

Delayed Filing for Disability Benefits Under the Social Security Act

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UNDER the current provisions of the Social Security Act, a period of disability may be established as beginning not more than 18 months before the disabled worker files an application for benefits, even though his disability may have forced him to stop working many years earlier.¹ Furthermore, his benefit payments cannot be retroactive for more than 12 months before the date of the application.

A worker who waits more than 18 months after he becomes disabled to file for benefits may therefore suffer needless economic loss.² Since insured-status requirements must be met at the beginning date of the legal period of disability, a worker who became disabled long before filing an application may even suffer loss of his basic eligibility under the program. For insured status the individual must have worked in covered employment for at least 5 years out of the 10 immediately preceding the onset of his disability.

Since the passage of the first provisions for disability benefits, the Social Security Administration has carried on an extensive program to publicize them and to alert disabled workers to their rights. Extensive use has been made of the usual mass media—television, radio, and the newspapers. Articles have been published in medical and other technical journals. In addition, district offices of the Social Security Administration have established contacts with employers and unions administering private disability plans, with mental and tuberculosis hospitals, and with welfare agencies working with the disabled, so that they might obtain leads to newly disabled persons and actively solicit applications from them.

Although the volume of "delayed filing" has diminished since the early years of the disability program, current operating statistics indicate that

about a fifth of all disability applicants still wait more than 18 months after they have become disabled to file for benefits and thus risk possible loss of at least some monthly cash benefits. This proportion has remained relatively steady for the past few years. Presumably, there may be disabled workers who do not file at all, but there is no practical way of estimating their number.

TABLE 1.—Number and percentage distribution of applicants, by filing lag¹

Filing lag (number of months)	Applicants in survey with—					
	Total		Complete interview		Background data only	
	Num-ber	Per-cent	Num-ber	Per-cent	Num-ber	Per-cent
Total.....	5,718	100	5,358	100	360	100
6 or less.....	2,345	41	2,198	41	147	41
More than 6, up to 12.....	1,537	27	1,446	27	91	25
More than 12, up to 18.....	611	11	578	11	33	9
More than 18, up to 36.....	638	11	596	11	42	12
More than 36.....	452	8	422	8	30	8
Unknown.....	135	2	118	2	17	5

¹ Number of months between onset of disability and date of filing for disability benefits.

The present survey was undertaken to determine why disabled persons delay filing for benefits, their sources of information about the disability program, the reasons that they finally apply, and what steps can be taken to reduce excessive delays. The survey data were collected through a special interview schedule administered to all applicants for disability benefits during the first 2 weeks of April 1963 in a 50-percent random sample of all district offices. During an additional 2 weeks, applicants waiting more than 12 months after the onset of their disability before they filed for benefits were interviewed to supplement the sample of "delayed filers."³

This report analyzes data obtained during the first 2 weeks of interviewing only. The analysis covers (1) sources of information about the disability program, (2) reasons for delayed filing,

³ The sample excluded applicants for childhood disability benefits, reapplicants, and applicants who had never met the insured-status requirements.

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¹ For a detailed discussion of the disability provisions of the Social Security Act, see Arthur E. Hess, "Five Years of Disability Insurance Benefits: A Progress Report," *Social Security Bulletin*, July 1962.

² Consideration is being given to legislation that would provide full retroactivity for disability determinations.

TABLE 2.—Filing lag, by applicant's answer to the question, "How did you first find out there was a social security disability program?"

Source of initial information	Number	Percentage distribution by filing lag (number of months)					Un-known
		Total	6 or less	More than 6, up to 12	More than 12, up to 18	More than 18	
Mass media:							
Newspaper.....	475	100	46	26	11	5	2
Radio or television.....	490	100	43	25	12	19	1
Pamphlet or magazine.....	1 240	100	40	28	11	18	3
Public agency:							
Public assistance or voluntary welfare agency.....	308	100	36	24	12	26	2
Unemployment insurance.....	62	100	32	32	16	18	2
Veterans Administration.....	211	100	34	27	13	25	1
Work-related:							
Union.....	82	100	53	30	7	8	2
Employer.....	333	100	51	28	10	9	2
Coworker.....	155	100	53	28	6	10	3
Personal:							
Spouse.....	169	100	39	31	10	18	2
Relative other than spouse.....	386	100	40	25	13	21	1
Friend, neighbor, or acquaintance.....	1,050	100	36	28	11	23	2
Other disability beneficiary.....	93	100	32	28	13	23	4
Other hospital patient.....	175	100	36	33	13	16	2
Doctor.....	375	100	54	24	7	12	3
Social security representative.....	340	100	37	25	9	26	3
Other.....	154	100	33	32	12	20	3
Don't remember.....	250	100	41	28	10	19	2

¹ The source of information was a magazine in only 25 cases.

(3) precipitating reasons for filing, and (4) delayed filing and receipt of benefits from other programs.

A later report will include data on the number of persons in the sample for whom a disability benefit was allowed, the number of applicants who actually lost benefits because of their delay in filing, and the amount of benefits lost. It will also include a detailed analysis of the full 4-week sample of delayed filers. The present article should therefore be considered provisional.⁴

The first 2 weeks of interviewing yielded 5,718 sample cases. Of this total, 360 were cases where the interview schedule could not be administered because the claimant did not apply in person. Generally, these were cases where the claimant was not competent or was too ill to apply in person, and they are omitted from the analysis.

For the remaining 5,358 cases, a complete interview was obtained. Two-fifths had filed within 6

⁴ In this report, elapsed time between the date of onset of the disability and the date of filing is measured by subtracting the former from the latter. The date of onset used is, however, the date alleged by the claimant at the time of application and not the date determined upon adjudication of his claim. When the established date is substituted for the alleged date, it is possible that some of the distributions and relationships discussed here will change.

months after becoming disabled, as shown in table 1, and almost that many waited more than 6 months but less than the 18-month retroactive time limit. Almost one-fifth, however, waited more than 18 months. The differences were slight between the cases for whom the interview was completed and the cases with background data only.

SOURCES OF INFORMATION ABOUT THE DISABILITY PROGRAM

One of the major objectives of the survey was to determine the channels of information through which disabled persons learn about the disability provisions under the Social Security Act. What part is played by the mass media, by employers and unions, by physicians, and by family and friends in acquainting potential claimants with the program and with their rights? Which of these channels are most closely related to promptness of filing?

First Information on the Program

To identify sources of information, applicants in the survey were asked, "Can you remember how you first found out there was a disability program?" Responses to this question varied widely. Most often a friend or neighbor had informed the applicant (in 1 out of 5 cases). The next most frequent sources were the newspaper (9 percent) and radio or television (9 percent). Other sources included physicians (7 percent), relatives (7 percent), employers (6 percent), district office repre-

TABLE 3.—Percent of applicants who stated they received any information or advice to file for benefits, by source of information

Source of information or advice	Total ¹	Re-ceived infor-mation	Re-ceived advice to file
Public assistance or voluntary welfare agency.....	12	2	10
Veterans Administration.....	7	2	5
Member of claimant's union.....	3	1	2
Employer.....	11	3	8
Spouse.....	16	5	11
Relative other than spouse.....	13	4	9
Friend, neighbor, acquaintance, or coworker.....	26	12	14
Other disability beneficiary.....	15	7	8
Doctor.....	28	7	21
Lawyer or accountant.....	4	1	3
Social security representative.....	4	1	3

¹ Because applicants stated they received information or advice from more than one source, the percentages add up to more than 100.

sentatives (6 percent), and public assistance or other welfare agencies (6 percent).

Grouping of the specific responses into more general categories perhaps provides a clearer picture of how applicants first learn about the disability program. Thirty-eight percent said that they first heard about the program from an informal, personal source (such as a friend, relative, spouse, or coworker), and 22 percent named the mass media (newspaper, radio, television, magazine, or pamphlet). For 11 percent the source of the information was a public agency (such as a public assistance agency, the Veterans Administration, or an unemployment insurance office); for 8 percent it was either the employer or union; and for 7 percent it was the doctor. Although the responses reveal a wide variety of sources of information, it appears that informal, personal sources are by far the most important in getting initial information about the disability program to disabled workers.⁵

TABLE 4.—Filing lag for applicants receiving any information or advice to file for benefits, by source of information or advice

Source of information or advice	Number	Percentage distribution by filing lag (number of months)					Un-known
		Total	6 or less	More than 6, up to 12	More than 12, up to 18	More than 18	
Public assistance or voluntary welfare agency	641	100	36	24	13	25	2
Veterans Administration	389	100	39	22	14	22	3
Union	190	100	52	32	6	9	1
Employer	625	100	50	30	11	7	2
Spouse	839	100	44	29	12	14	1
Relative other than spouse	77	100	41	24	12	22	1
Friend, neighbor, acquaintance, or coworker	1,389	100	38	28	12	20	2
Other disability beneficiary	827	100	38	24	13	22	3
Doctor	1,524	100	51	24	10	13	2
Lawyer or accountant	172	100	27	35	12	25	1
Social security representative	188	100	35	29	9	24	3

The relatively few persons who reported that they first heard about the program from a doctor, union, or employer tended to have the shortest filing lags (table 2). Possibly these more formal channels of information carry with them more authority than do friends and relatives. The other group with a relatively short filing lag were those stating that they first heard about the program through the mass media. Undoubtedly, claimants alert enough to catch such messages in the news-

⁵ The way the information reached these personal sources was, of course, beyond the scope of this study.

paper or on television are also likely to be alert to their rights under the program and to file promptly.

Persons who stated that the disability program first came to their attention through a public agency (such as the Veterans Administration or a public assistance agency) deferred filing for the longest period. This finding suggests that information received from such sources is either disregarded or that persons learning of the disability program in this way came into contact with such agencies some time after the onset of their disability.

Specific Information or Advice

Further knowledge of the way disabled persons get information about the program was gained by furnishing each applicant with a check list of sources (his doctor, spouse, relatives, public assistance agency, lawyer, etc.) and requesting him to check all sources that had provided any information or specific advice about filing an application for benefits. For each source, the claimants responding were classified in three categories: (1) those who did not receive any information or advice from the source, (2) those who spoke to the source and received information only, and (3) those who spoke to the source and were specifically advised to file for benefits.⁶

Table 3 shows that most often the information or advice came from the applicant's doctor (28 percent) and from a friend, neighbor, acquaintance, or coworker (26 percent). Though similar in frequency, the advice given by these two sources differed significantly in content. In 3 out of every 4 cases in which the doctor was the source of information or advice, he had advised the claimant to file for benefits—the highest proportion for any source. Friends, on the other hand, had suggested filing for benefits in only slightly more than half the cases.

The next most common source of information or advice was the claimant's spouse (16 percent), who advised filing in 2 out of 3 cases. A surprisingly large proportion (15 percent) of the appli-

⁶ A fourth possibility—that the claimant spoke to the source and was advised not to file—was included on the interview schedule. Since there was only a handful of such responses, they were not coded.

cants received information from someone who was already receiving disability benefits. In about half these cases the information included advice to file for benefits. Public assistance and other welfare agencies served as a source of information or advice for 12 percent of the claimants. In 5 out of every 6 such cases the agency advised the individual to file for disability benefits under old-age, survivors, and disability insurance (OASDI). This is the highest rate of advice to file reported for any of the channels of information. It is reasonable to assume that claimants make contact with such agencies considerably later in the course of their disability than they do with a spouse, friends, or doctor. In other words, by the time they reach such agencies, they already have a long history of sickness, nonemployment, and depleted resources. In addition, welfare agencies have a policy of referring disabled persons who apply for assistance to the Social Security Administration's district offices, where they may apply for disability benefits if they have not already done so.

In sum, when the claimant spoke with someone about the disability program, more often than not he received both information and advice to file. Sources that involved less personal interaction, such as public assistance or other welfare agencies and physicians, were more likely to give such advice than were friends, relatives, or coworkers.

Table 4 shows data on the filing lag, according to whether or not the claimant received information or advice to file from any source on the check list. The findings are virtually a repetition of those in table 2, which showed similar data by the claimant's initial source of information. Claim-

ants receiving information or advice from physicians, employers, or unions—like those receiving their first knowledge of the program from the sources—had the shortest filing lags. Although welfare agencies were even more likely than physicians to couple information about the disability program with specific advice to file, the longest filing lags were reported by applicants consulting the agencies. Thus, not only were physicians one of the most frequent sources of information about the disability program, but they also advised claimants to file for disability benefits more often than any other source of program information.

The Physician's Role

The private physician plays an important role in the disability insurance program. He functions as a medical reporter (supplying medical evidence as the physician treating claimants), as a decision maker (acting as a member of State disability evaluation teams), and as a policy formulator (as a member of medical advisory committees and of the Social Security Administration's medical consultant staff). Although the Administration's medical information program focuses on physician understanding of his role in these areas and not on the problem of encouraging the worker's prompt application for disability benefits, better understanding by the physician is bound to result in better understanding by the disabled person and thus in prompter filing.

The relative promptness of filing among applicants receiving information about the disability program from their physicians suggests that informational programs aimed at physicians do much to reduce filing delays among disabled persons. Such programs can be fruitful, however, only if the men and women to be reached—that is, those who delay filing the longest—are receiving medical care. Eighty-six percent of the applicants had seen a physician during the 1 or 2 months immediately before the month in which they applied for disability benefits (table 5). Moreover, though the length of time between the date of application for disability benefits and the date the applicant last saw a physician increased steadily as the filing lag increased, the vast majority (72 percent) of even the applicants with filing lags of more than 18 months had seen a physician

TABLE 5.—Filing lag for applicants for disability benefits, by elapsed time between date of application and date applicant last saw physician

Elapsed time	Percentage distribution by filing lag (number of months)				
	Total	6 months or less	More than 6, up to 12	More than 12, up to 18	More than 18
Total number.....	1 5,240	2,198	1,446	578	1,018
Total percent.....	100	100	100	100	100
Less than 1 month.....	77	85	78	73	61
1-2 months.....	9	7	9	10	11
3-6 months.....	8	4	7	10	12
7-12 months.....	2	1	3	3	5
More than 12 months.....	3	2	2	3	9
Unknown.....	1	1	1	1	2

¹ Excludes 118 cases where number of months between onset of disability and date of application was unknown.

as recently as 1 or 2 months before applying for disability benefits.

Obviously then, informational programs aimed at physicians can reach almost all disability applicants and can play an important role in minimizing delays in filing for disability benefits. In recent years the Social Security Administration has intensified its efforts to promote greater awareness of and wider participation in the disability program on the part of the medical profession. Stronger formal liaison has been established with the American Medical Association; scientific exhibits have been displayed in increasing numbers at national conventions of medical organizations; and many articles have been prepared for publication in national medical journals.

More and more attention has also been directed toward reaching physicians at the local level by working through State medical societies and the State agencies administering the disability program. For example, the first of a series of seminars for physicians on the measurement of physical and mental impairments and their effect on capacity to work was held in Rhode Island in the fall of 1962. Other States are setting up similar programs.

REASONS FOR DELAYED FILING

The most obvious reason a disabled person neglects to file for disability benefits is lack of information. Claimants in the study were asked if, at the time they first became unable to work because of disability, they knew there was a program for disabled persons under the Social Security Act.

Forty-four percent answered "Yes," 54 percent said "No," and 2 percent could not remember

TABLE 5.—Filing lag, by applicant's answer to question, "At the time you first became unable to work because of your disability, did you know that social security had a program for disabled people?"

Filing lag (number of months)	Percentage distribution		
	Yes	No	Don't remember
Total number.....	2,377	2,884	37
Total percent.....	100	100	100
6 or less.....	50	34	20
More than 6, up to 12.....	26	28	26
More than 12, up to 18.....	9	12	13
More than 18.....	13	24	28
Unknown.....	2	2	3

(table 6). This distribution suggests that many claimants pay no attention to the disability program until the onset of disability makes it a matter of immediate personal concern.

Half of those who stated that they had been aware of the program at the onset of their disability filed within 6 months, in comparison with a third of those who were not aware of the program when they became disabled. Moreover, only about an eighth of those aware of the program at the time of onset waited more than 18 months to file, but almost a fourth of those who had been unaware of the program deferred filing for that length of time.

Those who said they were aware of the program at the onset of the disability were further asked: "And at that time did you think you might be able to qualify?" Forty-three percent said "Yes," 48 percent said "No," and 9 percent could not recall (table 7). The large proportion who thought they might not be able to qualify suggests that, even among presumably knowledgeable workers, uncertainty exists about the extent of disability required to qualify for disability benefits.

TABLE 7.—Filing lag by applicant's answer to question, "And at that time did you think you might be able to qualify?"¹

Filing lag (number of months)	Percentage distribution	
	Yes	No
Total number.....	1,026	1,137
Total percent.....	100	100
6 or less.....	62	40
More than 6, up to 12.....	20	31
More than 12, up to 18.....	8	11
More than 18.....	8	16
Unknown.....	2	2

¹ Answers of 2,163 applicants who stated they did know about the disability program when they first became unable to work because of their disability; 214 who also knew about the program didn't remember whether they thought then that they could qualify for disability benefits.

Among persons who knew about the program and thought themselves qualified for benefits, 62 percent filed within the 6 months following the onset of disability and 8 percent waited more than 18 months. In contrast, among those with early knowledge of the program but who thought they might not qualify, 40 percent filed within 6 months and 16 percent waited more than 18 months.

Claimants who reported that they were aware of the disability program at the onset of their disability but who did not think they would

TABLE 8.—Filing lag by applicant's answer to question, "Why didn't you think you might be able to qualify?"¹

Applicant's reason for thinking he might not qualify	Number	Total	Percentage distribution, by filing lag (number of months)				
			6 or less	More than 6, up to 12	More than 12, up to 18	More than 18	Unknown
Didn't think had enough quarters of coverage.....	43	100	41	21	12	26	0
Didn't think was old enough to qualify.....	105	100	28	34	14	21	3
Thought receipt of other income would prevent receipt of disability benefits.....	41	100	24	30	17	29	0
Didn't think disability severe enough to qualify him.....	383	100	45	29	11	15	2
Expected to get better and/or return to work.....	620	100	40	33	11	14	2
Other.....	103	100	43	25	11	20	1

¹ Answers of 1,130 applicants who stated that they didn't think they were able to qualify; 7 who also thought they might not qualify did not know

or did not remember the reason.

qualify for benefits were asked why.⁷ Table 8 shows that the most frequently given reasons were related to the disability. More than half expected to recover and/or return to work, and about a third believed that their disability was not severe enough to qualify them. Other reasons reflected ignorance of the basic provisions of the disability program. Nine percent of the claimants thought they were too young to qualify, 4 percent believed they did not have enough years of employment, and 4 percent thought that receipt of other income disqualified them.

Filing lags were also affected by the claimants' belief that they might not qualify for disability benefits. Among those who expected to get better and/or return to work, 14 percent waited more than 18 months after the onset of their disability to apply for benefits. Fifteen percent of those who didn't think they were severely enough disabled to qualify for benefits delayed for the same length of time. In contrast, the proportion of persons with filing lags of more than 18 months ranged from 21 percent to 29 percent among the claimants who, because of misunderstanding or ignorance of the nondisability requirements of the law—insured status, age, receipt of benefits from other programs—believed that they would not qualify for benefits.

Applicants with a filing lag of more than 12 months were asked: "Some people apply for disability benefits immediately after they become disabled and others wait a while. Apparently you waited quite some time before you applied. Could you tell me something about why you waited until now to apply for benefits?"

Few applicants gave more than one reason. The

average was 1.1 reason. Table 9 shows that the most frequent reason—given by 39 percent of the claimants—was ignorance of the existence of the disability program. Expectation of recovery and/or return to work was the reason given by 31 percent. Only one other reason was mentioned with any degree of frequency. Fourteen percent of the claimants believed their disability might not be severe enough to qualify them.

Table 9 also shows that the reasons for delay given by younger workers differed from those given by older workers. More than half of the claimants under age 50 gave ignorance of the disability program as a reason for delay, compared with less than two-fifths of those aged 50 and older. Yet, only 1 percent of each group said they were aware of the program but did not know they could receive cash benefits. These differences are interesting in light of the fact that, until October 1960, cash benefits were payable only to disabled workers aged 50 and over. Before then, workers under age 50 were protected by the "disability freeze," which preserved their insured

TABLE 9.—Applicant's reason for delayed filing for disability benefits, by age

Applicant's reason for delay	Total	Aged	
		Under age 50	50 and over
Total number.....	1,596	600	996
Total percent ¹	100	100	100
Didn't know disability program existed.....	39	51	38
Knew of program but not about cash benefits.....	1	1	1
Didn't think had enough quarters of coverage.....	3	2	3
Didn't think was old enough to qualify.....	7	8	6
Thought other income would prevent receipt of disability benefits.....	5	5	4
Didn't think disability severe enough to qualify him.....	14	12	15
Expected to get better and/or return to work.....	31	28	35
Didn't need the money.....	3	2	4
Other.....	9	8	9
Don't know or don't remember.....	6	5	7

¹ Because applicants gave more than one reason, percentages add up to more than 100.

⁷ The survey findings based on the actual determinations of disability will be discussed in a follow-up report.

status so that nonemployment as a result of disability did not jeopardize future benefit rights.

Another interesting difference is found in the proportion of workers in each age group who reported that they expected to get better and/or return to work. Twenty-eight percent of the workers under age 50 gave this as a reason for delay, compared with 35 percent of those aged 50 and over. A difference in the other direction would be expected: It seems likely that the younger the worker, the more sanguine he would be about his prospects for medical and/or vocational recovery. Not only does he have relative youth in his favor, but the younger person tends to be better educated and also more likely to be suffering from a disorder with a fairly favorable prognosis—for example, tuberculosis. In fact, from other data it is known that the younger people on the disability rolls exhibit higher rates of recovery.

The answer may possibly be that claimants tend to evaluate their health status in terms of the health of others in their own age group. In consequence, younger workers may feel relatively worse off and may therefore be less optimistic about prospects for recovery than older persons, who expect at least some ill health merely because of their age. But if the figures presented here are reliable, there is really no ready explanation at hand.

In sum, the data suggest at least two types of claimant who delay filing for disability benefits:

TABLE 10.—Applicant's reason for filing for disability benefits when he did, by age

Applicant's reason for filing	Total	Under age 50	Aged 50 and over
Total number.....	5,358	1,859	3,499
Total percent ¹	100	100	100
Found out disability program existed.....	23	29	20
Had known about program but found out about cash benefits.....	1	1	1
Came to apply for old-age benefits and was advised to file for disability benefits.....	4	(²)	7
Found out had enough quarters of coverage.....	1	1	1
Found out was old enough to qualify.....	2	3	1
Found out other income would not prevent receipt of disability benefits.....	1	1	1
Found out disability severe enough to qualify him after thinking it wasn't.....	9	7	10
Thought disability getting worse or not improving as expected and/or realized could not return to work.....	30	25	33
Advised to file.....	57	59	55
Needed the money.....	24	25	23
Other.....	3	3	3
Unknown.....	1	1	1

¹ Because applicants gave more than one reason, percentages add up to more than 100.

² Less than 0.5 percent.

(1) those delaying because of ignorance of the program, and (2) those who are aware of the program but who delay in the hope that their disabilities will improve to the point where they can return to gainful employment. Ways of reaching the two types, of course, differ. In the first instance, the problem is one of disseminating information about the program; in the second, the problem would seem to be to encourage earlier filing without, at the same time, reducing the motivation to return to gainful employment.

The category that thinks their disabilities are not severe enough to qualify them may be a third type or may be a mixture of types (1) and (2). When the data on disability allowances and denials are available and cross-tabulated with data from the interview schedules, it will be possible to determine whether those who stated their condition was not severe enough to permit them to qualify were actually cases of marginal disability or whether they involved misconceptions about the severity of disability required by the law.

PRECIPITATING REASONS FOR FILING

The reasons that inhibit an individual from filing a timely claim for disability benefits differ, of course, from those that eventually stimulate an application. For example, a worker may delay filing principally because he expects to recover. Yet the precipitating factor in his application may be the depletion of economic resources. Because of this possibility, claimants were asked: "We often wonder just what causes a person to file for benefits at a certain time. Was there any special reason that made you decide to file for benefits now?"

Applicants averaged 1.6 reasons per person. Only four reasons were reported with much frequency (table 10). The claimant was advised to file (57 percent); believed his disability was getting worse or not improving and/or realized he couldn't return to work (30 percent); needed the money (24 percent); and found out about the existence of the disability program (23 percent).

Claimants stating that they had filed when they did because they had been advised to do so were asked to specify from whom the advice came. Here too, advice to file came most often (for 23 percent of the persons advised to file) from physi-

cians. Other sources of advice mentioned, in order of frequency, were:

Source	Percent
Friend, neighbor, acquaintance, or coworker	16
District office contact	16
Public assistance or other welfare agency	15
Employer	8
Relative	6
Spouse	5
Veterans Administration	5

Exploration of reasons for filing, by age, reveals only two differences of interest. Persons under age 50 were somewhat more likely than older workers to mention discovery of the existence of the disability program as a precipitating reason for filing (29 percent compared with 20 percent) and were somewhat less likely to report that they realized their disabilities were getting worse or not improving as expected (25 percent compared with 33 percent). For both age groups, however, the reason for filing given most frequently was "advised to file"; this reason was cited by 59 percent of those under age 50 and 55 percent of those aged 50 and over.

Table 11 shows the extent of delay according to the four most frequent reasons given for filing. In general, there is little variation in the proportion filing for benefits within the first 12 months after the onset of the disability. Among persons filing because they needed the money there is a pronounced tendency, however, to file before the nineteenth month of disability. Only 7 percent of the claimants giving this reason for filing waited more than 18 months after becoming disabled. In contrast, a delay of more than 18 months was reported by 16 percent of those who realized that their disabilities were not getting better or were worsening, 18 percent of those who

TABLE 11.—Filing lag, by applicant's reason for filing when he did

Applicant's reason for filing	Number	Percentage distribution, by filing lag (number of months)					Un-known
		Total	6 or less	More than 6, up to 12	More than 12, up to 18	More than 18	
Found out disability program existed	1,247	100	37	26	13	22	2
Thought disability getting worse or not improving as expected and/or realized could not return to work	1,612	100	43	28	11	16	2
Advised to file	3,050	100	43	26	11	18	2
Needed the money	1,209	100	42	28	21	7	2

TABLE 12.—Filing lag for applicants who stated they were advised to file, by source of advice

Source of advice	Number	Percentage distribution, by filing lag (number of months)					Un-known
		Total	6 or less	More than 6, up to 12	More than 12, up to 18	More than 18	
Public assistance or voluntary welfare agency	457	100	34	23	13	28	2
Veterans Administration	167	100	42	20	13	23	2
Union	39	100	59	31	5	5	0
Employer	241	100	56	24	13	5	2
Spouse	159	100	40	33	11	15	1
Relative other than spouse	189	100	37	22	12	26	3
Friend, neighbor, acquaintance, or coworker	476	100	32	31	12	23	2
Doctor	689	100	53	25	8	11	3
Social security representative	471	100	46	25	9	18	2
Other	162	100	31	36	14	17	2

were advised to file, and 22 percent of those who discovered the existence of the disability program.

The filing lag is shown in table 12 by source of advice for those claimants who mentioned advice from a particular source as a precipitating cause for filing. The findings are consistent with earlier results; claims filed on the advice of a doctor, labor union, or employer were most likely to be made soon after the onset of the disability, and claims filed on the advice of a welfare agency were more likely to be delayed. Specifically, 28 percent of the latter group were filed more than 18 months after the onset of the disability, in contrast to 5 percent of those advised to file by their employer, 5 percent of those advised by their union, and 11 percent of those advised by their doctor.

RECEIPT OF BENEFITS UNDER OTHER PROGRAMS

A significant proportion of the claimants for disability benefits under OASDI reported they were already receiving (or had received) other payments because of their disability (under workmen's compensation, public assistance, a private pension plan, etc.). Only payments received since the date given for the onset of the disability are considered here. The most frequently reported types of payment are shown below.

Source	Percent
Employer plan	16
Unemployment insurance	10
Public assistance	10
Veterans Administration	8
Workmen's compensation	7
Private insurance plan	7
State temporary disability insurance	6
Union plan	3

TABLE 13. Filing lag for applicants for disability benefits, by receipt of disability payments from other source

Receipt of benefit and source	Number	Percentage distribution, by filing lag (number of months)					Un-known
		Total	6 or less	More than 6, up to 12	More than 12, up to 18	More than 18	
Public assistance or voluntary welfare agency:							
Receiving.....	554	100	32	24	14	27	3
Not receiving.....	4,777	100	43	27	10	18	2
Unemployment insurance:							
Receiving.....	541	100	25	29	15	29	2
Not receiving.....	4,790	100	43	27	10	18	2
Veterans Administration:							
Receiving.....	402	100	34	23	12	28	3
Not receiving.....	4,929	100	42	27	11	18	2
State temporary disability insurance program:							
Receiving.....	346	100	37	36	13	13	1
Not receiving.....	4,985	100	42	26	11	19	2
Workmen's compensation:							
Receiving.....	363	100	21	31	15	31	2
Not receiving.....	4,968	100	42	27	11	18	2
Employer plan:							
Receiving.....	831	100	50	30	10	9	1
Not receiving.....	4,500	100	40	26	11	21	2
Union plan:							
Receiving.....	172	100	48	35	8	8	1
Not receiving.....	5,159	100	41	27	11	19	2
Private insurance plan:							
Receiving.....	373	100	46	31	9	13	1
Not receiving.....	4,957	100	41	27	11	19	2

Table 13 cross-tabulates payments received under other programs according to the lag in filing for disability benefits under OASDI. It can be seen that the promptness with which a claimant filed for disability benefits did not depend on the receipt of other payments in itself but rather on the type of payment received.⁸

Claimants reporting that they received workmen's compensation, unemployment insurance, Veterans Administration payments, or public assistance were less likely to file early, and those receiving benefits from an employer or union were more likely to file early. Receipt of private insurance payments or State temporary disability benefits did not affect the time of filing. The relationships become more apparent with study of the proportion of claimants waiting less than 6 months and more than 18 months to file an application for disability benefits under the Social Security Act among those who also received payments from some other source. Most striking is the fact that those receiving payments from sources of a public character show the greatest delays in filing. Apparently many claimants do

⁸ Delays in filing are also likely to be related to the amount of any other payment. The final report will present more detailed data in this area and on the number of claimants receiving benefits from more than one program.

not initiate a disability claim until benefits from another public source have been fully exhausted or until they learn they can collect multiple benefits. There is also, of course, the possibility that those who apply first for disability benefits under the Social Security Act may delay applying for other public payments to which they are entitled.

Even among those collecting benefits from public sources there is considerable variation in the filing lag. The lag for the unemployment insurance group is perhaps most easily explained. To be eligible for such benefits requires that the worker be in the market for another job. Filing for disability benefits under OASDI before these benefits are exhausted may appear to be irregular, since the applicant is required to state that he cannot work. As far as workmen's compensation is concerned, there was formerly an offset provision in the Social Security Act, and confusion may still exist concerning dual entitlement.

SUMMARY OF MAJOR FINDINGS

There seem to be two major types of claimants who delay filing for disability benefits: (1) those whose delay arises out of ignorance of the existence of the disability program (about 46 percent in the sample study) and (2) those who are aware of the program but whose delay stems from an expectation of recovery and return to work (about 30 percent). Only one other reason was mentioned with any frequency: 14 percent believed their disability might not be severe enough to permit them to qualify. Whether this group constitutes a third type of "delayed filer" or is a mixture of the first and second types cannot be determined without knowledge of the adjudicative outcome.

With the first type of delayed filer, the problem is one of communicating information about the program and possible benefit rights. With the second type, the problem is one of psychological communication: While the worker should be encouraged to file early, his expectation of recovery must not be dampened to the point where he yields to his disability.

"Word of mouth" advice from personal sources is probably the most common channel of information about the disability program. (Almost half the claimants in the survey said that they first heard about the program from such a source.)

Actually, personal advice is a less compelling means of stimulating prompt application than the advice of the individual's physician, his employer, or union officials. For example, only 5 percent of those advised to file by their employer or union and 11 percent of those advised to file by their physicians waited more than 18 months to do so, in contrast to 19 percent for the sample as a whole.

Information received from public assistance and other welfare agencies is least likely to be associated with early filing. More than a fourth of those advised to file by such a source waited more than 18 months. It is probable that claimants who come into contact with such agencies do so when their disabilities are already well advanced.

Claimants receiving benefits from some other

public program because of their disability are least likely to file a prompt claim for disability benefits under OASDI. Those with benefits from a private insurance, union, or employer plan are most likely to file promptly. Of the claimants reporting that they received workmen's compensation, unemployment insurance, or Veterans Administration benefits or public assistance payments, the proportion filing within the first 6 months after the onset of disability ranged from a fifth to a third. In contrast, almost half those who reported that they were receiving benefits from a private insurance, union, or employer plan filed within the 6 months. Apparently many disabled workers do not initiate a claim under OASDI until benefits from other public programs have been fully exhausted or until they learn they can collect multiple benefits.

Notes and Brief Reports

Persons Receiving Payments From Public Programs for Long-Term Disability, December 1939-63*

During the past decade there has been a substantial increase in the number of persons receiving cash benefits or payments for long-term total disability under public income-maintenance programs. As of December 1963, about 1.8 million persons aged 14-64 were receiving such benefits. They represented 54 percent of the estimated 3.3 million persons in the population with long-term disabilities (of more than 6 months' duration), including those in institutions. In December 1954 only about 30 percent of the Nation's long-term disabled were receiving support from public programs, as shown in the accompanying table.

Largely responsible for this dramatic change is the old-age, survivors, and disability insurance (OASDI) program, which initiated payments to the severely disabled in 1957. By the end of 1963, roughly 1 million persons were receiving disability benefits through the insurance system. They represented three-tenths of all persons aged

14-64 with long-term disabilities and 55 percent of those receiving disability benefits from any public program.

PROGRAM DEVELOPMENTS

Before World War II, disability protection through public programs was confined to workmen's compensation and to programs for select groups in the population—veterans, railroad workers, the Armed Forces, civilian government employees, and the needy blind. Cash payments for long-term disability were made under such provisions in December 1939 to about 290,000 persons, or a little more than one-tenth of the Nation's long-term disabled aged 14-64.

During the next 10 years, with the attention of the country largely directed toward foreign affairs, no additional public income-maintenance programs for persons with a protracted disability were introduced. The number of beneficiaries under existing programs, however, had almost doubled by December 1949 and constituted almost one-fifth of the long-term disabled population. The primary reason was the rapid increase in the number of totally disabled persons receiving veterans' pensions or compensation (defined here as those with disability ratings of 70 percent or more).

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