

THE PREVALENCE OF EMPLOYER-PROVIDED BENEFITS BY INDUSTRY OF EMPLOYMENT AND IMPLICATIONS FOR SOCIAL SECURITY DISABILITY INSURANCE CLAIMING BEHAVIOR

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Policymakers seek effective ways to restore or maintain the labor force participation of current and potential Social Security Disability Insurance (DI) beneficiaries. The availability of certain types of employer-provided benefits may affect whether workers with health impairments are able to maintain employment. In this research note, we use National Compensation Survey data to estimate the availability of employer-sponsored health insurance and paid leave by industry. We find that most types of employer-provided benefits were offered to greater shares of state and local government workers than to private-sector workers. However, private short- and long-term disability insurance offerings were more prevalent in the private sector.

Introduction

The two largest federal income assistance programs for individuals with disabilities are Social Security Disability Insurance (DI) and Supplemental Security Income (SSI), both administered by the Social Security Administration (SSA). The Social Security Act defines disability as “the inability to engage in substantial gainful activity (SGA) by reason of any medically determinable physical or mental impairment which can be expected to result in death, or which has lasted or can be expected to last for a continuous period of not less than 12 months.” Although both programs use that definition, their eligibility requirements differ. DI provides cash benefits to workers who leave the labor force because of a mental or physical disability.¹ These individuals have a work history and an earnings record, they have paid Federal Insurance Contributions Act (FICA) taxes, and they are unable to earn at the SGA level because of their disabling condition(s). DI benefits replace some of the earnings lost because of disability. SSI, on the other hand, provides means-tested payments to working-age individuals with low income and few resources who

are not able to work because of disability. Some SSI recipients also qualify for a modest DI benefit.

Applications for DI disabled-worker benefits increased from about 1.3 million in 2000 to a peak of 2.8 million in 2010. About 2.2 million workers applied for DI benefits in 2016 (SSA 2018, Table 60). Various factors may have contributed to the fluctuating trends in DI applications and enrollment over the years, such as changes in the prevalence of employee access to employer-sponsored health insurance (Livermore, Wittenburg, and Neumark 2014). Employers may voluntarily offer health insurance and paid leave to provide their employees with security against unforeseen events that might arise during their productive years. Such benefits offer economic stability for workers and their

Selected Abbreviations

BLS	Bureau of Labor Statistics
DI	Disability Insurance
LTD	long-term disability
NAICS	North American Industry Classification System

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Selected Abbreviations—Continued

NCS	National Compensation Survey
SSA	Social Security Administration
STD	short-term disability

families, which in turn helps to insulate the wider U.S. economy against potential shocks. Employer-provided benefits can be seen as a partnership among businesses, individual workers, and the government, in that employer costs for many such benefits are partially offset by tax advantages. In addition to providing employee benefits voluntarily, employers are obligated to contribute to government-administered programs via taxes. Social Security coverage (for disabled and retired workers and their dependents), unemployment insurance, workers' compensation, and family and medical leave² are, for most jobs, mandatorily provided (Employee Benefit Research Institute 2011, Chapter 1). One would expect to observe little or no variation in the coverage of most workers under these mandatory programs. However, the voluntary provision of employee benefits, such as employer-sponsored health insurance, paid leave, and short- and long-term disability insurance, might vary widely.

Analyzing the potential interactions between elective employer-provided benefits and application for DI benefits can provide useful insights to employers, workers, and policymakers. In this research note, we examine the extent to which employers in different industries offered selected types of health insurance and paid leave to employees and compare those patterns with the industry distribution of DI beneficiaries' last employment. Such statistics could be used to test the assumption that employees who have access to employer-sponsored health insurance and paid leave would use those benefits to delay or forestall a workforce exit because of a disability. Depending on the nature and severity of the disability, access to timely care also could dissuade some workers from filing disability claims (Dement and others 2015; Schimmel Hyde and Livermore 2016).

Background

Several studies have explored the relationship between the health condition of U.S. workers, the availability of health insurance, and DI application volume (Livermore, Stapleton, and O'Toole 2011; Du Bois and Donceel 2008). Salkever and others (2000) study DI beneficiaries who have a mental disorder and examine

the severity of their diagnoses, their sociodemographic characteristics, their access to health care, and their long-term disability (LTD) benefit claiming behavior. The authors observe that LTD claimants may consider several factors in deciding whether to return to work, including the generosity of the LTD benefits, the severity of the disabling condition, and the availability of supplemental compensation. They further observe that workers who leave their jobs because of a severe mental health problem may need ongoing treatment from their providers and adequate supports from employers after they return to work. The authors conclude that greater access to specialized mental health treatment and generous health insurance coverage could reduce the number of disability claims and thereby allow some workers to remain employed or return to work after claiming LTD benefits. Nonetheless, for some workers with severe mental health conditions, DI application may be inevitable.

Schimmel Hyde and Livermore (2016) assess the effect of the Affordable Care Act (ACA) of 2010 on timely access to health care among employed individuals with work-limiting disabilities. The authors find that many disabled workers work part-time or intermittently, which makes them ineligible for employer-sponsored health insurance and other benefits. Although the ACA expanded access to health insurance, the authors find that disabled workers have greater difficulty obtaining timely health care than individuals without work-limiting conditions. The authors note that disabled workers' timely access to health care may need to be reexamined now that the ACA is fully implemented.

O'Leary, Walker, and Roessel (2015) present a table that reports the distribution of DI disabled-worker beneficiaries in 2013 by industry of last employment. The authors identify industries using North American Industry Classification System (NAICS) designations.³ We reprint that table here as Table 1, which shows that most of the beneficiaries in 2013 had previously worked in the services, retail trade, or manufacturing industries. The least common industries of previous employment among 2013 DI beneficiaries were wholesale trade, mining, and public administration.⁴ It is worth noting that the availability, variety, and generosity of health insurance and paid leave benefits vary across industries. Knowledge of these variations in employer-provided benefits may help researchers to better understand the composition of the DI beneficiary population and may improve efforts to help workers with impairments.

Table 1.**DI disabled-worker beneficiaries in 2013: Percentage distribution by industry of last employment, with detail by sex and summary comparisons to total employment in 2002 and 2012**

Industry	Disabled workers (2013)			Total employment	
	Men	Women	Total	2002	2012
Agriculture, forestry, and fishing	3.7	1.2	2.5	1.7	1.5
Mining	1.1	0.1	0.6	0.4	0.6
Construction	7.8	0.7	4.4	5.0	4.1
Manufacturing	15.3	9.2	12.4	11.4	8.7
Transportation, communications, electric, gas, and sanitation	6.9	3.3	5.1	3.6	3.6
Wholesale trade	3.5	1.9	2.7	4.2	4.2
Retail trade	16.2	19.4	17.8	11.3	10.9
Finance, insurance, and real estate	6.2	8.1	7.1	5.9	5.7
Services	38.6	55.6	46.8	40.3	44.6
Hotels, rooming houses, camps, and other lodging places	1.2	2.3	1.7	a	a
Personal services	0.7	1.6	1.1	a	a
Business services	12.9	11.3	12.1	a	a
Automotive and miscellaneous repair services and parking	3.2	1.3	2.3	a	a
Amusement, recreation, parks, and museums	3.5	3.5	3.5	a	a
Health services	4.2	16.3	10.1	a	a
Legal services	0.2	0.8	0.5	a	a
Educational services	1.9	3.6	2.7	a	a
Social services	2.7	5.8	4.2	a	a
Membership organizations	1.2	1.6	1.4	a	a
Engineering, accounting, research, management, and related services	3.8	4.3	4.1	a	a
Miscellaneous services	3.0	3.4	3.2	a	a
Public administration	0.6	0.6	0.6	16.1	16.1

SOURCE: Reprinted from O'Leary, Walker, and Roessel (2015, Table 3); based on SSA 2013 Disability Analysis File, SSA 2012 Continuous Work History Sample, and Bureau of Labor Statistics (2013).

NOTES: "Industry of last employment" reflects the most recent job (within 10 years) prior to the date of current eligibility for disabled-worker benefits. If a beneficiary worked more than one job in the most recent year, the highest-paying of those jobs determines the industry.

Calculations include adjustments to account for slight interagency differences in industry category definitions as well as to intra-agency revisions to those definitions over time.

Rounded components of percentage distributions do not necessarily sum to 100.0.

a. Inconsistencies in the service-industry subcategory definitions used by SSA and the Bureau of Labor Statistics (and between those used by the Bureau of Labor Statistics in 2002 and in 2012) prevent useful cross-column comparisons.

We extend the findings of O'Leary, Walker, and Roessel (2015) by presenting estimates of the prevalence of employer-sponsored health insurance and paid leave benefits by NAICS industry sector. In 2016, more than 2.2 million workers applied for DI benefits claiming a qualifying medical condition preventing them from working, and nearly 500,000 applicants were awarded benefits (SSA 2018, Table 60). To what extent might access to employer-sponsored health insurance and paid leave affect DI application rates? Some researchers and advocates suggest that increased availability of health insurance and paid leave increases the likelihood that employees receive adequate preventive and routine care, keeping them healthier for the duration of their working years.

Workers with such access would presumably be better able to remain productive, maintain a higher standard of living, and avoid applying for DI or public welfare programs (Stapleton and others 2006). If workers are healthier, the DI award rate might decrease as well. Additionally, workers who have access to paid (or unpaid) leave are better positioned to keep their jobs through a prolonged absence caused by a medical condition.

We examine four types of health insurance: medical, prescription drug, dental, and vision coverage. We likewise examine four categories of paid leave: sick; personal; "other," comprising paid time off for funerals, military service, or jury duty; and "any," which

includes all types in the preceding three categories as well as paid holidays and vacations. We also present data on access to private short-term disability (STD) and LTD insurance plans.

Data and Methodology

Under the authority of an interagency agreement between SSA and the Bureau of Labor Statistics (BLS), we use data collected by BLS in the 2013 National Compensation Survey (NCS). The NCS is a voluntary establishment-based survey that produces nationally representative estimates of employer-provided benefit availability, provisions, and costs. NCS respondents include private-sector employers from each NAICS industry sector except the agriculture, forestry, and fishing sector. The NCS also includes public-sector employers at the state and local level but excludes the federal government (Pierce 1999).^{5,6}

Our variables of interest are industry of employment, identified by 2-digit NAICS code; whether the employer is a private-sector establishment, a state government, or a local government; and the availability of four types of health insurance, four categories of paid leave, and private STD and LTD insurance for employees. Although the NCS excludes

the agriculture, forestry, and fishing sector, the scope of our industry coverage is otherwise consistent with that of O’Leary, Walker, and Roessel (2015), which accounts for most but not all U.S. employment. Note that our industry-level results do not correspond directly with those in O’Leary, Walker, and Roessel (2015). Those authors used administrative records from SSA as their primary data sources while we use the NCS. In addition, the level of detail in the industry designations differ in some instances between their study and ours.

Our data set covers 28,065 establishments in local government, state government, and the private sector. To make our estimates nationally representative, we use BLS sample weights in our statistical analysis. To eliminate the possibility of identifying individual survey respondents from the estimates, BLS suppressed data in some instances prior to our analysis.

Results

Table 2 presents the distribution of the employees of the respondent establishments in our sample by employer type, with detail for full- and part-time workers. Most of the employees reported by the sample establishments worked in the private

Table 2.
Employment in NCS respondent establishments: Full- and part-time workers, by employer type, 2013

Employer type	NAICS code	All workers		Full time	Part time	Percentage full time
		Number	Percentage distribution			
Total	...	28,065	100.0	24,195	3,870	86.2
Local government	...	946	3.4	922	24	97.5
State government	...	2,185	7.8	1,916	269	87.7
Private sector	...	24,934	88.8	21,357	3,577	85.7
Industry						
Mining	21	262	0.9	259	3	98.9
Construction	23	2,022	7.2	1,921	101	95.0
Manufacturing	31–33	6,725	24.0	6,623	102	98.5
Wholesale trade	42	1,619	5.8	1,526	93	94.3
Retail trade	44–45	5,390	19.2	2,921	2,469	54.2
Transportation, communications, and utilities	48–49	1,515	5.4	1,240	275	81.8
Finance, insurance, and real estate	52	6,831	24.3	6,516	315	95.4
Services	81	821	2.9	572	249	69.7
Public administration	92	2,880	10.3	2,617	263	90.9

SOURCE: Authors' calculations based on the 2013 NCS.

NOTES: The NCS does not cover the agriculture, forestry, and fishing sector (NAICS code 11) or the federal government.

Employment in public administration (NAICS code 92) does not equal the sum of employment in local and state government. The NCS may code certain government employees according to job tasks or responsibilities that are typically associated with a particular private-sector industry.

... = not applicable.

sector (88.8 percent). State governments employed 7.8 percent of the sample and local governments employed the remaining 3.4 percent. Full-time workers dominated nearly every subgroup in the sample. Almost 98 percent of local government employees worked full time in 2013. Among state government and private-sector employees, about 88 percent and 86 percent, respectively, worked full time. More than two-thirds of employees in the sample worked in one of three industries: finance, insurance, and real estate (24.3 percent); manufacturing (24.0 percent); and retail trade (19.2 percent).

Table 3 shows the proportions of workers who had access in 2013 to various types of employer-provided benefits in state and local government and the private sector. For each type of health insurance, the proportions were highest for state government workers and were lowest for private-sector workers. For example, 97.3 percent of state government workers had access to medical insurance, whereas only 83.2 percent of local government workers and 76.9 percent of private industry workers had such access. Prescription drug coverage was nearly as prevalent as medical coverage for all three employer types. Dental insurance was available to 63.5 percent of state government workers, 61.7 percent of local government workers, and 50.7 percent of private-sector workers. Among the types of health insurance, vision benefits were the least prevalent (47.3 percent or lower).

The patterns of access to paid leave were similar to those for health insurance, with the proportions highest for state government workers and lowest for

private-sector workers. About 98 percent of state government workers had access to sick or other paid leave in 2013, a proportion no lower than that for access to *any* type of paid leave. The proportions of private-sector workers with access to sick leave, other leave, and any leave were 84.4 percent, 74.9 percent, and 90.3 percent, respectively. Access to private STD and LTD insurance was much lower than access to almost all the other benefit types. Among state government workers, only 29.3 percent had access to STD insurance and 30.8 percent had access to LTD insurance. The respective access rates for local government workers were comparable, at 24.8 percent and 31.3 percent. Private-sector workers had the highest access rates, at 45.3 percent and 34.2 percent, respectively.

O’Leary, Walker, and Roessel (2015) reported that 46.8 percent of 2013 DI disabled-worker beneficiaries had last worked in the services industry, which accounted for 44.6 percent of total employment in 2012. However, only 0.6 percent of DI beneficiaries had worked in public administration, in stark contrast with that industry’s 16.1 percent share of total employment in 2012. Variations in the industry-of-employment distributions of current workers and of disabled-worker beneficiaries—and the causes of those variations—are of research interest. Different levels of access to health insurance, paid leave, and private disability insurance for employees across industries may be one of the factors. As a preliminary exploration, we present the proportions of workers with access to employer-sponsored health and leave benefits, by industry sector and selected subsector,⁷ in Tables 4 and 5.

Table 3.
Percentage of workers with access to selected benefits, by employer type, 2013

Benefit type	State government	Local government	Private sector
Health insurance			
Medical	97.3	83.2	76.9
Prescription drugs	93.9	81.2	75.4
Dental	63.5	61.7	50.7
Vision	47.3	44.6	25.2
Paid leave			
Any (holiday, vacation, sick, personal, or other leave)	98.1	91.9	90.3
Sick	97.9	88.3	84.4
Personal	66.2	47.5	37.2
Other (leave for funerals, military service, or jury duty)	98.0	89.7	74.9
STD insurance	29.3	24.8	45.3
LTD insurance	30.8	31.3	34.2

SOURCE: Authors' calculations based on 2013 NCS.

Table 4 covers access to health insurance in 2013. Regardless of industry, access to medical insurance was the most prevalent, followed in descending order by access to prescription drug, dental, and vision coverage.

The industry sectors in which employers were most likely to offer medical coverage were mining; manufacturing; and finance, insurance, and real estate. Medical coverage was available to about 92 percent of employees in each of those NAICS sectors.⁸ Workers in the services and retail trade industry sectors were the least likely to have access to medical coverage, at 49.5 percent and 60.7 percent, respectively.⁹ Access to prescription drug coverage ranged from 91.6 percent for workers in the finance, insurance, and real estate sector to 48.3 percent in the services sector.¹⁰ The

availability of dental insurance ranged from a high of 75.4 percent for workers in the finance, insurance, and real estate industry to a low of 27.9 percent for workers in the services industry. The industry sector with the highest proportion of workers who had access to vision coverage (45.0 percent) was public administration.¹¹ The retail trade industry sector offered vision coverage to 14.6 percent of its workers, the lowest sector-level access rate.¹²

Table 5 covers paid leave and private disability insurance. By definition, access to any leave equals or exceeds access to the specific types of leave. Access to any paid leave ranged from 98.5 percent of workers in the manufacturing sector to 79.1 percent for services sector workers.¹³ In all industries, sick leave was available to greater shares of workers than was

Table 4.
Percentage of workers with access to health insurance, by coverage type and selected NAICS industry sector and subsector, 2013

Industry sector and subsector	NAICS code	Medical	Prescription drugs	Dental	Vision
Mining	21	91.5	89.7	62.5	24.3
Construction	23	70.8	68.7	39.4	25.3
Manufacturing	31–33	92.3	90.5	63.6	35.6
Food, beverage, and tobacco products; textiles; apparel; and leather and allied products	31	87.5	83.8	60.2	34.3
Wood, paper, and printing and related support; petroleum and coal; chemicals, plastics, and rubber products; and nonmetallic mineral products	32	90.6	88.8	59.7	26.5
Primary metals; fabricated metals; machinery; computer and electronic products; electrical equipment; appliances and components; transportation equipment; furniture; and miscellaneous	33	94.5	93.3	66.3	39.5
Wholesale trade	42	86.6	84.6	51.1	28.0
Retail trade	44–45	60.7	59.0	37.3	14.6
Motor vehicles and parts; furniture and home furnishings; electronics and appliances; building materials and garden equipment and supplies; food and beverages; health and personal care items; gasoline; and clothing	44	56.5	54.9	32.7	17.1
Sporting goods; general merchandise; and miscellaneous and nonstore retail	45	68.3	66.6	45.9	9.9
Transportation, communications, and utilities	48–49	84.0	83.2	58.1	31.9
Air; rail; water; truck; transit and other ground passenger service; pipelines; scenic and sightseeing tours; and support activities	48	77.6	77.0	51.4	21.5
Postal service; couriers and messengers; and warehousing and storage	49	98.1	97.3	73.1	55.1
Finance, insurance, and real estate	52	92.5	91.6	75.4	29.2
Services	81	49.5	48.3	27.9	16.9
Public administration	92	88.3	86.0	62.2	45.0

SOURCE: Authors' calculations based on 2013 NCS.

NOTES: The NCS does not cover the agriculture, forestry, and fishing sector (NAICS code 11) or the federal government.

For consistency with O'Leary, Walker, and Roessel (2015, Table 3), certain NAICS industry sectors are omitted.

Table 5.**Percentage of workers with access to paid leave and private disability insurance, by type and selected NAICS industry sector and subsector, 2013**

Industry sector and subsector	NAICS code	Paid leave				STD insurance	LTD insurance
		Any ^a	Sick	Personal	Other ^b		
Mining	21	96.0	95.5	21.1	83.6	60.3	60.2
Construction	23	86.7	72.9	18.6	51.3	29.2	18.4
Manufacturing	31–33	98.5	96.6	38.1	87.8	63.2	44.5
Food, beverage, and tobacco products; textiles; apparel; and leather and allied products	31	95.9	92.9	27.3	77.9	56.5	31.4
Wood, paper, and printing and related support; petroleum and coal; chemicals, plastics, and rubber products; and nonmetallic mineral products	32	(X)	97.0	35.4	87.4	62.1	46.6
Primary metals; fabricated metals; machinery; computer and electronic products; electrical equipment; appliances and components; transportation equipment; furniture; and miscellaneous	33	(X)	97.6	42.6	91.1	65.9	47.9
Wholesale trade	42	95.7	92.4	38.9	81.5	50.4	44.2
Retail trade	44–45	80.8	71.2	30.7	64.4	26.1	14.6
Motor vehicles and parts; furniture and home furnishings; electronics and appliances; building materials and garden equipment and supplies; food and beverages; health and personal care items; gasoline; and clothing	44	83.3	72.9	26.5	62.9	29.5	17.1
Sporting goods; general merchandise; and miscellaneous and nonstore retail	45	76.0	68.2	38.5	67.3	19.9	10.1
Transportation, communications, and utilities	48–49	94.4	89.4	47.8	82.5	47.1	36.1
Air; rail; water; truck; transit and other ground passenger service; pipelines; scenic and sightseeing tours; and support activities	48	93.0	86.3	35.0	77.1	37.0	32.5
Postal service; couriers and messengers; and warehousing and storage	49	97.7	96.4	76.3	94.7	69.8	44.0
Finance, insurance, and real estate	52	(X)	97.7	67.2	95.1	72.4	74.5
Services	81	79.1	72.6	30.2	57.3	27.4	17.3
Public administration	92	93.7	91.4	53.7	93.1	26.0	30.2

SOURCE: Authors' calculations based on 2013 NCS.

NOTES: The NCS does not cover the agriculture, forestry, and fishing sector (NAICS code 11) or the federal government.

For consistency with O'Leary, Walker, and Roessel (2015, Table 3), certain NAICS industry sectors are omitted.

(X) = suppressed by BLS to prevent possible disclosure of information about specific respondents.

a. Holiday, vacation, sick, personal, or other leave.

b. Leave for funerals, military service, or jury duty.

personal leave. More than 90 percent of employees in the following industries had access to sick leave: finance, insurance, and real estate (97.7 percent); manufacturing (96.6 percent), including each of the three NAICS subsectors of the manufacturing sector; mining (95.5 percent); wholesale trade (92.4 percent); and public administration (91.4 percent).¹⁴ Workers in the finance, insurance, and real estate industry sector had the most access to personal leave (67.2 percent)¹⁵ and those in the construction sector had the least (18.6 percent).

Access to STD and LTD benefits may delay or lower the likelihood of a worker's application for DI benefits. For many workers, DI might be the only potential source of income if a disability requires an extended absence from work. However, if a worker has enrolled in employer-sponsored disability insurance, he or she may choose not to apply for DI. In 2013, employees in the finance, insurance, and real estate industry sector had the highest rate of access to both STD and LTD insurance (72.4 percent and 74.5 percent, respectively). Employees in the construction, services, and retail trade industry sectors had among the lowest rates of access to STD and LTD insurance.

Conclusion

Our analysis of the 2013 NCS provides descriptive statistics on the availability of employer-sponsored health insurance and paid leave benefits by NAICS industry sector. We find that greater proportions of state and local government employees had access to medical, dental, and vision benefits than private-sector workers, yet the latter had greater access to LTD and STD insurance. Access to certain types of benefits varied widely across industries. Among benefit types, vision coverage, STD insurance, and LTD insurance were the least commonly offered. We believe this finding is important because workers might have to rely on STD or LTD benefits to retain employment while addressing a temporary health-related work limitation. If such benefits are not widely available, workers may be more likely to apply for DI benefits. This may account for higher-than-average DI application rates among workers in certain industries. The potential relationship between the availability of STD and LTD insurance and DI application is worth further exploration.

This note provides preliminary steps toward understanding the potential relationship between workers' access to health and leave benefits and their likelihood of DI application. Between O'Leary, Walker,

and Roessel (2015) and this study, the statistics reveal differences by industry in both the access to employer-provided benefits and the prevalence of DI beneficiary status. Whether those two differences are coincidental or related is a subject for future studies.

Notes

Acknowledgments: We thank Lawrence Surowitz, Mark Trapani, and Jesus Ranon for their helpful comments and suggestions; Kristin Monaco and John Bishow at BLS for enabling us to access the NCS data (and for clearing our data analyses); and Susan Wilschke for providing both. We also thank David Weaver, who supported and encouraged this research.

¹ Under certain circumstances, family members of workers may also be eligible for DI benefits.

² The Family and Medical Leave Act (FMLA) of 1993 requires employers to offer leave to qualifying employees, but such leave can be unpaid. The law permits an employee to elect, or the employer to require the employee, to use accrued paid leave (such as vacation or sick leave) for some or all of the FMLA-covered period.

³ The NAICS is the standard system used by the federal statistical agencies of the United States, Canada, and Mexico. For a full description, see Census Bureau (2018).

⁴ Not all public-sector employees are covered under Social Security. For example, federal employees hired before 1984 are covered under the Civil Service Retirement System and not Social Security (unless they opted to convert to the Federal Employee Retirement System) and thus may not be eligible for DI. This may partially explain the low proportion of DI beneficiaries who had worked in public administration.

⁵ The NCS omits the federal government because the Office of Personnel Management (OPM, the federal "employer" agency) uses BLS data to determine federal compensation costs (including benefits). Thus, a BLS survey of OPM's costs would essentially collect BLS' own data.

⁶ For more information on the NCS, see <https://www.bls.gov/ncs/home.htm>.

⁷ "Industry sector and subsector" is NAICS nomenclature; this use of "sector" should not be confused with the broader "public sector" and "private sector" contexts.

⁸ More than 98 percent of workers in the transportation, communications, and utilities industry subsector of NAICS code 49 had access to medical coverage, as did 94.5 percent of workers in the manufacturing industry subsector of NAICS code 33.

⁹ Almost 57 percent of workers in the retail trade industry subsector of NAICS code 44 had access to medical coverage.

¹⁰ More than 97 percent of workers in the transportation, communications, and utilities industry subsector of NAICS code 49 had access to prescription drug coverage, as did

93.3 percent of workers in the manufacturing industry subsector of NAICS code 33.

¹¹ About 55 percent of workers in the transportation, communications, and utilities industry subsector of NAICS code 49 had access to vision coverage.

¹² Only 9.9 percent of workers in the retail trade industry subsector of NAICS code 45 had access to vision coverage.

¹³ Paid leave of any kind was available to only 76.0 percent of workers in the retail trade industry subsector of NAICS code 45.

¹⁴ Sick leave also was offered to 96.4 percent of workers in the transportation, communications, and utilities industry subsector of NAICS code 49.

¹⁵ About 76 percent of workers in the transportation, communications, and utilities industry subsector of NAICS code 49 had access to paid personal leave.

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