

# State of the Line

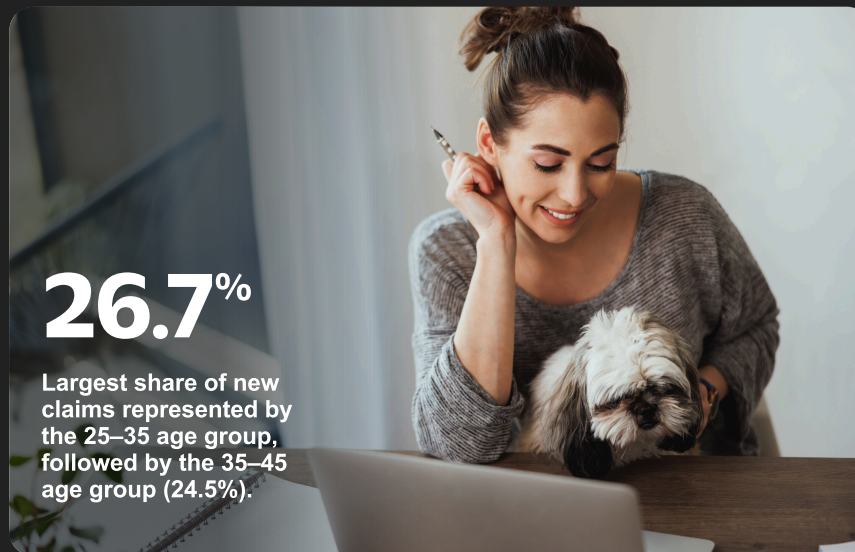
2025 YEAR-END

## Disability and leave of absence

Short-term disability (STD) trends remained consistent by age, while claim share declined among employees under 25 and continued to rise among those 55 and older. Mental and substance-related conditions remained the leading non-pregnancy diagnoses across nearly all age groups, with anxiety-related claims continuing to increase year over year. Standalone leave volumes remained largely stable, with employee medical leave accounting for the majority of cases and modest growth in approved leave durations across both continuous and intermittent leave types.



[Dive deeper into the stats with the full report here](#)



26.7%

Largest share of new claims represented by the 25–35 age group, followed by the 35–45 age group (24.5%).

These shifts align with national workforce movements reported by the [U.S. Census Bureau and the Annual Disability Statistics Compendium \(2025\)](#), which show decreasing disability utilization among younger workers and rising claims among mid-career and older populations due to musculoskeletal, mental health and caregiving-related conditions. This concentration in the 25–45 range signals where employers may see continued pressure on claim volume, particularly in industries with aging workforces such as manufacturing and transportation.

1.3%

decrease in claims from claimants aged <25 to 5.2% (down from 6.5%).

The 55+ group increased steadily (22.4% in 2023 to 23.7% in 2025).

**PREGNANCY**

remains the leading diagnosis group for new short-term disability claims, followed by mental/substance.

### Leading diagnostic groups

Mental/substance continues as the leading non-pregnancy diagnosis across nearly all age ranges. Anxiety-related conditions accounted for 46.6% of all mental health claims (up from 45.4% in 2024 and 44.2% in 2023), underscoring sustained behavioral-health demand across industries.

International Classification of Diseases (ICD) patterns also vary meaningfully by age: pregnancy and mental health dominate for the 25–45 groups, while musculoskeletal and back/spine become increasingly prevalent for employees aged 45–55 and especially 55-plus.

These differences have operational implications — industries with older workforces (e.g., manufacturing, health care, transportation) will continue to see higher durations linked to physical health conditions, while industries with younger, professional or hybrid-work populations (e.g., finance, services) may see a heavier mental-health mix.

### Claim durations and denials

Year-end STD closed claims increased 1.3%, and average duration rose 2.7% (59.1 days). Duration growth was most notable in mental/substance diagnoses (up to 72.6 days), with depression and anxiety durations increasing 2% and 1.7% respectively.

The 35–45 and 45–55 groups drove the largest age-based increases in duration, reflecting the combined influence of pregnancy, mental health and musculoskeletal ICD categories. Length-of-service (LOS) patterns remained stable year over year, with the 20-plus age group showing the highest growth in duration (from 67.7 to 69.8 days), reinforcing the prolonged recovery periods associated with long-tenured employees in physically demanding or high-stress industries.

### Leave volumes and types

At year-end, standalone leave volumes remained stable, increasing by 1.7%–1.8% compared to the prior year. Employee medical leave continued to represent the largest portion of all new standalone leave cases and grew by 2.3%, while family leave declined slightly (–0.6%). Together, these categories continue to account for most of all standalone leave activity, with minimal shifts in overall distribution.

Age-based patterns remained consistent with prior years. The 25–35 age group continued to drive the largest share of new leave cases, though its proportion decreased by 2.8%, while the 55-plus age group increased by 5.2%, reflecting an aging workforce and higher medical-care utilization among older employees.

LOS trends also remained stable. Employees with less than three years of service remained the largest LOS segment but declined by 7.9%, while employees with 10–20 years of tenure saw a 4.6% increase, indicating higher leave utilization among mid-tenure workers. By industry, healthcare and services experienced moderate year-end increases in leave volume, while other sectors remained flat or declined slightly — consistent with differing labor-force sizes and operational demands across industries.

### Approval rates and leave durations

Year-end approved leave durations increased for both continuous and intermittent leave types. Continuous leave duration increased by 3.1%, rising from 32.0 to 32.9 days, while intermittent leave increased by 3.2%, moving from 13.5 to 14.0 days. These increases reflect modest year-over-year growth in the length of approved leave and a continued shift toward longer recovery or caregiving periods.

Age-specific patterns remained consistent: employees 55-plus continued to experience the longest durations, with continuous leave increasing from 39.4 to 41.0 days and intermittent leave from 10.8 to 11.1 days. These age-related differences align with broader industry and national findings on rising chronic-condition prevalence and caregiver responsibilities among older workers.