

FOR IMMEDIATE RELEASE

Marty Pack Releases Federal Long COVID ROI Model v30; OECD 2026 Independently Confirms Methodological Architecture

OMB Circular A-94 compliant model produces 4.59 to 1 federal fiscal benefit cost ratio over a three year horizon. Extends the OECD framework to price reinfection compounding, downstream noncommunicable disease burden, and excess mortality.

SPOKANE, WA, April 27, 2026. Marty Pack, M.A., Exec MPA, founder of MP Consulting and Wail of a Tale Productions, today released the Federal Long COVID ROI Model v30, accompanied by a methodology comparison to the OECD’s April 2026 multi country model on Long COVID. The model is her work, developed through MP Consulting. The OECD model, published as *Addressing the Costs and Care for Long COVID*, independently confirms the dual frame architecture and the dominance of indirect costs over direct healthcare costs that anchor v30. v30 was delivered to the Senate Committee on Health, Education, Labor, and Pensions on March 15, 2026.

Federal Long COVID ROI Model v30: Overview

v30 evaluates a three year, \$5.19 billion federal investment in sustained COVID mitigation. It is built to OMB Circular A-94 federal fiscal standards, with a parallel social welfare frame using Harvard benefit cost analysis methodology, and is supported by 112 peer reviewed sources. Headline figures: federal fiscal benefit cost ratio 4.59 to 1, gross social welfare benefit cost ratio 8.38 to 1, social welfare net of private compliance costs 6.01 to 1, and a reinfection scoped conservative scenario producing 3.21 to 1. Federal fiscal payback is approximately 84 days. A 35 percent program effectiveness rate is applied throughout.

Methodology Comparison: OECD 2026 and v30

Dimension	OECD 2026	Federal LC ROI Model v30
Definition	WHO post COVID-19 condition. Onset within 3 months, persistence at least 2 months, no other explanation.	WHO definition retained for case identification, with reinfection scoped morbidity attribution. Captures patients excluded by the 3 month onset rule via downstream NCD pathway.
Reinfection	Not modeled. Per infection LC risk treated as a single draw at 5 to 15 percent. Future incidence fixed at flu like 5 to 10 percent.	Reinfection scoped formula. Compounding risk anchored in Statistics Canada cohort showing 15 percent after one, 27 percent after two, 38 percent after three infections.
Cumulative damage	Acknowledged in narrative. Cardiovascular, diabetes, and NCD acceleration cited but excluded from the cost model.	Captured. NCD acceleration and organ system damage priced through downstream healthcare and disability cost lines.
Cost frame	Direct healthcare plus labor productivity. QALY losses largely set aside.	Dual frame. Federal Fiscal per OMB Circular A-94 plus Social Welfare per Harvard BCA, gross and net of private compliance costs.
Mortality	Excess mortality from cardiovascular and cerebrovascular sequelae not monetized.	Excess mortality and cerebrovascular sequelae reflected in benefit lines.
Standards	OECD microsimulation. Descriptive and comparative across 42 countries.	OMB Circular A-94 compliant. Built for federal benefit cost analysis and policy adoption.
Headline	USD 11 billion direct plus USD 68 to 135 billion	FF BCR 4.59 to 1. SW BCR 8.38 to 1 gross, 6.01

Dimension	OECD 2026	Federal LC ROI Model v30
	indirect annually, 2025 to 2035.	to 1 net. Federal investment USD 5.19 billion over three years. Effectiveness rate 35 percent.

Where v30 Extends the OECD Framework

Federal usability. OECD is descriptive across 42 countries. v30 is built to OMB Circular A-94, the standard required for federal regulatory and appropriations decisions.

Reinfection. Compounding risk documented in the Statistics Canada and Barcelona cohorts is structural to the disease and absent from the OECD model. v30 prices it.

Downstream NCD burden. Cardiovascular, kidney, neurologic, and metabolic sequelae documented by Al-Aly, Bowe, Xie, and the RECOVER program are acknowledged by OECD and excluded from its cost lines. v30 carries them through.

Dual frame. v30 reports Federal Fiscal and Social Welfare benefit cost ratios separately, gross and net of private compliance costs, giving policymakers both the budgetary and the welfare lens in one instrument.

Time scope. OECD truncates to 2025 to 2035 with assumed recovery. v30 carries longer horizon NCD costs that emerge after the OECD model has retired the case.

Statement from Marty Pack

“No one was looking at reinfection or the cumulative damage COVID is doing to our bodies. While stories may move most, what talks, unfortunately, is money. I built v30 so governments and businesses can see the consequences of the choices that were made. Every mitigation effort is a return on investment. No one was doing the work, so I did it,” said Marty Pack, M.A., Exec MPA, founder of MP Consulting and Wail of a Tale Productions.

About Marty Pack, MP Consulting, and Wail of a Tale Productions

Marty Pack, M.A., Exec MPA, founded both MP Consulting and Wail of a Tale Productions. All analytical and modeling work referenced in this release, including the Federal Long COVID ROI Model v30, is attributed to her and was developed through **MP Consulting**, a consultation firm specializing in COVID reinfection impacts on health and the economy.

Wail of a Tale Productions is a 501(c)(3) women founded documentary nonprofit (EIN 87-3031753) operating across Spokane, Columbus, and Portland. Wail of a Tale produces documentary media and applies its Lens to Law methodology, designed to generate legislative evidence infrastructure alongside documentary storytelling. Past productions include The Takeover of Testing and Maria’s Story: Undocumented Violence. Current productions include Breathing Lessons: The Science of Safer Schools, The Price of Normal, and the Cutting Costs / Cutting Lives interview series.

v30 was built to put policy and economic figures behind the stories Wail of a Tale documents. The economic and policy analysis used to support those stories is conducted by Marty Pack through MP Consulting.

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