# **United States of America**

Exchange rate: Currency is the US dollar (\$).

## Old Age, Disability, and Survivors

## **Regulatory Framework**

**First and current laws:** 1935 (social security) and 1972 (social assistance), implemented in 1974.

**Type of program:** Social insurance and social assistance system.

## Coverage

**Social insurance:** Gainfully employed persons, including self-employed persons with at least \$400 in annual net income and household employees with at least \$1,900 (adjusted for past increases in average wages) in annual gross income.

Voluntary coverage for employees of state and local governments hired before July 1, 1991, and the clergy.

Special systems for railroad employees, federal employees hired before January 1, 1984, and many employees of state and local governments.

**Social assistance:** Needy citizens or nationals of the United States who reside in one of the 50 states, the District of Columbia, or the Northern Mariana Islands, and are not absent from the country for a full calendar month or for 30 consecutive days or more.

## Source of Funds

#### **Insured person**

Social insurance: 6.2% of covered earnings.

The maximum annual earnings used to calculate contributions are \$118,500. The maximum earnings used to calculate contributions are automatically adjusted to past increases in average wages.

Social assistance: None.

#### Self-employed person

Social insurance: 12.4% of covered earnings.

The maximum annual earnings used to calculate contributions are \$118,500. The maximum earnings used to calculate contributions are automatically adjusted to past increases in average wages.

Social assistance: None.

#### Employer

Social insurance: 6.2% of covered payroll.

The maximum annual earnings used to calculate contributions are \$118,500. The maximum earnings used to calculate contributions are automatically adjusted to past increases in average wages.

Social assistance: None.

#### Government

Social insurance: A portion of the revenue from earmarked taxes on social security benefits (paid for by higher income social security beneficiaries) is allocated to the Trust Fund.

Social assistance: The total cost.

## **Qualifying Conditions**

**Old-age pension (social insurance):** Age 66 for workers born from 1943 to 1954 (for workers born since 1955, rising by two months each year until reaching age 67 in 2027 with at least 40 quarters of coverage).

Quarters of coverage are based on the insured's annual earnings. The minimum amount of earnings to receive one quarter of coverage is \$1,220 (\$1,260 in 2016). This amount is adjusted annually to reflect past increases in average wages.

Early pension: Paid from age 62 to the full retirement age.

Deferred pension: The pension may be deferred up to age 70.

Earnings test: From age 62 up to full retirement age, employment may continue and a reduced benefit is paid. From full retirement age, there is no penalty for continuing to work. This test also applies to dependents.

Spouse's benefit: The insured receives or is entitled to receive an old-age pension. The spouse (same sex or opposite sex) must be aged 62 or older and have been married to the insured for at least one year before he or she applied for benefits; any age if caring for a child younger than age 16 (no limit if the child receives disability benefits). Generally, a divorced spouse must have been married to the insured for at least 10 years and be currently unmarried. A spouse or divorced spouse is ineligible if he or she receives or is entitled to receive a higher social security benefit based on his or her own earnings record.

Children's benefit: The insured receives or is entitled to receive an old-age pension. The child must be unmarried and younger than age 18 (age 19 if a full-time elementary or secondary school student, no limit if disabled before age 22). Benefits for stepchildren end upon divorce.

Pensions may be payable abroad to citizens, and to noncitizens under reciprocal agreement. However, noncitizen dependents who were first eligible after 1984 generally must meet a residency requirement unless an exception applies.

Old-age supplemental income benefit (social assistance, means tested): Age 65 with low income and

limited resources. The means test is based on earned and unearned income, including benefits.

**Disability pension (social insurance):** Assessed as incapable of substantial gainful activity as the result of a physical or mental impairment that is expected to last at least a year or result in death. The insured must meet the recent work and duration of work requirements.

A person is assessed as incapable of substantial gainful activity with earnings up to \$1,090 a month (sighted persons, \$1,130 in 2016) or \$1,820 (blind persons).

Recent work requirement: If the disability began before age 24, must have worked at least 1.5 years (six quarters of coverage) during the three-year period before the disability began; from age 24 to 30, must have two quarters of coverage for each year from age 21 to the quarter the disability began; at age 31 or older, must have worked during five of the 10 years before the disability began.

Duration of work requirement: At least 1.5 years (six quarters) worked before age 28 to at least 10 years (40 quarters) worked at age 60.

The qualifying conditions for young and blind persons are less strict.

Earnings test: From age 62 up to full retirement age, employment may continue and a reduced benefit is paid. From full retirement age, there is no penalty for continuing to work. This test also applies to dependents.

Spouse's benefit: The insured receives or is entitled to receive a disability pension. The spouse (same sex or opposite sex) must be aged 62 or older and have been married to the insured for at least one year before he or she applied for benefits; any age if caring for a child younger than age 16 (no limit if the child receives disability benefits). Generally, a divorced spouse must have been married to the insured for at least 10 years and be currently unmarried. A spouse or divorced spouse is ineligible if he or she receives or is entitled to receive a higher social security benefit based on his or her earnings record.

Children's benefit: The insured receives or is entitled to receive a disability pension. The child must be unmarried and younger than age 18 (age 19 if a full-time elementary or secondary school student, no limit if disabled before age 22).

Pensions may be payable abroad to citizens, and to noncitizens under reciprocal agreement. However, noncitizen dependents who were first eligible after 1984 generally must meet a residency requirement unless an exception applies.

**Disability supplemental income benefit (social assistance, means tested):** Younger than age 65 and blind or assessed as disabled with low income and limited resources. The means test is based on earned and unearned income, including benefits. Certain impairment-related work expenses are deductible from income. **Survivor pension (social insurance):** The deceased received or was entitled to receive an old-age or disability pension at the time of death. If younger than age 42 at the time of death, must have had at least six quarters of coverage and the total number of covered quarters must have been at least equal to the deceased's age minus 21.

Eligible survivors include a widow(er) (same sex or opposite sex) aged 60 or older and married to the insured for at least nine months before the death (at least 10 years and did not remarry before age 60 for a divorced widow(er)); a widow(er) at any age if caring for a child younger than age 16 or disabled and receiving social security benefits; a disabled widow(er) or surviving divorced spouse aged 50 or older with a disability that started before or within seven years of the deceased's death; an unmarried child younger than age 18 (age 19 if a full-time elementary or secondary student, no limit if disabled before age 22); and a dependent parent aged 62 or older, not remarried since the insured's death, and at least 50% dependent on the deceased at the time of death.

Earnings test: Up to full retirement age, survivors may continue working and receive a reduced benefit. From full retirement age, there is no penalty for working.

Pensions may be payable abroad to citizens, and to noncitizens under reciprocal agreement. However, noncitizen dependents who were first eligible after 1984 generally must meet a residency requirement unless an exception applies.

Death benefit: Paid to the surviving widow(er) (same sex or opposite sex) living with the insured when he or she died. If they were living apart, paid if the surviving widow(er) was receiving benefits on the insured's record or became eligible upon the insured's death during the month he or she died. If there is no eligible widow(er), the surviving children are eligible if they were receiving benefits on the insured's record or became eligible upon the insured's death during the month he or she died.

### **Old-Age Benefits**

**Old-age pension (social insurance):** The pension is based on the average of the insured's 35 highest years of lifetime earnings. The earnings are adjusted for increases in average wages prior to age 60.

Early pension: The pension is reduced for each month the insured is younger the full retirement age.

Earnings' test: Benefits are reduced by \$1 for every \$2 of earnings for annual earnings above \$15,720 until the year the insured reaches the full retirement age. Benefits are reduced by \$1 for every \$3 of earnings above \$41,880 in the year the insured reaches the full retirement age. Beginning the month the insured reaches the full retirement age, there is no earnings test.

The maximum monthly pension for workers retiring in 2015 at the full retirement age is \$2,663 (\$2,639 in 2016).

(A decrease in full maximum benefits occurs when there is no cost-of-living adjustment, but there is an increase in the national average wage index.)

Deferred pension: The pension is increased by 8% a year for each year the insured defers retirement beyond the full retirement age, up to age 70.

Spouse's benefit: 50% of the insured's old-age pension is paid if the worker's spouse has reached the full retirement age, is caring for a child younger than age 16, or is receiving disability benefits. A reduced benefit is paid from age 62.

Children's benefit: Up to 50% of the insured's old-age pension is paid.

The maximum family pension ranges from 100% to 180% of the insured's old-age pension. A divorced spouse's benefit is not counted against the total maximum family benefit.

Benefit adjustment: Benefits are adjusted automatically according to changes in the cost of living.

**Old-age supplemental income benefit (social assistance, means tested):** The maximum monthly benefit is \$733 for an individual; \$1,100 for a couple.

Benefit adjustment: Benefits are adjusted automatically according to changes in the cost of living.

## **Permanent Disability Benefits**

**Disability pension (social insurance):** The pension is based on the insured's average covered earnings (adjusted for increases in average wages) from age 21 up to the onset of disability, excluding up to five years of the lowest earnings.

There is no minimum pension for insured persons whose disability began after 1981.

Spouse's benefit: 50% of the insured's disability pension is paid if the worker's spouse or eligible divorced spouse has reached the full retirement age. A reduced benefit is paid from age 62.

Children's benefit: Up to 50% of the insured's disability pension is paid.

The maximum family benefit ranges from 100% to 150% of the insured's disability pension. A divorced spouse's benefit is not counted against the total maximum family benefit.

Benefit adjustment: Benefits are adjusted automatically according to changes in the cost of living.

**Disability supplemental income benefit (social assistance, means tested):** The maximum monthly benefit is \$733 for an individual; \$1,100 for a couple.

Benefit adjustment: Benefits are adjusted automatically according to changes in the cost of living.

## **Survivor Benefits**

**Spouse's pension:** 100% of the old-age or disability pension the deceased received or was entitled to receive is paid to a widow(er) or divorced widow(er) at the full retirement age; 75% to a widow(er) or divorced widow(er) at any age caring for a child younger than age 16 (no limit if disabled before age 22); 71.5% to 99% to a widow(er) or divorced widow(er) aged 60 to the full retirement age; 71.5% to a disabled widow(er) aged 50 to 59.

Earnings' test: Benefits are reduced by \$1 for every \$2 of earnings for annual earnings above \$15,720 until the year the insured reaches the full retirement age. Benefits are reduced by \$1 for every \$3 of earnings above \$41,880 in the year the insured reaches the full retirement age. The pension ceases if the widow(er) remarries before age 60.

**Orphan's pension:** 75% of the old-age or disability pension the deceased received or was entitled to receive is paid for each child.

**Dependent parent's pension:** 82.5% of the old-age or disability pension the deceased received or was entitled to receive is paid to one parent aged 62 or older; 75% to each parent if there are two eligible parents.

Benefit adjustment: Benefits are adjusted automatically according to changes in the cost of living.

All survivor benefits combined must not exceed 100% to 180% of the old-age pension (or 100% to 150% of the disability pension) the insured received or was entitled to receive. A surviving divorced spouse's benefit is not counted against the total maximum family benefit.

Death benefit: A lump sum of \$255 is paid.

## Administrative Organization

Social Security Administration (http://www.ssa.gov), an independent agency within the executive branch of government, administers the social insurance (Social Security) and means-tested social assistance (Supplemental Security Income, SSI) programs through regional program centers, district offices, and branch offices.

Treasury Department (http://www.treasury.gov) supervises the collection of Social Security taxes through the Internal Revenue Service and supervises the payment of benefits and the management of funds.

## Sickness and Maternity

## **Regulatory Framework**

**First and current laws:** 1965 (health insurance for older persons); 1965 (health insurance for low-income persons); 1972 (health insurance for the disabled); 1997 (health insurance for children); 2003 (prescriptions drugs), implemented in 2006; and 2010 (Affordable Care Act), implemented in stages.

**Type of program:** Social insurance, mandatory private insurance, and social assistance system. Medical benefits only.

Note: There are no national statutory programs for cash sickness and maternity. Workers in industry and commerce in five states (Rhode Island, California, New Jersey, New York, and Hawaii) and Puerto Rico, and agricultural workers in three states (California, Hawaii, and New Jersey) and Puerto Rico are covered for cash sickness benefits. (There is a special federal system for railroad employees.) Privatesector workers in California and Rhode Island (and in some cities) and public-and private-sector workers in New Jersey are covered for family leave insurance.

Under the Family and Medical Leave Act of 1993, eligible employees of covered employers may take unpaid, jobprotected leave, including continuation of group health insurance coverage, for specified family and medical reasons. Covered employers include all public state, local, and federal agencies, including local education agencies, and most private-sector employers with 50 or more employees.

Medicare (social insurance) consists of: Part A (hospitalization); Part B (medical services); Part D (prescription drug insurance plans); and Part C (Medicare Advantage plans) which may be substituted for Parts A, B and D because it provides hospitalization, medical services, and prescription drug coverage.

## Coverage

**Cash sickness and maternity benefits:** No statutory benefits are provided.

Medical benefits: U.S. citizens and legal residents.

## Source of Funds

#### Insured person

*Medicare Part A (social insurance):* Workers pay 1.45% of gross income up to \$200,000 a year plus 0.9% of annual income above \$200,000. Those enrolled in Medicare pay monthly premiums based on the number of credits (quarters of coverage): no premium with 40 credits; \$224 (\$226 in 2016) for 30 to 39 credits; \$407 (\$411 in 2016) with less than 30 credits.

There is no maximum income used to calculate contributions for hospitalization.

*Medicare Part B (social insurance):* Medicare beneficiaries pay \$104.90 (\$121.80 in 2016) a month for annual income up to \$85,000 (single person) or \$170,000 (married couple). Premiums for annual income over \$85,000 (single person) or \$170,000 (married couple) range from \$146.90 to \$335.70 (\$170.50 to \$389.90 in 2016) a month, according to income level. (There is a late enrollment penalty of 10% of the premium for each full 12-month period that an individual was eligible but did not enroll.) Low-income persons may be eligible for premium or cost-sharing subsidies. *Medicare Part C (social insurance):* A monthly premium that varies according to the plan.

*Medicare Part D (social insurance):* Medicare beneficiaries pay a monthly premium that varies according to the plan. Persons with income above \$85,000 a year (single person) or \$170,000 a year (married couple) pay an additional amount directly to the government that ranges from \$12.30 to \$70.80 (\$12.70 to \$72.90 in 2016) a month, according to income level. (There is a late enrollment penalty based on the number of full uncovered months of coverage.) Lowincome persons may be eligible for premium or cost-sharing subsidies.

Affordable Care Act (mandatory health insurance): Premiums vary depending on the insurer.

Medicaid and CHIP (social insurance): None.

#### Self-employed person

*Medicare Part A (social insurance):* Self-employed workers pay 2.9% of declared income plus 0.9% of annual income above \$200,000. Those enrolled in Medicare pay premiums based on the number of credits (quarters of coverage): no premium with 40 credits; \$224 (\$226 in 2016) for 30 to 39 credits; \$407 (\$411 in 2016) with less than 30 credits.

There is no maximum income used to calculate contributions for hospitalization.

*Medicare Part B (social insurance):* Medicare beneficiaries pay \$104.90 (\$121.80 in 2016) a month for annual income up to \$85,000 (single person) or \$170,000 (married couple). Premiums for annual income over \$85,000 (single person) or \$170,000 (married couple) range from \$146.90 to \$335.70 (\$170.50 to \$389.80 in 2016) a month, according to income level. (There is a late enrollment penalty of 10% of the premium for each full 12-month period that an individual was eligible but did not enroll.) Low-income persons may be eligible for premium or cost-sharing subsidies.

*Medicare Part C (social insurance):* Medicare beneficiaries pay a monthly premium that varies according to the plan. (The average premium in 2015 is \$32.91.)

*Medicare Part D (social insurance):* Medicare beneficiares pay a monthly premium that varies according to the plan. Persons with income above \$85,000 a year (single person) or \$170,000 a year (married couple) pay an additional amount directly to the government that ranges from \$12.30 to \$70.80 (\$12.70 to \$72.90 in 2016) a month, according to income level. (There is a late enrollment penalty based on the number of full uncovered months of coverage.) Lowincome persons may be eligible for premium or cost-sharing subsidies.

Affordable Care Act (mandatory health insurance): Premiums vary depending on the insurer. (There is an annual penalty for not having coverage.)

Medicaid and CHIP (social assistance): None.

#### Employer

Medicare Part A (social insurance): 1.45% of gross payroll.

There are no maximum earnings used to calculate contributions for hospitalization.

Medicare Part B (social insurance): None.

*Medicare Part C (social insurance):* 1.45% of gross payroll (hospitalization only).

There are no maximum earnings used to calculate contributions for hospitalization.

Medicare Part D (social insurance): None.

Affordable Care Act (mandatory health insurance): None.

#### Government

*Medicare Part A (social insurance):* The total cost for certain noninsured elderly persons.

*Medicare Part B (social insurance):* A portion of the revenue from earmarked taxes on social security benefits; and subsidies.

*Medicare Part C (social insurance):* Annual payments to participating companies.

*Medicare Part D (social insurance):* Subsidies from general revenues, as needed. State governments pay a portion of the cost for certain workers also covered under certain state assistance programs.

Affordable Care Act (mandatory health insurance): Provides tax credits to small businesses and to persons with income from 100% to 400% of the federal poverty level; subsidizes insurance plans for persons with income from 100% to 250% of the federal poverty level.

The federal poverty level is based on annual gross family income and ranges from \$11,770 for one person to \$40,890 for a family of eight. (For families/households with more than eight persons, the level rises by \$4,160 a year for each additional person.)

*Medicaid and CHIP (social assistance):* Jointly funded by individual states and the federal government.

### **Qualifying Conditions**

**Cash sickness and maternity benefits:** No statutory benefits are provided.

#### **Medical benefits**

*Medicare Parts A and B (social insurance):* Age 65 and receives or is entitled to receive an old-age pension or has at least 10 years of contributions; younger than age 65 with a disability and receiving a disability pension for at least two years (no waiting period for persons with end-stage renal disease or ALS (Amyotrophic Lateral Sclerosis, also called Lou Gehrig's Disease)).

*Medicare Part C (social insurance):* Same as for Parts A and B. Persons with end-stage renal disease who are new to Medicare usually are excluded.

*Medicare Part D (social insurance):* Must be entitled to Medicare Parts A, B, or C.

Affordable Care Act (mandatory health insurance): Most U.S. citizens and legal residents must have qualifying health care coverage and access to certain free preventive services. Medicare is considered qualifying health care coverage.

*Medicaid (social assistance):* States set individual eligibility criteria within federal minimum standards. Many states have expanded coverage, particularly for children, above the federal minimums. For many eligibility groups, income is calculated in relation to a percentage of the federal poverty level, depending on the size of the family.

The federal poverty level is based on annual gross family income and ranges from \$11,770 for one person to \$40,890 for a family of eight. (For families/households with more than eight persons, the level rises by \$4,160 a year for each additional person.)

*CHIP (social assistance):* Uninsured children up to age 19 in families with incomes too high to qualify them for Medicaid. States set their own income eligibility standards, and eligibility varies across states.

#### Sickness and Maternity Benefits

No statutory benefits are provided.

#### Workers' Medical Benefits

#### **Medical benefits**

*Medicare Part A:* (social insurance) Inpatient care is provided for stays of up to 90 days: the beneficiary has a deductible of \$1,260 (\$1,288 in 2016) and no-copay for up to 60 days; \$315 (\$322 in 2016) a day for the 61st to the 90th day; and \$630 (\$644 in 2016) a day for more than 90 days for up to 60 lifetime reserve days. Posthospital skilled nursing facility care for an additional 100 days (the patient pays \$157.50 (\$161 in 2016) a day for the 21st to the 100th day), laboratory and X-ray services for inpatients, and posthospital home health services.

*Medicare Part B (social insurance):* Most preventive care services are free. 80% of medically necessary charges above \$147 (\$166 in 2016) a year is paid for physician's services, outpatient diagnostic and physical therapy, laboratory services, appliances, and transportation.

*Medicare Part C (social insurance):* Benefits are at least the same as for Parts A and B and usually include a prescription drug component. Co-payments, deductibles, and annual out-of-pocket maximums vary according to the plan.

*Medicare Part D (social insurance):* The maximum allowable deductible is \$320 (\$360 in 2016) a year; some plans

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do not have a deductible. The plan and the insured share the cost of prescription drugs, up to a combined limit of \$2,960 (\$3,310 in 2016) a year. The insured pays a higher percentage of the combined total cost of prescription drugs between \$2,976 (\$23,310 in 2016) and \$4,700 (\$4,850 in 2016). (That percentage is gradually falling from 45% of the cost (brand-name prescription drugs) or 60% (generic) in 2015, to 25% (brand-name or generic) in 2020.) For the rest of the calendar year, insured persons who have reached the limit have a minimum co-pay that varies according to the type of drug.

Affordable Care Act (mandatory health insurance): Individuals without employer-provided health insurance can choose (through health insurance marketplaces run by the federal government or certain state governments) among plans that meet certain benefit and cost standards. Small businesses can purchase coverage through separate marketplaces. Certain provisions are still being implemented.

Benefits include a free basic package of preventive health services. Private insurance may not exclude pre-existing conditions or apply annual or lifetime limits on the dollar value of coverage. Companies may not rescind coverage except in cases of fraud.

*Medicaid and CHIP (social assistance):* States determine the type, amount, duration, and scope of services within broad federal guidelines. States have the option to charge premiums and to establish out of pocket spending (cost sharing) requirements for Medicaid.

### **Dependents' Medical Benefits**

Medical benefits for dependents are the same as those for the insured.

For Medicare, the insured's spouse, divorced spouse, or widow(er) may be eligible under certain conditions. For the Affordable Care Act, eligible dependents include children up to age 26.

## Administrative Organization

#### Social insurance (Medicare)

Department of Health and Human Services (http://www .hhs.gov/) provides general supervision.

Centers for Medicare and Medicaid Services (CMS) (http:// www.cms.hhs.gov) administer the program in cooperation with the Public Health Service, the Social Security Administration, and state health departments.

Private carriers and public agencies, under contract as intermediary administrative agents, determine and make payments to service providers or to patients.

Carriers either pay medical service providers directly or partially reimburse the insured.

CMS contracts with individual companies that provide prescription drugs directly to the insured.

#### Mandatory health insurance (Affordable Care Act)

Department of Health and Human Services (http://www .hhs.gov/) provides general supervision.

Private health insurance companies provide health insurance.

#### Social assistance (Medicaid and CHIP)

Department of Health and Human Services (http://www .hhs.gov) through the Centers for Medicare and Medicaid Services (CMS) (http://www.cms.hhs.gov) provides general supervision.

Center for Medicaid and CHIP Services (https://www .medicaid.gov) oversees the programs.

Individual states administer their own programs.

## Work Injury

### **Regulatory Framework**

**First laws:** 1908 (Federal employees) and 1911 (nine state laws).

**Current laws:** Most laws were enacted before 1920; 1969 (pneumoconiosis).

**Type of program:** Employer-liability and social insurance system.

### Coverage

**Employer-liability system:** Most public- and private-sector employees. (All states, Puerto Rico, District of Columbia, Guam, and U.S. Virgin Islands).

Exclusions: Household workers, agricultural employees, some small businesses, casual labor, and self-employed persons.

Pneumoconiosis benefits (social insurance): Miners.

Exclusions: Self-employed persons.

#### Source of Funds

Insured person: Nominal contributions in a few states.

Self-employed person: Not applicable.

#### Employer

*Work injury benefits (employer liability):* The total cost (most states) or most of the cost is financed through either insurance premiums varying with the assessed degree of risk or self-insurance. (The average cost in 2013 was 1.34% of payroll.)

*Pneumoconiosis benefits (social insurance):* The total cost for insured persons who entered the workforce after 1973.

#### Government

*Work injury benefits (employer liability):* None; contributes as an employer.

*Pneumoconiosis benefits (social insurance):* The total cost for insured persons who entered the workforce before 1974.

## **Qualifying Conditions**

**Work injury benefits:** There is no minimum qualifying period, except for exposure to conditions that result in an occupational disease.

**Pneumoconiosis benefits:** Must be totally disabled by black lung disease caused by working in the coal mining industry and have worked for at least one year.

## **Temporary Disability Benefits**

In most states, 66.6% of earnings is paid after a three- to seven-day waiting period. Benefits are paid retroactively if the disability lasts for a specified period, from five days to six weeks.

Dependent's supplement: Paid in about 20% of all states, in some instances as a lump sum.

The maximum weekly benefit varies by state.

Benefit adjustment: About 80% of all states increase benefits automatically according to increases in state wages.

## Permanent Disability Benefits

**Permanent disability pension:** 66.6% of earnings is paid for a total disability for the duration of the disability (in most states).

Partial disability: A reduced pension is paid according to the assessed loss of earning capacity, or at the full rate for fewer weeks for certain injuries.

Constant-attendance supplement: Paid in some states if the insured requires the constant attendance of others to perform daily functions. The supplement is paid for life or for the duration of the disability (80% of all states); or for 104 to 500 weeks (in some states).

Dependent's supplement: Paid for life or the duration of the disability (in 80% of all states); or for 104 to 500 weeks (in some states).

**Pneumoconiosis pension:** \$638 (\$644.50 in 2016) a month is paid by the insured's last employer. The benefit is increased according to the number of dependents, up to \$1,276 (\$1,289 in 2016) a month with three dependents.

## Workers' Medical Benefits

**Medical benefits:** All states provide medical care for as long as required.

**Pneumoconiosis benefits:** Medical coverage for treatment of the miner's pneumoconiosis and directly related conditions.

### Survivor Benefits

**Survivor pension:** 35% to 70% of the deceased's earnings is paid to a widow(er); 60% to 80% with dependent children.

Other eligible survivors (in some states) include dependent parents, brothers, and sisters.

**Funeral grant:** A lump sum is paid. The amount varies by state.

**Survivor pension (pneumoconiosis):** \$638 a month is paid. The benefit is increased according to the number of dependents, up to \$1,276 a month with three dependents.

## Administrative Organization

**Work injury:** State workers' compensation agencies administer the program in about 50% of all states, state departments of labor administer the program in about 37.5% of all states, and courts administer the program in three states.

Employers must insure with the state fund in four states; with the state fund or a private carrier in 19 states; or with a private carrier in the remainder. In all but two states, certain employers may choose to self-insure.

**Pneumoconiosis benefits:** Department of Labor (http:// www.dol.gov/owcp), through its Office of Workers' Compensation Program, administers the program and pays benefits.

In some cases, if the employer or insurer is out of business and unable to pay benefits to the miner or his or her eligible dependents, the Department of Labor may accept liability for paying benefits.

## Unemployment

## **Regulatory Framework**

First and current federal law: 1935 (Social Security Act).

**First and current state laws:** All states, Puerto Rico, Virgin Islands, and District of Columbia have separate laws creating their own programs. State laws were first enacted between 1932 and 1937.

Type of program: Social insurance system.

## Coverage

Public- and private-sector workers, military personnel, most agricultural employees, and household workers.

Exclusions: Some agricultural employees, employees of religious organizations, casual employees, family labor, and self-employed persons.

Special federal system for railroad employees.

### Source of Funds

**Insured person:** None, except in Alaska, New Jersey, and Pennsylvania.

Self-employed person: Not applicable.

#### Employer

*Federal program*: 0.6% of the first \$7,000 of an employee's earnings in covered employment per year. (The full amount is 6.0%. However, there is a 5.4% credit if states meet all federal requirements.)

*State programs:* The standard rate is 5.4% of the first \$7,000 to \$42,100 (varies according to the state) of an employee's earnings in covered employment per year. Actual rates vary from zero to 10% or more. (Employers with a history of higher unemployment costs generally pay higher rates.)

**Government:** Federal tax revenue finances federal and state administrative costs.

## **Qualifying Conditions**

**Unemployment benefits:** Most states require minimum earnings in the base period equal to a specified multiple of the weekly benefit amount or high-quarter wages, or a specified total amount of wages in the base period. A few states require a specified number of weeks of employment (for example, from 18 to 20 weeks). One state requires a certain number of hours of work.

Must be registered with the employment service, capable of and available for work, and actively seeking work. Will generally be disqualified for voluntarily leaving a job without good cause, being discharged from employment for misconduct, or refusing an offer of suitable work. May be disqualified for participating in a labor dispute.

## **Unemployment Benefits**

**Unemployment benefit:** About 50% of the insured's earnings is paid after a one-week waiting period, for up to 26 weeks in most states. The states pay for benefits.

Dependent's supplement: About 25% of states provide from \$1 to \$154 a week for each child and sometimes for other dependents.

Federal law provides for up to 20 additional weeks of benefits in states with high levels of unemployment.

**Unemployment assistance:** Paid in some states to unemployed workers with insufficient periods of covered employment who have exhausted benefit rights under the federal and state assistance programs and who are participating in training programs. The states pay for benefits.

### Administrative Organization

Department of Labor (http://oui.doleta.gov/unemploy) administers the program nationally through its Employment and Training Administration and Office of Unemployment Insurance.

State workforce agencies administer individual state unemployment programs.

## Family Allowances

### **Regulatory Framework**

Some 80 different means-tested programs administered and funded by federal, state, and local governments provide cash payments, social services, educational assistance, housing assistance, vocational training, medical assistance, energy and utility assistance, child care, and child development programs.

The Earned Income Tax Credit provides a refundable credit through the federal tax system to working individuals or families with low to moderate income. The refund varies according to income, marital status, and the number of children and ranges from up to \$503 (\$506 in 2016) a year with no children and annual income up to \$14,820 (\$14,880 in 2016) (single person) or \$20,330 (\$20,430 in 2016) (married couple), to up to \$6,242 (\$6,269 in 2016) a year with at least three children and annual income up to \$47,747 (\$47,955 in 2016) (single) or \$53,267 (\$53,505 in 2016) (married).