



[Workers' Comp](#)

Measles and Its Impact on the U.S. Workforce

March 12, 2025

6 MIN READ

[Author profile image](#)

[Melissa Martinez](#)

Clinical Operations Manager

[Listen on Spotify](#)

Tom Kerr (TK): After being declared “eliminated” in the U.S. just 25 years ago, the U.S. is currently experiencing a growing measles outbreak with more than 220 cases in 12 states including two deaths. The outbreak’s ripple effects are becoming a concern in the workplace, with employers facing new challenges in keeping workers safe.

In today’s Enlyte Envision podcast, we welcome back Melissa Martinez, RN, BSN, clinical operations manager for Enlyte’s ClinicalCare24 program, to discuss measles in the workplace and how triage nurses are handling these occurrences.

Melissa, thanks for joining us.

Melissa Martinez (MM): Hi, Tom. Thanks for having me again.

TK: So, to start off, can you give us a quick summary of what measles is and how it impacts an individual's health?

MM: Yeah, sure. So, measles is a highly contagious viral infection caused by the measles virus. It primarily affects the respiratory system and can spread rapidly among unvaccinated individuals through airborne transmission by respiratory droplets. And, this is very important, the virus is so contagious that it has a 90% infection rate in unvaccinated, exposed individuals.

The disease typically begins with high fever, cough, runny nose and red eyes, and there's a very characteristic rash that appears three to five days after these initial symptoms occur. In the short term, measles can cause severe respiratory symptoms, dehydration, ear infections, and diarrhea. More serious complications can include

pneumonia, which is common and potentially can become severe. Encephalitis, which is swelling of the brain, can occur in severe cases.

In rare cases, measles can lead to seizures or a fatal neurological disease. And I would like to point out that the MMR vaccine is highly effective in preventing measles with 97% protection after two doses. The vaccine remains to be the most effective strategy to preventing the spread of this serious viral infection and its potential health impacts.

TK: There's been a lot of concern regarding this year's measles outbreak. How much of a threat is it to the nation's workforce?

MM: So, the concern regarding the measles outbreak and potential impact to the nation's workplace is valid, but it's important to also put the threat into perspective.

While measles outbreaks can occur, the overall threat to the U.S. workforce remains relatively low due to the high vaccination rate. However, the localized outbreaks can still pose significant challenges in specific areas or industries.

TK: Who is most at risk for contracting measles in the workplace?

MM: There are certain groups that are at higher risk for severe complications for measles, and these include pregnant women, and immunocompromised individuals. Industries at higher risk due to their potential exposure to unvaccinated individuals or those with weakened immune systems are those working in health care, education, international travel, emergency responders, retail and daycare facilities.

TK: And, as the measles outbreak continues to become a more significant issue, what has Enlyte done, or what is Enlyte doing to better prepare its triage nurses to manage possible calls related to measles exposure in the workplace?

MM: So, Enlyte's ClinicalCare24 (CC24) program has taken proactive steps to enhance its triage clinicians' preparation for potential measles exposure calls in the workplace. Recognizing that measles-related incidents are infrequent, yet they could potentially see an increase in the call volume, we've implemented a targeted educational initiative.

This involves distributing detailed information to all triage clinicians. The educational content covers several key areas, such as an in-depth overview of measles and, as an illness, detailed description of symptoms to identify and best practices for care advice to be offered to callers.

By providing this focused education, Enlyte aims to ensure that its triage clinicians are well equipped with up-to-date knowledge and guidance

TK: And let's follow-up on that. Did you decide to send that update as a refresher since measles hasn't been a huge problem in the U.S. for quite some time?

MM: Yes, that's exactly right. Our guidelines do support and move our clinicians in the appropriate direction in instructing employees who call in. However, I felt with this significant outbreak it was best to prepare our clinicians and get them reeducated on measles to ensure their preparedness for potential calls that could come into the call center.

TK: OK, great. And, you have received a few calls regarding measles exposure through the CC24 program. Can you tell us about these instances, like where they occurred, and what type of working environments the calls

came from?

MM: Sure, Tom. So, we have received a couple of calls within the month of February. Our Clinical Care 24 service has encountered those two instances of measles exposure calls. They did both involve health care professionals, specifically emergency medical technicians, EMTs, who were exposed during patient transport.

The first case exposure occurred in California, while the second incident took place in Texas, where we're seeing the highest outbreak occurrences. Both EMTs came into contact with patients who were later confirmed to be positive for measles.

TK: And, what happened in those instances?

MM: At CC24, we initiate the first report of injury. So, in these cases, we follow guidelines starting with vaccination history and following protocol from there. We only know what happens at the get-go, but these two individuals were vaccinated.

TK: OK, got it. So, do you expect this outbreak to continue and be a concern for employee exposure over the next few months?

MM: Yeah, that is definitely a good question. So, while it's challenging to predict the exact trajectory of any outbreak with certainty, we do anticipate that measles will remain a concern for employee exposure in the coming months. And there are several factors that can contribute to the outlook.

You know, first and foremost, measles is highly contagious and outbreaks can spread rapidly, especially in areas with lower vaccination rates. The virus can remain airborne and infectious for up to two hours, increasing the risk of transmission in workplace settings.

Secondly, we are entering a season of increased travel, both domestic and international, and this mobility can potentially introduce the virus to new communities, including the workplace.

And third, the varying vaccination rates across different regions and demographic groups create pockets of vulnerability where outbreaks can occur and potentially spread to workplaces.

TK: OK. And finally, what can employers do to help keep employees from being exposed to measles?

MM: So, employers can take several proactive measures to help protect their employees from measles exposure. And I think the biggest area of opportunity that an employer can work toward is educating their employees, providing comprehensive information about measles, its symptoms, and transmission modes.

And conducting training sessions on proper hygiene and preventive measures, promoting vaccination, encouraging employees to get the MMR vaccine if they haven't already and, of course, if they're willing. Create an exposure-response plan, because this will develop a clear protocol for responding to potential measles exposures in the workplace, ensuring all employees are familiar with this plan. It also helps ensure that personal protective equipment (PPE) is available as needed in high-risk settings, and employees should be trained in its proper use.

And also, stay informed. Keep abreast of the local health department advisories and CDC recommendations. Be prepared to adopt policies, as situations evolve.

TK: And when you just mentioned PPE, what type of PPE would be best suited to slow the spread of measles?

MM: [11:06] So the most important PPE would be masks. The other one would be gloves, but the mask would be the most effective here because this virus is airborne.

TK: Thanks, Melissa and we'll be back with another Enlyte Envision podcast soon. Until then, thanks for listening.



©2022 Enlyte Group, LLC.

mitchell | genex | coventry