
DEPARTMENT OF INDUSTRIAL RELATIONS
**COMMISSION ON HEALTH AND SAFETY AND
WORKERS' COMPENSATION**

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DATE: August 6, 2025

TO: CHSWC Commissioners

Mitch Steiger, Chair
Jen Hamelin
Shelley Kessler
Kristi Montoya
Chris Pedroza
Nicholas Roxborough
Meagan Subers
Sidharth Voorakkara

FROM: Melissa Flores, Executive Officer, CHSWC

SUBJECT: Next Steps on Post-Traumatic Stress Injury (PTSI) Studies

The purpose of this memo is to obtain your input on the next steps for the PTSI studies mandated by Senate Bill (SB) 623.

[Senate Bill 623](#)¹ (2023) required CHSWC to study and report on the effectiveness of the Post-Traumatic Stress Disorder presumption. In addition, the bill required CHSWC to also study and review claims filed by certain types of employees, not included in the presumption. CHSWC issued a Request for Information (RFI) in November 2024 to help collect information from the potential contractor community that may be used to develop the RFP for the study and received one response to the RFI² in March 2025.

At the May 30th Commission meeting, you directed CHSWC staff to investigate if there is any language that could be included in the RFP to allow for both non-UC/CSU entities and UC/CSU entities to respond concurrently to an RFP issued for the PTSI studies. Subsequently, CHSWC staff met with DIR Contracts and Legal teams on this issue. Based on the discussions, staff learned that any entity that responds to an RFP has to agree to the terms of conditions indicated as part of an RFP and since the RFP's terms and conditions deviate from those that UCs have negotiated with the State of California, UCs would not respond to an RFP. Therefore, CHSWC will need to

¹ https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240SB623

² <https://www.dir.ca.gov/chswc/Meetings/2025/Item-6-RFI-RAND-Corp.pdf>

determine upfront which of the options below they would like to initially pursue when searching for a vendor to conduct the PTSI Studies mandated by SB 623.

Staff requests the commission's input on the direction to proceed. Below, are two options for consideration:

Option 1:

Request a UC/CSU to put together a proposal based on the scope of work for the PTSI studies. If the proposal is approved by the commission, contract for the studies using the interagency agreement method. If the proposal does not meet the goals and objectives of the studies and is not approved, issue an RFP to contract with a non-UC/CSU vendor to conduct the studies.

Option 2:

Issue an RFP to contract with a vendor to conduct the studies. Under this option, UCs/CSUs would not bid.

I would appreciate your input on which of the above options you would like to pursue.

Enclosures:

Attachment A - Senate Bill 623 Legislation

Attachment B - Response to Request for Information

Senate Bill 623, Stats.2023, Ch.621, Sec.1.

Senate Bill No. 623
CHAPTER 621

An act to amend Section 3212.15 of the Labor Code, relating to workers' compensation.

[Approved by Governor October 08, 2023. Filed with Secretary of
State October 08, 2023.]

BILL TEXT

*THE PEOPLE OF THE STATE OF CALIFORNIA DO ENACT AS
FOLLOWS:*

SECTION 1.

Section 3212.15 of the Labor Code is amended to read:

3212.15.

(a) This section applies to all of the following:

(1) Active firefighting members, whether volunteers, partly paid, or fully paid, of all of the following fire departments:

(A) A fire department of a city, county, city and county, district, or other public or municipal corporation or political subdivision.

(B) A fire department of the University of California and the California State University.

(C) The Department of Forestry and Fire Protection.

(D) A county forestry or firefighting department or unit.

(2) Active firefighting members of a fire department that serves a United States Department of Defense installation and who are certified by the Department of Defense as meeting its standards for firefighters.

(3) Active firefighting members of a fire department that serves a National Aeronautics and Space Administration installation and who adhere to training standards established in accordance with Article 4 (commencing with Section 13155) of Chapter 1 of Part 2 of Division 12 of the Health and Safety Code.

(4) Peace officers, as defined in Section 830.1 of, subdivisions (a), (b), and (c) of Section 830.2 of, Section 830.32 of, subdivisions (a) and (b) of Section 830.37 of, Section 830.5 of, and Section 830.55 of, the Penal Code, who are primarily engaged in active law enforcement activities.

(5) (A) Fire and rescue services coordinators who work for the Office of Emergency Services.

(B) For purposes of this paragraph, “fire and rescue services coordinators” means coordinators with any of the following job classifications: coordinator, senior coordinator, or chief coordinator.

(b) In the case of a person described in subdivision (a), the term “injury,” as used in this division, includes “post-traumatic stress disorder,” as diagnosed according to the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association and that develops or manifests itself during a period in which any person described in subdivision (a) is in the service of the department, unit, office, or agency.

(c) For an injury that is diagnosed as specified in subdivision (b):

(1) The compensation that is awarded shall include full hospital, surgical, medical treatment, disability indemnity, and death benefits, as provided by this division.

(2) The injury so developing or manifesting itself in these cases shall be presumed to arise out of and in the course of the employment. This presumption is disputable and may be controverted by other evidence, but unless so controverted, the appeals board is bound to find in accordance with the presumption. This presumption shall be extended to a person described in subdivision (a) following termination of service for a period of 3 calendar months for each full year of the requisite service, but not to exceed 60 months in any circumstance, commencing with the last date actually worked in the specified capacity.

(d) Compensation shall not be paid pursuant to this section for a claim of injury unless the person has performed services for the department, unit, office, or agency for at least six months. The six months of employment need not be continuous. This subdivision does not apply if the injury is caused by a sudden and extraordinary employment condition.

(e) This section, as added by Section 2 of Chapter 390 of the Statutes of 2019, applies to injuries occurring on or after January 1, 2020.

(f) (1) The Commission on Health and Safety and Workers’ Compensation shall submit a report to the Legislature analyzing the effectiveness of the presumption created by this section. The report shall review data from post-traumatic stress disorder injuries for which compensation is claimed under this section from January 1, 2020, through December 31, 2025. The report shall be provided to the Senate Committee on Labor, Public Employment and Retirement and the Assembly Committee on Insurance no later than January 1, 2027.

(2) The Commission on Health and Safety and Workers’ Compensation shall submit a report to the Legislature analyzing claims filed for post-traumatic stress disorder injury for which compensation is claimed by public safety dispatchers, public safety telecommunicators, and emergency response communication employees, from January 1, 2020, through December 31, 2023. The study shall review data, including, but not limited to, the total number of claims, frequency of claim acceptance, frequency of claim denial, the initial claim determination, and the average time between the filing of a claim and the final determination of compensability. The report shall be provided to the Senate Committee on Labor, Public Employment and Retirement and the Assembly Committee on Insurance no later than January 1, 2025. For purposes of this subdivision, a “public safety dispatcher,” “public safety telecommunicator,” or “emergency response communication employee” means an individual employed by a public safety agency whose primary responsibility is to receive, process, transmit, or dispatch emergency and nonemergency calls for law enforcement, fire, emergency medical, and other public safety services by telephone, radio, or other communication device, and includes an individual who supervises other individuals who perform these functions.

(3) A report submitted pursuant to this subdivision shall be submitted in compliance with Section 9795 of the Government Code.

(g) This section shall remain in effect only until January 1, 2029, and as of that date is repealed.

Response to Request for Information for a Study on PTSD Injury Claims Filed by Public Safety Employees (Senate Bill 623)



TEL [REDACTED]
FAX [REDACTED]

The RAND Corporation in response to RFI_DIR 24CHSWC001

Project Title: Study on the Effectiveness of Post-traumatic Stress Disorder (PTSD) Presumption and Claims Filed for PTSD

Technical Point of Contact:



Contractual Point of Contact:



RAND is a non-profit organization providing objective analysis and effective solutions that address the challenges facing the public and private sectors around the world. RAND's mission requires that we serve the public interest through wide dissemination of our research results. RAND respectfully reserves the right to negotiate mutually agreeable terms, particularly in areas of intellectual property and publication rights. We are confident that we can reach mutually acceptable terms and conditions consistent with RAND's mission and the objectives of the Department of Industrial Relations.

I certify the information in this response is true and accurate to the best of my knowledge at the time of submittal.

Signed,



Task 1 (Report on PTSD Claims Among Public Safety Telecommunicators)

Task 1 requests a “report analyzing claims filed for PTSD injury for which compensation is claimed by public safety dispatchers, public safety telecommunicators, and emergency response communication employees, from January 1, 2020, through December 31, 2023. The report shall review data, including, but not limited to, the total number of claims, frequency of claim acceptance, frequency of claim denial, the initial claim determination, and the average time between the filing of a claim and the final determination of compensability.”

A brief report describing claims filed for PTSD injuries among dispatchers and other public safety telecommunicators and examining most of the metrics specified in the RFI could be produced via a secondary analysis of data from the Workers’ Compensation Information System (WCIS) at a cost of approximately \$150,000.

There could be three issues that add complexity to the work as requested:

1. PTSD injury claims cannot be reliably identified from the first report of injury alone, and must be ascertained through analysis of medical bills, which is more time-consuming and technically demanding.
2. The average time between the filing of a claim and the final determination of compensability may not be directly observable in the WCIS, and other data that might capture the final determination of compensability (such as EAMS) are more complex and cannot be reliably linked to WCIS in all cases.
3. WCIS lacks structured occupation codes, so identification of workers in the specified job titles or occupations would require some effort.

We note two further issues that may affect the feasibility of the proposed scope of work:

1. There are likely to be very few claims that meet the criteria specified by the legislature because relatively few people work as public safety dispatchers or telecommunicators. Estimates for 2023 from the Bureau of Labor Statistics (BLS) indicate that there were about 8,200 workers employed as Public Safety Telecommunicators in California.¹ Employment of firefighters and peace officers in California was estimated by the BLS to be about 112,000 in 2020, yet RAND’s 2021 study of the SB 542 presumption identified only around 900 PTSD claims from firefighters and peace officers over the 12 years before SB 542 took effect. The workforce of public safety telecommunicators is less than one tenth the size

¹ Source: <https://www.bls.gov/oes/2023/may/oes435031.htm>. Accessed February 27, 2025.

of the firefighter and peace officer workforce, and the study period specified by the legislature is four years rather than 12 years, suggesting that there might be only around 20 PTSD claims filed by public safety telecommunicators if claim filing rates are similar to those observed among peace officers and firefighters prior to SB 542. While an estimate of claim volumes (whether they are high or low) will be informative for the legislature, estimates of claim outcomes like denial/acceptance rates and the time between filing and final determination of compensability may be very imprecise due to the limited size of the public safety telecommunicator workforce and the potentially very low volume of claims.

Recommendation: *A longer time frame for the study (perhaps 2017-2024) might result in more informative results since more PTSD claims from public safety telecommunicators would likely be observed. Such a time frame might also allow analysis of whether claim volumes were affected by the COVID-19 pandemic.*

2. It is not straightforward to identify "claims filed for PTSD" in existing data sources due to the nature of the workers' compensation claim process. Claims involving PTSD (which can most reliably be identified from diagnosis codes on medical bills) are often filed for multiple injuries, or even for physical injuries only. As a result, most claims that involve PTSD cannot be identified from the First Report of Injury (FROI) in the WCIS: RAND's 2021 study on SB 542 estimated that 64% of claims where PTSD was identified on medical bills were reported as physical injuries only on the FROI. A related limitation of existing administrative data is that diagnosis codes are observed only on care billed to workers' compensation. While denied medical bills (which may indicate a diagnosis of PTSD) are included in the WCIS, care that is paid out of pocket by the worker may not result in billing activity that leaves a record in the WCIS.

Implication: *These limitations on identifying PTSD in administrative data will be important to consider when interpreting study findings.*

Task 2 (Report on Effectiveness of Presumption)

Task 2 requests "a report on the effectiveness of the PTSD presumption. The report shall review data from PTSD injuries for which compensation is claimed under the Labor Code Section 3212.15 from January 1, 2020, through December 31, 2025."

An evaluation of the effectiveness of the PTSD presumption might be conducted with several different approaches, as "effectiveness" of the presumption might be de-

defined in several ways that would call for different research approaches. Below, we describe two potential projects that would be informative about different aspects of the presumption's effectiveness, along with a project that would combine both approaches.

Task 2 Option 1: Analysis of Administrative Data

One set of questions can be addressed with secondary analysis of administrative data from the WCIS. These questions are those related to the effects of the presumption on the workers' compensation system, including costs, such as:

1. What was the effect of the presumption on volumes or rates of PTSD claim filing among public safety workers covered by the presumption?
2. What was the effect of the presumption on claim outcomes (claim denial rates, medical bill denial rates, time to first visit for mental health care)?
3. What was the effect of the presumption on workers' compensation costs?

To increase stakeholder buy-in and inform our study design and interpretation of the findings, our plan for this approach also includes the establishment of a Technical Advisory Group (TAG) comprising multiple stakeholders and expert communities (including unions or other organized labor representatives such as California Professional Firefighters, department chiefs, claims administrators, researchers, and mental health providers).

A comprehensive report containing quantitative estimates that answer these questions rigorously (as well as policy analysis and recommendations) **could be produced for approximately \$550,000.**

We note one issue that may affect the feasibility of the proposed scope of work:

1. It is unclear whether the dates in Task 2 refer to injury dates or medical service dates. If the intent is to include injury dates from January 1, 2020 through December 31, 2025, inclusion of 2025 injury dates in a study due at the end of 2026 may not be feasible. As noted above, PTSD claims cannot be reliably identified from the First Report of Injury and can instead take some time to generate diagnoses and medical bills that make them observable in the WCIS. Similarly, claim submission timelines for medical bills, the runout period needed for medical claim adjudication, the time needed for final compensability determinations to be made, and the time needed for injured workers to reach maximum medical improvement (after which permanent disability can be evaluated) mean that data on 2025 injuries extracted in 2026 will likely under-count PTSD claims and costs in ways that could make the analysis difficult to interpret.

Recommendation: *It may be more informative to limit the study period to dates*

of injury on December 31, 2024 and earlier, with claims data for the study including bills and benefit payments through the end of 2025, rather than attempting to include 2025 injury dates.

Task 2 Option 2: Surveys of Public Safety Leadership and Public Safety Workers

Other dimensions of effectiveness extend beyond the workers' compensation system and cannot be adequately studied using workers' compensation data. These include the presumption's impact on public safety outcomes and readiness, staffing and personnel outcomes for public safety departments, access to and delivery of mental health care, and the challenge of mental health stigma in the public safety workforce.

These questions would best be addressed by designing and fielding two surveys designed to obtain representative estimates of the beliefs of management and workers directly affected by the presumption: one focusing on fire department and peace officer organization leadership (chiefs), and one focusing on firefighters and peace officers themselves. Topics addressed in the surveys might be organized as follows:

Survey of Police Chiefs/Sheriffs and Fire Chiefs:

1. Impact of presumption on staffing and personnel outcomes (including recruitment, return to work, retention)
2. Impact of presumption on public safety outcomes and readiness (e.g., ability to respond to a major wildfire or other disaster)
3. Impact of presumption on access to care for workers with PTSD or other mental health needs
4. Impact of presumption on department costs, including those outside of workers' compensation
5. Identifying the most urgent remaining issues related to PTSD in the public safety workforce and the workers' compensation system

Survey of peace officers and firefighters:

1. Beliefs about PTSD and effectiveness of treatment
2. Mental health stigma and beliefs about risks/benefits of seeking treatment for PTSD
3. Awareness of presumption and availability of WC benefits for PTSD
4. Perceived barriers to receiving care or returning to work
5. Own experiences with PTSD or job-related mental health, and whether care was sought through WC

Similar to our strategy for Task 2, Option 1, we would establish a Technical Advisory Group (TAG) comprising multiple stakeholders and expert communities to increase stakeholder buy-in and inform our study design and interpretation of the findings.

A project comprising representative surveys of peace officers and fire chiefs (as well as front-line public safety workers) would be technically challenging for several rea-

sons, as we discuss below. Despite these challenges, we note that a representative survey with a probability-based sample is the only scientifically valid way to obtain statewide estimates about how department leaders and front-line public safety workers perceive the PTSD presumption's impact on outcomes not measured in workers' compensation data. A well-designed survey with a probability-based sample would offer a larger and more representative sample than other qualitative approaches, which may be of value to policymakers seeking credible findings about the broader impacts of the PTSD presumption.

A report containing survey research on the perceived effects of the presumption (but without analysis of workers' compensation data) **could be produced for approximately \$525,000.**

We note two issues that may affect the feasibility of the proposed scope of work:

1. These populations (department chiefs and front-line public safety workers) can be challenging to survey for a number of reasons. Confidentiality of contact information for peace officers can make it difficult to develop a reliable sampling frame, and confidentiality concerns may depress response rates—especially regarding subjects like mental health that can carry stigma. Our past work surveying hard-to-reach populations, including peace officers in California, suggests that it is possible to obtain representative survey results on highly sensitive topics from these groups, but with considerable effort.
2. The January 1, 2027 statutory deadline for the report to the legislature on the effectiveness of the PTSD presumption will leave a very tight timeline. It may not be feasible to design, collect, and analyze a reliable survey if the study start date is any later than October 2025.

Task 2 Option 3: Mixed-Method Study Including Both Analysis of Administrative Data and Surveys of Public Safety Leadership and Public Safety Workers

The most comprehensive approach to studying the effectiveness of the PTSD presumption would be to conduct a mixed-methods study that combines the administrative data analysis described as Task 2 Option 1 with the surveys described as Task 2 Option 3. The combined cost of both tasks would be slightly less than the sum of the costs for each option separately due to efficiencies in project management, report production/dissemination, and in the establishment and convening of the TAG. A report on the findings of this mixed-methods study **could be produced for approximately \$925,000.**

Task 3: Three Weeks' Technical Assistance

The technical assistance activities described in the RFI, which we assume includes some legislative/policymaker outreach as well as analyzing a limited volume of public comment, could be delivered for approximately \$30,000.