HEALTHY WORKERS, THRIVING WISCONSIN

SOLUTIONS ADDRESSING LACK OF INCOME AS A BARRIER TO COVID-19 ISOLATION AND QUARANTINE

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Key Contributors
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About the University of Wisconsin Population Health Institute
UWPHI’s mission is to advance health and well-being for all by developing and evaluating interventions and promoting evidence-based approaches to policy and practice at the local, state, and national levels. The Institute works across the full spectrum of factors that contribute to health.
With COVID-19 cases surging in Wisconsin and across the country, identifying evidence-based solutions that could contribute to controlling the pandemic is crucial for the health of both Wisconsinites and the state’s economy. This report summarizes the findings of a rapid Health Impact Assessment (HIA) process used to examine what can be done to ensure workers have what they need to stay home when they are infected with COVID-19 or have been exposed to it, and thereby reduce COVID-19 transmission through workplaces.

This HIA summarizes publicly-available data about COVID-19 and worksite transmission, the peer-reviewed and grey literature, and interviews conducted in Wisconsin—with experts at the Department of Health Services, the Department of Workforce Development, and worker and community organizations—to analyze the impacts of:

- Paid sick leave policies;
- Changing workers’ compensation so that when workers have been infected with COVID-19, if they were exposed in the workplace, the rebuttable presumption is that they were infected there; and
- Direct payments to informal sector workers, including gig workers (e.g., independent contractors, online platform workers, contract firm workers, on-call workers, and temporary workers) and undocumented workers—who would likely not have access to paid sick leave and workers’ compensation—when they need to isolate and/or quarantine.

Key Findings

- As of December 6, 2020, more than 412,000 Wisconsinites have tested positive for COVID-19 and 3,719 have died from the virus. The virus has had inequitable impacts in Black, Latinx, Native American, and rural communities.
- Approximately one in five U.S. workers are being exposed to the virus at their workplace at least once per month, and one in ten are being exposed at least once per week. In Wisconsin, there have been many outbreaks and cases in healthcare, education, food service and production, manufacturing, and retail settings.
- Workers are caught between hazards, forced to decide between going to work while infected with or exposed to COVID-19 OR staying home without pay.
  - Approximately 600,000 employees in Wisconsin do not have regular access to paid sick days. The federal Families First Coronavirus Response Act (FFCRA), which expired on December 31, 2020, provided emergency paid sick leave, but excluded approximately 140,000 employees at large corporations and many other workers in the state. Some employers have official paid sick leave policies but discourage workers from using it, or even discipline or fire them when they do.
  - Workers’ compensation is not being used to replace lost income for many workers who become ill after workplace exposure to COVID-19.
Most undocumented workers do not have a source of income if they stay home to quarantine and/or isolate.

Income disruption has compounding impacts (e.g., inability to afford housing, food, medicine, childcare) and results in numerous negative health impacts.

- Current policies contribute to increased spread of COVID-19 in Wisconsin, impacting the health and wellbeing of workers, families, and communities, as well as affecting businesses and the economy.

- Paid Sick Leave:
  - Workers with or who have been exposed to infectious illnesses are more likely to stay home to isolate and/or quarantine when they have access to paid sick leave.
  - If paid sick leave were available to all workers in the state in early 2021, it would significantly reduce the spread of COVID-19 in Wisconsin, potentially by an estimated 10,000 cases and over 75 lives saved each month.
  - Paid sick day laws would likely not lead to loss of wages or employment or to negative health impacts. Paid sick day requirements could allow businesses to return to normal operations more quickly, benefiting both business and employee health.

- Workers’ Compensation:
  - Many states, including Minnesota, Illinois, and Michigan, have expanded workers’ compensation coverage to include a rebuttable presumption that, if a worker in specific sectors was exposed to COVID-19 in the workplace and later tests positive for the disease, they were infected in the workplace.
  - Such changes to workers’ compensation—along with other changes that raise awareness and encourage its use—could decrease workplace transmission by allowing workers to receive income when they need to isolate.

- Direct Payments to those who do not have access to paid sick leave or workers’ compensation:
  - Most gig workers do not have access to paid leave or workers’ compensation and would lose income if they needed to isolate and/or quarantine.
  - Undocumented immigrants were excluded from federal emergency financial assistance and are less likely to have access to replacement income if they need to isolate and/or quarantine.
  - Access to direct payments for any worker who does not have access to paid sick leave or workers’ compensation could decrease workplace transmission and reduce community spread of COVID-19.

We are a stronger, thriving Wisconsin when everyone has what they need to be safe and well. This set of policy changes would help ensure workers in Wisconsin do not have a disruption in income when they need to isolate and/or quarantine when they are infected with or have been exposed to COVID-19 (as well as other communicable diseases, including seasonal influenza, and during future pandemics), thereby contributing to slowing the spread of the virus in the state. Controlling the pandemic and reopening the economy both depend on protecting workers, and the policies analyzed in this Health Impact Assessment are vital components of ensuring worker health.