



Long Covid & Me Pt. II

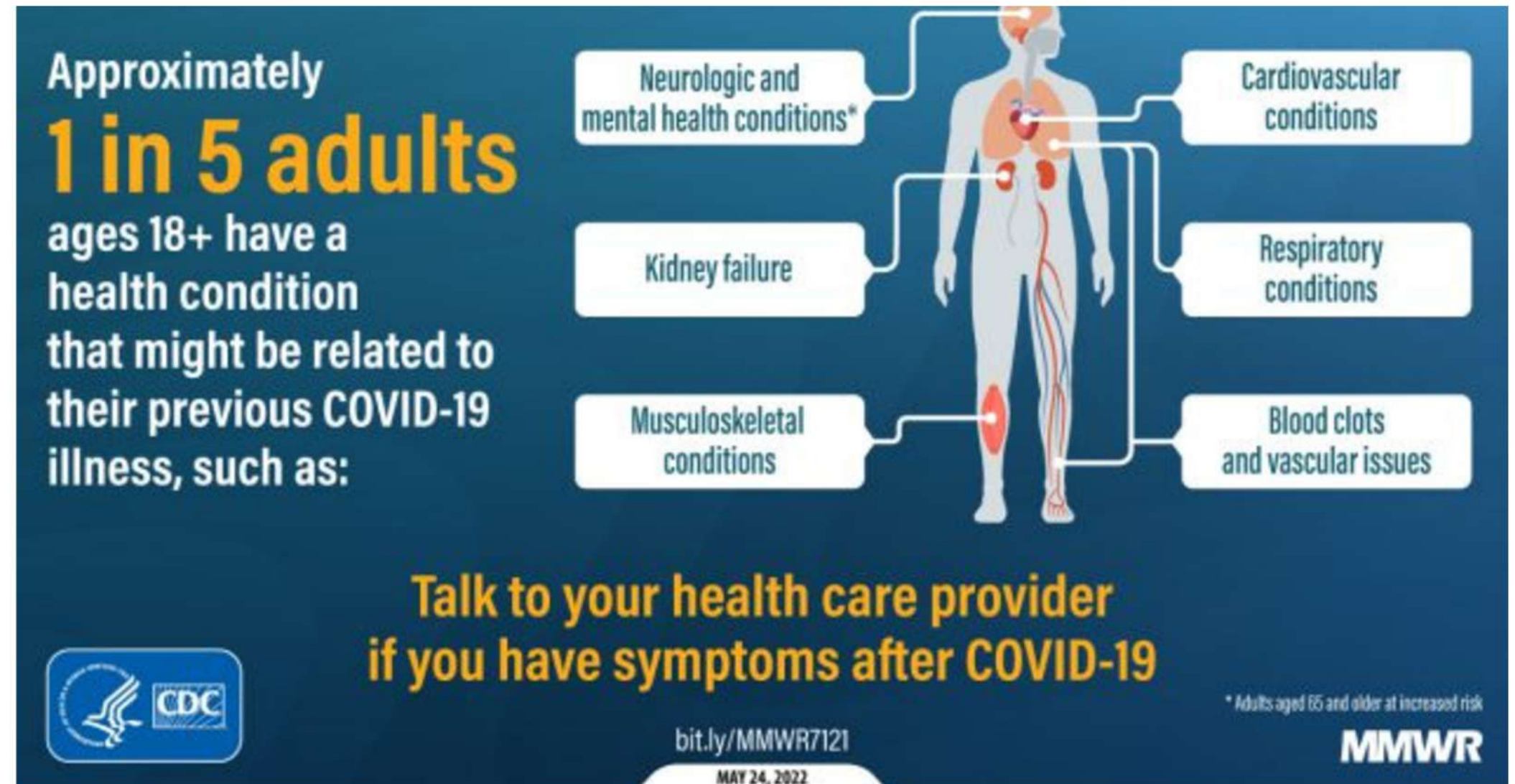
My Experiences with Medical Racism, Discrimination & Violation of Civil Rights

My name is Athena McCrary and I have Long Covid. I support HBOO27 because anyone can get Long Covid. You don't have to be elderly, have a pre-existing medical condition or be unvaccinated in order to get Long Covid.

This Sunday, February 15th marks my 3rd Long Covid Anniversary. I was vaccinated when I tested positive for Covid-19, and continued to test positive for Covid-19 for 2 months. Before I got Covid, I was healthy and not on any medications. I have no family history of chronic illnesses but just 1 Covid-19 infection disabled me.

- Long COVID can include a wide range of ongoing health problems; these conditions can last weeks, months, or years.
- Long COVID occurs more often in people who had severe COVID-19 illness, but anyone who has been infected with the virus that causes COVID-19 can experience it.

This is part of the information the Center for Disease Control (CDC) had posted on their website about Long Covid in 2023. Even though the link has been removed, this information is still accurate and relevant today. Anyone infected with Covid-19 can get Long Covid. Anyone.



CDC Morbidity and Mortality Weekly Report - Post Covid Conditions Amongst Adult Covid-19 Survivors Aged 18 - 64, U.S. March 2020 - November 2021, Published May 27, 2022

I fully support Delegate Wims bill HB0027 to provide funding for scientific research on Long Covid research and public messaging.

My reality as an African American woman on Medicaid living with Long Covid has been horrible.

The majority of the doctors, nurses and staff at the medical facilities I go to for treatments and doctors appointments do not wear face masks. I have been in waiting rooms with patients who are visibly ill and coughing who were never asked to wear a face mask. As someone who is now immunocompromised, I put myself at risk for getting another Covid-19 infection every time I am asked by a medical professional to remove my KN95 mask so they can examine the inside of my nose or mouth.

I have also faced racial and financial discrimination when I was a patient in MedStar's Long Covid Recovery Clinic. 11 months after my initial Covid-19 infection I was admitted to MedStar Southern Maryland Hospital ER due to complaints of chest, arm and abdominal pain. The doctor and nurse on duty ignored my pain and never offered me any pain medications even though I was crying and complaining of intense pain. The doctor waited 6 hours to perform an ultrasound on my heart because he said he had patients with more "pressing issues" to take care of. The nurse twisted the IV in my arm which left a horrible bruise.

The following year in 2024 I requested my medical records from my MedStar sleep doctor Dr. Christine Zhang, neurologist Dr. Rashida Stevenson and rheumatologist Dr. Jinan Al-Naqeeb only to be shocked when I discovered that these 3 doctors defamed my character by putting crazy lies in my medical charts that are easily proven to be false based on my blood tests and physical exams. My complaints and requests to have the information removed from my medical records were ignored or blamed on artificial intelligence. These doctors hurt my chances of receiving adequate medical care. I now have to travel 30 minutes to over an hour to see physicians to treat my Long Covid symptoms because I have zero confidence that I can receive quality treatment without discrimination at a MedStar facility.

Department of Health and Human Services
Office for Civil Rights Division
September 24, 2024
Case No: 24-588479

Dear Ms. McCrary:


On September 8, 2024, the U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR), received your complaint alleging that MedStar Health (MedStar), the covered entity, has violated the Federal Standards for Privacy of Individually Identifiable Health Information and/or the Security Standards for the Protection of Electronic Protected Health Information (45 C.F.R. Parts 160 and 164, Subparts A, C, and E, the Privacy and Security Rules). Specifically, you allege that Dr. Al-Naqeeb of MedStar included inaccurate information in your medical records. You allege that Dr. Al-Naqeeb noted that you had a history of miscarriages, which was not true, and Dr. Al-Naqeeb downplayed your pain. You further allege that you requested this information be amended several times, but MedStar failed to do so.

We have carefully reviewed your complaint against MedStar and have determined to resolve this matter informally through the provision of technical assistance to MedStar. Should OCR receive a similar allegation of noncompliance against MedStar in the future, OCR may initiate a formal investigation of that matter. Please note that OCR does not have authority to determine whether a request for an amendment should be granted.

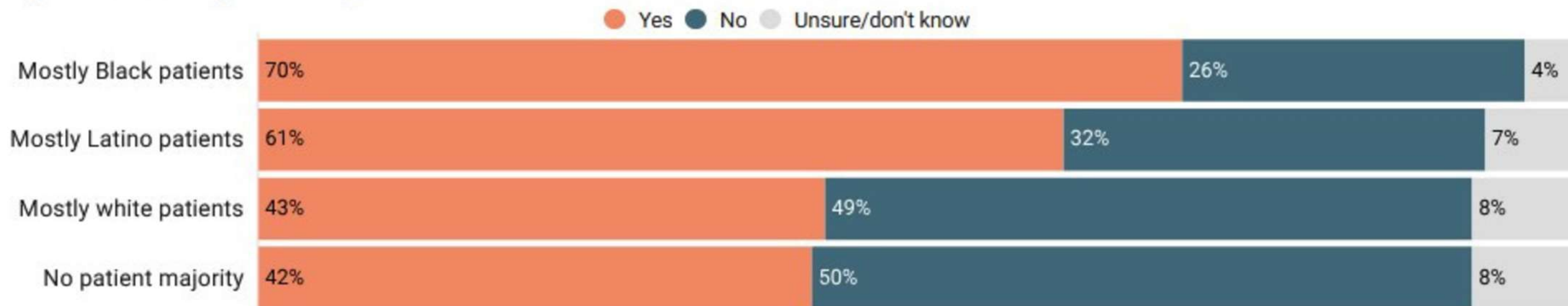
In a survey published by the The Commonwealth Fund on February 15, 2024:

47% of all healthcare workers surveyed witnessed patients face racism or discrimination based on their race or ethnicity.
38% of all healthcare workers surveyed witnessed a patient receiving lower quality of care because of their race or ethnicity.
55% of all healthcare workers answered very much or somewhat discriminated against when asked:
how much do Black patients experience discrimination when seeking or receiving healthcare?
Compared to 50% for Latino patients, 41% for Asian American patients and 19% for White patients.

Employees of a facility with mostly Black or Latino patients reported witnessing discrimination at higher rates.

 *In the places that you have worked as a health care professional, have you ever witnessed patients face racism or discrimination based on their race or ethnicity?*

By racial makeup of facility



Access data here: <https://healthworkerpoll.com/>.

Another frustrating, unnecessary struggle has been my experience of fighting tooth and nail with the Maryland Department of Human Services to keep my SNAP benefits. After getting approved for SNAP without submitting any medical records in June 2023, my SNAP benefits were canceled in November 2024. I had submitted medical records proving my list of disabilities but the benefits were canceled all because I didn't submit a form I was never told that I needed. In 2025, I had to jump through hoops again with Maryland DHS even though they had all of the required documentation. It was only after I sent screen shots of over a month of phone calls and emails to the DHS state headquarters that my benefits were renewed.

In addition to my problems with doctors and Maryland DHS, the Maryland court system has allowed my former Medicaid provider - Aetna Better Health of Maryland - to get away with medical malpractice. Aetna denied coverage for my cardiologist to perform an echocardiogram originally scheduled for June 2023 but was not performed until the end of November 2023 because Aetna had refused to cover the procedure on the grounds that it was not medically necessary. The Maryland Office of Administrative Hearings, the Prince George's County Circuit Court and the Maryland Court of Appeals all upheld Aetna's decision to deny coverage even though Aetna admitted in court that the denial was due to a billing code error - not because it wasn't medically necessary. I have been fighting to get justice since my initial hearing in November 2023 but the courts continue to ignore the evidence I presented, siding with Aetna.

As of today, there are still no FDA approved treatments or prescription drugs for the over 37 million Americans living with Long Covid, which includes the over 630,000 people with Long Covid living in Maryland. The chronic illnesses I have been diagnosed with have caused me to alter my life in ways I never thought I would have to do at the age of 46. As a single, African American woman on Medicaid with a heart condition and hypertension caused by Covid-19, I am at a greater risk for worsened health outcomes which I have already experienced due to a lack of timely access to preventative medical treatments. The reality is that I live with excruciating pain and crushing fatigue. I have days where I'm too weak to cook, shower or clean. I have had pain so bad that even my prescription medicine can't touch. I've had to stop taking 4 different prescription medications due to the horrible side effects. It has been incredibly hard to accept the fact that doctors have told me there are no cures for my chronic illnesses. Having Long Covid is hard. Having to fight to keep basic services and not knowing whether a new doctor is going to discriminate against me makes my life even harder.

Thank you for the opportunity to share my experience with you today.

Athena McCrary, Covid Longhailer since February 2023

CDC Mortality in the U.S. - 2024 Report Published November 10, 2025

In 2024, 3,072,039 deaths occurred in the United States.

The estimated 2024 age-adjusted death rate, 722.0 per 100,000 U.S. standard population, was 3.8% lower than in 2023 (750.5) and was the lowest death rate since 2020 (5,10).

Death rates were highest for males, older adults, and Black people.

The leading causes of death in 2024 were heart disease, cancer, and unintentional injury.

The number of deaths from heart disease increased in 2024 (683,037) compared with 2023 (680,981), and deaths from cancer in 2024 (619,812) increased from 2023 (613,352).

COVID-19, the 10th leading cause of death in 2023, dropped off the list of the top 10 leading causes of death in 2024.