Social Security Disability Insurance: The Untold Story

Program Growth in the Past and the Future What Next?

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Social Security Disability Insurance

155 million workers under age 66 are insured against becoming unable to work

9 million workers now receive DI benefits.

• 2 million "dependents" - mostly children

Many more protected from loss of insured status

• And from lower retirement benefits

Benefits replace 40% to 45% of career earnings on average

• 76% for very-low earner, 27% for steady maximum earner

Solvency of the DI Trust Fund Reserve depletion projected for 2016 right after 1994 reallocation



Solvency of the DI Trust Fund looked MUCH better in 2007 Boost from the "new economy" anticipating NO recession



Solvency of the DI Trust Fund; reserve depletion in 2016 2008 recession offset "new economy"; cycles still happen



Economic cycles and policy changes fluctuate, and DI incidence rates also vary



Calendar year

Most of the recession effect is from less GDP, not more DI cost



Additional disabled worker beneficiaries are a small fraction of reduced employment



Is DI out of control, taking over OASDI? (Note 5% increase in DI cost for 2010 due to recession)



DI cost as percent of GDP has peaked, but scheduled income is too low



Disabled workers increased 187% from 1980 to 2010; let's work backwards and explain



Population age 20-64 increased 41% from 1980 to 2010; let's adjust that out



Remarkable changes in age distribution

Progression of the boomers and drop in birth rates dominate



Population age 20-64 is much older in 2010 Boomers have aged with lower-birth-rate generations following



The Normal Retirement Age increased from 65 to 66, adding 4% more disabled worker beneficiaries



Increased work by women raised insured; men a little lower at younger ages



Disability insured rates in the population increased substantially for women, mainly at higher ages; increased beneficiaries by 21%



Recession of 2008-10 increased disabled workers 5% compared to full-employment economy, as had been experienced prior to 1980



This leaves 12% increase for all other causes; the increase in disability incidence rates for women easily explains this



Incidence rates for women have risen to male level



So where are we on DI?

- Is the sky falling, cost out of control? No.
- Or are we following a path foreseen? Yes.
- Trust Fund reserves projected to deplete 2016 <u>Need change soon to avoid inability to pay in full & on time</u> Default: Revenue enough to pay 80% of benefits, so:
 - 1. Cut all DI benefits by 20%?
 - 2. Increase DI tax revenue by 25%?
 - 3. Or, reallocate tax rate between OASI and DI?
- Need further changes for long-range solvency

Potential tax rate reallocation between OASI and DI: Like in 1994—NO change in total taxes



Some changes specific to DI

- Actuarial deficit for DI is 0.32 percent of payroll
 - Changes considered by Senator Coburn in 2011
 http://www.ssa.gov/OACT/solvency/TCoburn_20110718.pdf
 - Raise ages for vocational factors by up to 8 years
 - Lowers actuarial deficit by 0.04 percent of payroll
 - Eliminate "reconsideration" level of disability appeal
 - Increases actuarial deficit by 0.02 percent of payroll
 - Close record without exception after first ALJ decision
 - Must reapply with new evidence
 - Lowers actuarial deficit by 0.01 percent of payroll
 - Time limit benefits: MIE 2 years, MIP 3 years, MINE 5 years
 - Reapply; may deny without medical improvement
 - Lowers actuarial deficit by 0.10 percent of payroll

Withhold DI when receiving Unemployment Insurance payments

- Currently no DI offset for receiving UI
 - Change considered by Representative Johnson in 2013 http://www.ssa.gov/OACT/solvency/SJohnson_20140107.pdf
 - Treat any month with UI payment as SGA
 - Lowers actuarial deficit by 0.01 percent of payroll
 - Change considered by Senator Coburn in 2013 http://www.ssa.gov/OACT/solvency/TCoburn_20140107.pdf
 - Suspend DI benefit for any month with UI payment
 - Lowers actuarial deficit by 0.01 percent of payroll
 - Another possibility–offset DI benefit dollar for dollar for UI

Changes for long-range DI solvency

- Actuarial deficit for DI is 0.32 percent of payroll
 - Need to lower DI cost 20% or increase DI revenue 25%
 - Or, some combination of these
- Will likely be addressed in overall OASDI changes
 - Note that increasing NRA shifts cost to DI
 - May need further tax rate reallocation to DI in final amendments
- For overall OASDI solvency:

http://www.ssa.gov/oact/solvency/provisions/index.html

- Increase tax rate or raise/eliminate the taxable maximum
- Lower the benefit (PIA level)
- Increase the NRA
- Expand the tax base
 - Cover all state and local government employees
 - Tax employer-sponsored group health insurance premiums

ADDITIONAL MATERIAL FOR DISCUSSION

Recessions matter: applications jumped in recent recession



Death rates dropping: recovery rates steady since 1985 (half medical, half work)



Young females: steady distribution by medical impairment



Young males: steady but for HIV bulge in 1986-2000



Figure 13: Male Age 30-39 disabled worker new entitlement distribution by primary diagnosis (awarded through June 2012)

Mental disorders	 Musculoskeletal 	□ Cir culatory	□Neoplasms	 Nervous System
Nutritional/metabolic	Respiratory	□Infectious/parasitic	Injuries	Other

Older females: increased musculoskeletal impairment



Figure 14: Female Age 50-59 disabled worker new entitlement distribution by primary diagnosis (awarded through June 2012)

Older males: increased musculoskeletal impairment; less cardiovascular



Figure 15: Male Age 50-59 disabled worker new entitlement distribution by primary diagnosis (awarded through June 2012)