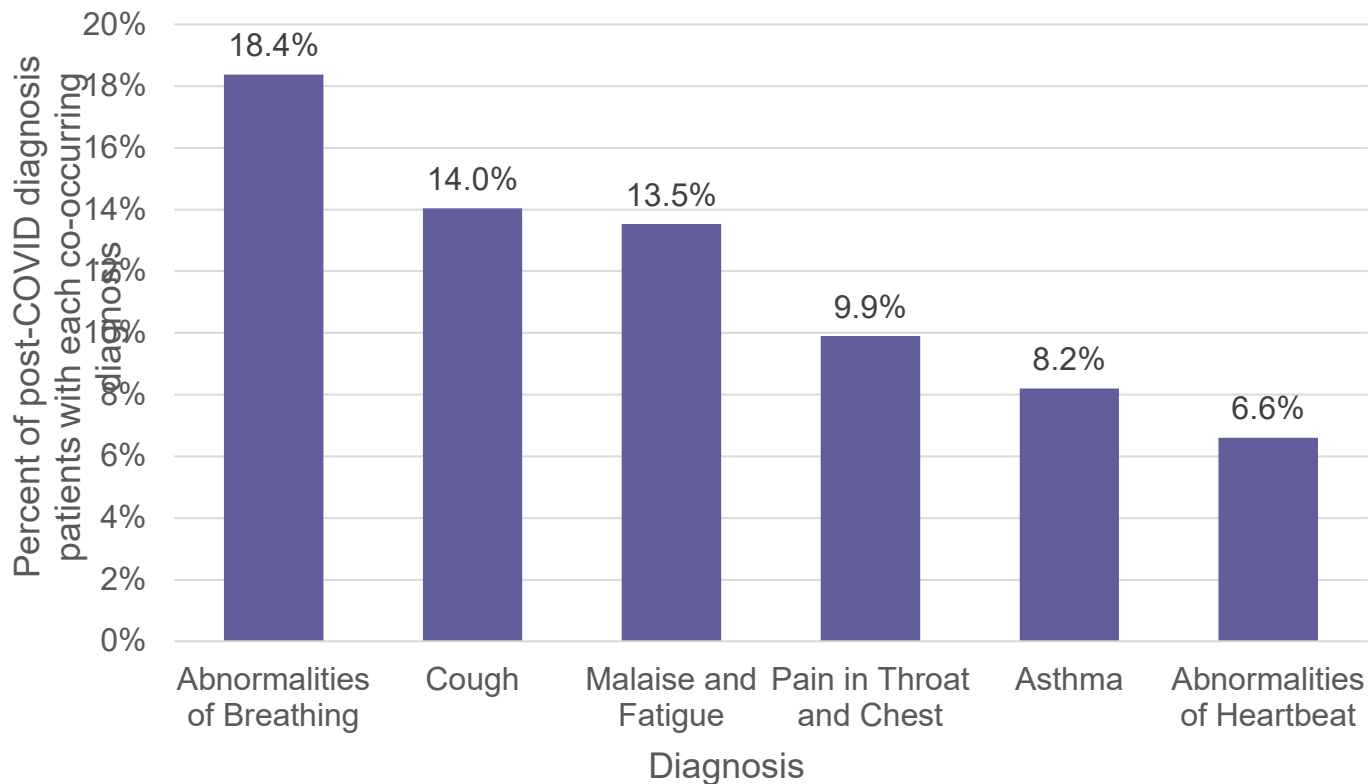
## Diagnoses within the Category Sleep Disorders Most Commonly Co-occurring with U09.9 Post-COVID Diagnosis, October 2021 to January 2022



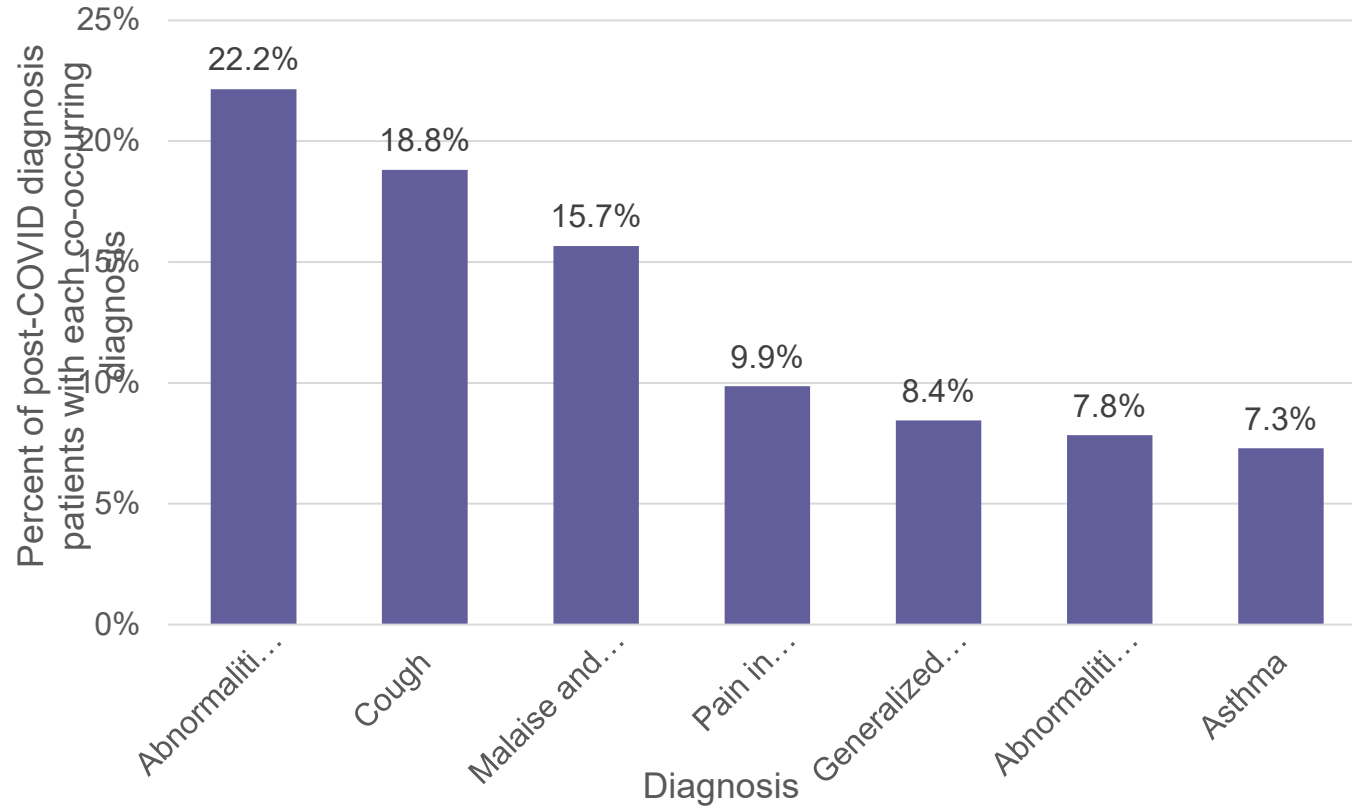
## Five Diagnoses Most Commonly Co-occurring with U09.9 Post-COVID Diagnosis in Patients Aged 0 to 12, October 2021 to January 2022



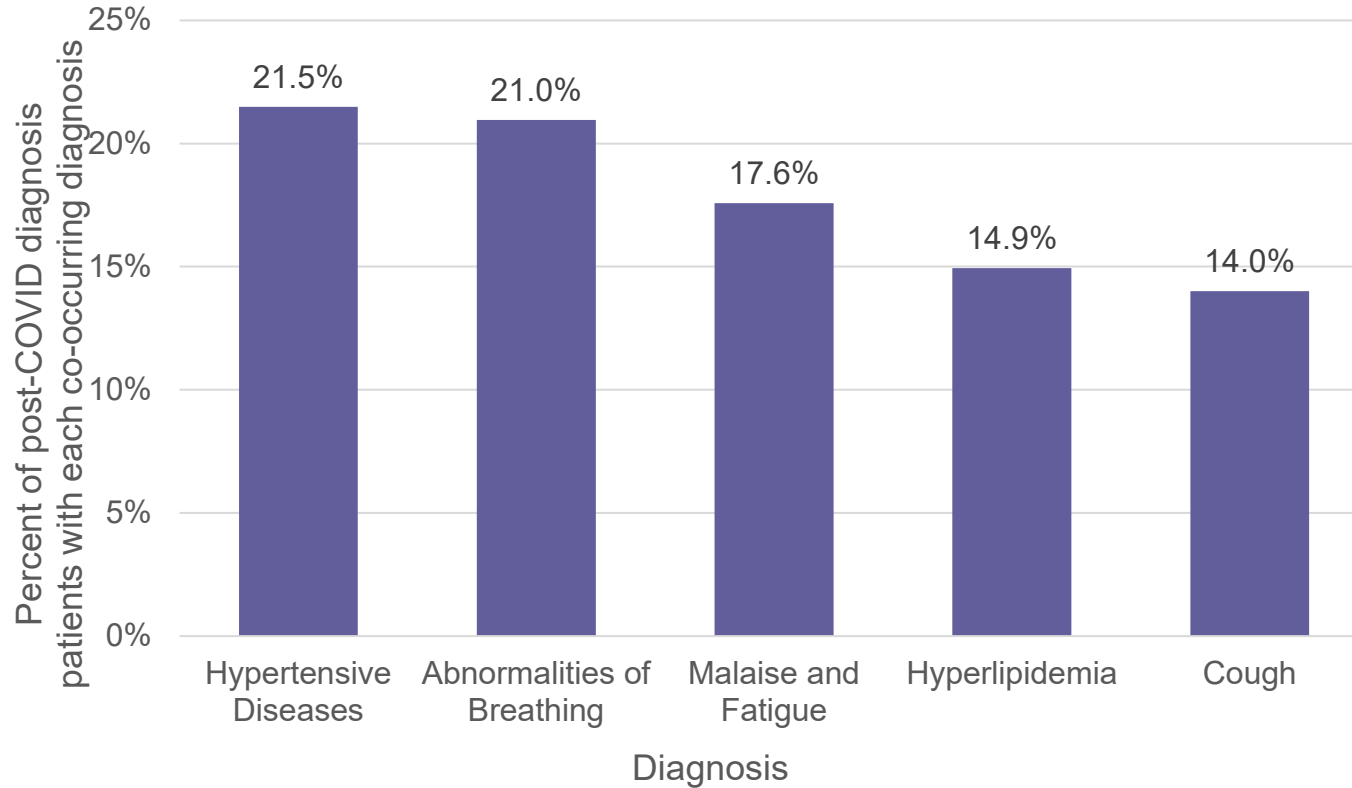
## Six Diagnoses Most Commonly Co-occurring with U09.9 Post-COVID Diagnosis in Patients Aged 13 to 22, October 2021 to January 2022



## Seven Diagnoses Most Commonly Co-occurring with U09.9 Post-COVID Diagnosis in Patients Aged 23 to 35, October 2021 to January 2022



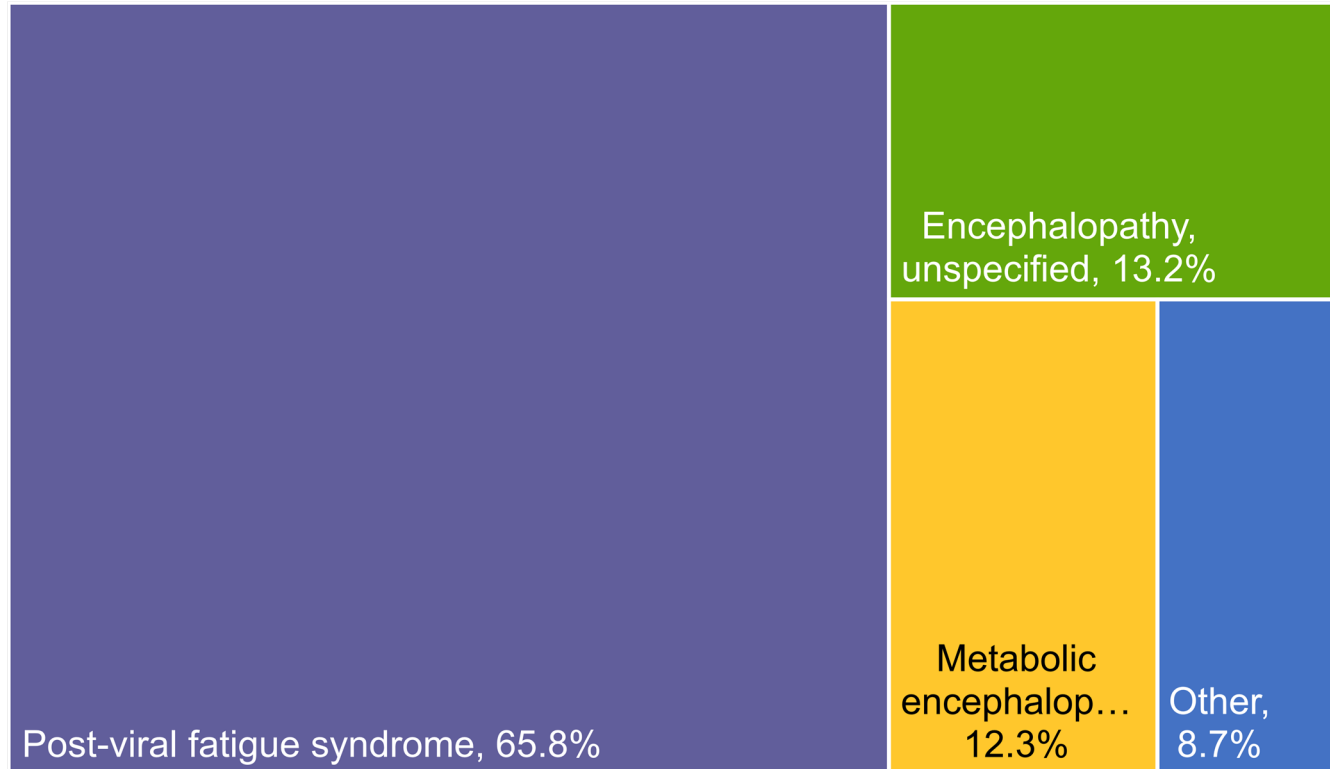
## Five Diagnoses Most Commonly Co-occurring with U09.9 Post-COVID Diagnosis in Patients Aged 65 and Older, October 2021 to January 2022



## Selected Post-COVID Co-occurring Diagnoses, with Ratio of Patients Post-COVID to Pre-COVID, October 2021 to January 2022

Post-COVID Co-occurring Diagnosis	Ratio of Patients Post-COVID to Pre-COVID
Other and Unspecified Myopathies	11.1
Other Respiratory Diseases Principally Affecting the Interstitium	4.8
Pulmonary Embolism	2.6
Disturbances of Smell and Taste	2.4
Other Interstitial Pulmonary Diseases	2.2
Other Disorders of Brain	2.0
Pneumothorax and Air Leak	1.6
Other Symptoms and Signs – Cognitive Function/Awareness	1.1

# Diagnoses in the Category “Other Disorders of Brain” in Patients with U09.9 Post-COVID Conditions, October 2021 to January 2022





## Average Increase in HHS-HCC Risk Scores in Patients with U09.9 Post-COVID Condition by Age, Comparing Risk Scores before and after COVID-19 Diagnosis

Age Group, in Years	Average Increase in Risk Scores
0 to 12	0.16
13 to 22	0.43
23 to 35	0.73
36 to 50	0.84
51 to 64	1.20
65 and older	1.80

# Thank You



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# Questions

## Upcoming NEBGH virtual events:

- **July 20** – Social Determinants of Health and Your Employees: What You Can Do to Help
- **July 25** – Bi-Weekly Monday COVID-19 Update w/ Dr. Mark