

National Compensation Survey: Employee Benefits in Private Industry in the United States, 2005



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Preface

This bulletin presents findings of the 2005 National Compensation Survey (NCS) regarding detailed provisions of healthcare and retirement plans in private industry conducted by the U.S. Bureau of Labor Statistics (BLS). Data on incidence and provisions of selected benefit plans have been published separately; the latest release, March 2006, can be found at the BLS Web site at www.bls.gov/ncs/ebs/sp/ebsm0004.pdf.

The public may access other NCS benefit incidence and provisions data through the BLS Web site at www.bls.gov/ncs/ebs/home.htm. Questions on the data in this publication should be referred to the staff of the NCS at (202) 606-6199 or via E-mail: NCSINFO@bls.gov. Sensory-impaired individuals may obtain information upon request. Voice phone: (202) 691-5200; Federal Relay Service: 1-800-877-8339.

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Introduction

This bulletin includes data on detailed provisions of healthcare and retirement plans offered as employee benefits in private industry establishments. The period for compiling these data was June 2004 through December

2005; thus, they have a 2005 reference date. Chapter 1 presents information on healthcare benefits, and chapter 2, on defined benefit and defined contribution retirement plans.

A note on the tables

Interpreting the tables in terms of the group of employees described is the key to understanding and correctly using the data. Most of the tables in the bulletin exhibit the percentage of all employees with access to, or participating in, a particular benefit plan or the percentage covered by a specific provision. For example, table 1 indicates the percentage of all workers participating in a medical plan by the type of fee arrangement and financial intermediary. Indemnity or fee-for-service plans account for 76 percent of participants and prepaid or HMO plans for 24 percent of participants. Other tables provide information on workers participating in a plan, along with information on particular features of the plan. For example, table 18 indicates that 71 percent of workers in prepaid plans have inpatient surgery costs covered in full while 29 percent are subject to limits. In this case, the title reads “Prepaid plans.” The “total” line in table 18 (100 percent) represents all workers in prepaid plans. All other figures shown in this table are percentages of this subset of workers.

Another type of table contains data on average values—for example, an average annual deductible or a lifetime maximum. In these tables, the average value shown is based only on those who were affected by the provision; employees without such coverage were not included in the calculation of an average value. In table 7, for example, the calculation of the average deductible is based on workers required to pay a deductible. A careful reading of the title, column and row headings of each table will help clarify its content. More detail on the calculation of benefit participation percentages and benefit provision averages is given in appendix A.

Chapter 1. Health Benefits

The National Compensation Survey collects information on a variety of health benefits, including medical, prescription drug, dental, and vision care. Definitions of major types of plans, key provisions, and related terms follow.

Medical Care

Medical care plans provide services or payments for services rendered in the hospital or by a qualified medical care provider. Those plans that provide only dental, vision, or prescription drug coverage are tabulated separately and described in their own sections.

Plans and systems

Indemnity plan. This type of medical plan reimburses the patient or the provider as expenses are incurred.

Traditional indemnity plan. A traditional indemnity medical plan allows the participant the choice of any provider, without affecting reimbursement. This type of plan reimburses the patient or the provider as expenses are incurred.

Indemnity in and outside of network plan (formerly called a preferred provider organization or PPO plan). This kind of indemnity plan provides coverage to participants through a network of selected healthcare providers. Enrollees may receive services outside the network, but at higher costs. The additional costs may be in the form of higher deductibles or coinsurance rates, or both, or non-discounted charges from providers. Under this type of plan, there may be a requirement to obtain a primary care physician's referral prior to obtaining medical care from a specialist. If this requirement is not met, benefits may be reduced.

Prepaid plan, or a Health Maintenance Organization (HMO). A prepaid or HMO healthcare plan that assumes both the financial risks associated with providing comprehensive medical services and the responsibility for healthcare delivery in a particular geographic area, usually in return for a fixed, prepaid fee from members.

Prepaid in network (traditional HMO). This kind of plan provides no benefits for services obtained outside the network.

Prepaid in and outside of network (Point of Service HMO). A POS plan is an HMO/PPO hybrid. POS plans resemble

HMOs for in-network services. Services received outside the network are usually reimbursed in a manner similar to traditional indemnity plans (e.g., provider reimbursement based on a fee schedule or on what the insurer considers "usual, customary, and reasonable" charges).

Network model HMO. An HMO contracts with multiple physician groups to provide services to its members. The physician groups may involve large single- and multispecialty groups and may provide services to both HMO and non-HMO plan participants.

Group/Staff HMO. This is a type of closed-panel HMO, meaning patients can receive services only through a limited number of providers. Under this type of plan, physicians are employees of the HMO, and they see patients in the HMO's own facilities.

Individual Practice Association (IPA) HMO. An IPA is composed of a group of independent practicing physicians, who maintain their own offices and band together to contract their services to HMOs. An IPA may contract with and provide services to both HMO and non-HMO plan participants.

Mixed-model HMO. An HMO initially adopts one type of model, such as a group/staff model, and then expands its capacity or its geographic region by adding another type of model, such as an independent practice association (IPA) HMO.

Limitations on coverage

Maximum dollar limit. This refers to the maximum amount payable by the insurer for covered expenses for the enrollee and each covered dependent while enrolled in the health plan. Plans can have a yearly or a lifetime maximum dollar limit. The most typical maximum limit is a lifetime amount of \$1 million per individual.

Maximum out-of-pocket expense. This is a limit on the dollar amount that a group member is required to pay out of pocket during the benefit period. Until this maximum is met, the plan and the member share the cost of covered expenses. After the maximum is reached, the insurance carrier pays all covered expenses, often up to a lifetime maximum.

Deductible. The deductible is a fixed dollar amount that the enrollee pays during the benefit period—usually a year—be-

fore the insurer starts to make payments for covered medical services. Plans may have both individual and family deductibles. Some plans have separate deductibles for specific services. For example, a plan may have a hospitalization deductible per admission. Deductibles may differ between services received from an approved provider—that is, a provider with whom the insurer has a contract or an agreement specifying payment levels and other requirements—and those received from providers not on the approved list.

Coinsurance. This form of medical cost sharing requires an enrollee to pay a stated percentage of medical expenses after the deductible amount, if any, is paid. After any deductible amount and coinsurance are paid, the insurer is responsible for the rest of the reimbursement for covered benefits, up to the maximum allowed charges. The individual is responsible for any charges in excess of what the insurer determines to be “usual, customary, and reasonable.” Coinsurance rates may differ between services received from an approved provider and those received by providers not on the approved list.

Overall limits. These are restrictions that apply to all or most benefits under the plan, as opposed to selected individual benefits—for example—a \$300 per year deductible that must be paid before medical expenses become eligible for reimbursement. Another example would be an 80-percent coinsurance that applies to all categories of care except outpatient surgery.

Internal limits. An internal limit applies to individual categories of care—for example, a \$250 per procedure deductible for in-patient surgery.

Alternatives to hospitalization

Alternatives to hospitalization are offered as a means of reducing costs.

Extended-care facilities. These facilities provide skilled nursing care, rehabilitation, and convalescent services to patients who require less intensive treatment than that provided in a hospital.

Home health care. These services provide skilled nursing and related care to patients in their own homes.

Hospice care. These programs provide nursing care and psychological support to terminally ill patients and their families, either on an inpatient basis or in the patient’s home.

Mental health and substance abuse treatment

These services include inpatient and outpatient care for psychiatric conditions and alcohol or drug dependency. The coverage is generally more restrictive than that for general medical conditions.

Detoxification. This treatment involves supervised care by medical personnel that is designed to reduce or eliminate the

symptoms of chemical dependency. Treatment can occur on an inpatient or an outpatient basis.

Rehabilitation. These services are intended to alter the behavior of substance abusers and usually are provided after detoxification is complete. Services can be provided on an inpatient or outpatient basis.

Related terms

Premium. A premium is the fee paid for coverage of medical benefits for a defined period. Premiums can be paid by employers, unions, or employees or can be shared by the enrollee and the plan sponsor.

Self-insured plan. Under this type of plan, employers directly assume the major cost of health insurance for their employees. Some self-insured plans bear the entire risk. Other self-insured employers insure against large claims by purchasing stop-loss coverage. Some self-insured employers contract with insurance carriers or third-party administrators for claims processing and other administrative services; other self-insured plans are self-administered.

Administrative services only (ASO). Under this type of plan, a third party disburses the employer’s funds to pay claims and handle other administrative details.

Insured plan. The employer contracts with another organization to assume financial responsibility for the costs of enrollees’ medical claims.

Prescription Drugs

Prescription drug plans provide coverage for outpatient prescription drugs. Prescription drugs dispensed during a hospital stay are covered as hospital miscellaneous charges.

Name-brand drugs. These are drugs that once were, or still are, under patents.

Generic drugs. These are drugs that are not under patent. Once a drug’s patent has expired, some plans provide more generous coverage for same-formula generic drugs than for name-brand drugs; the practice is adopted as a cost containment measure.

Mail-order drugs. These are drugs that can be ordered through the mail. As a cost containment measure, some plans use mail-order pharmacies that typically provide 3-month supplies of maintenance drugs.

Formulary drugs. These are drugs approved by the health-care provider. Drugs not approved by the healthcare provider are nonformulary drugs, for which enrollees receive less generous benefits, such as a higher per prescription copayment.

Dental Care

Dental care plans provide services or payments for preventive and restorative care and related dental services.

Preventive services. Such services include routine exams and x rays.

Restorative services. These services include fillings, dental surgery, endodontics (root canal therapy), periodontics (treatment for gum disease), crowns, and prosthetics

(replacement of missing teeth with bridgework or dentures).

Orthodontia services. These are services for the correction of malpositioned teeth.

Vision Care

Vision care plans provide coverage for eyeglasses, eye exams, and contact lenses. Coverage is typically limited and is subject to applicable copayments or scheduled cash allowances.

Table 1. Medical care benefits: Fee arrangement and financial intermediary, all private industry workers, National Compensation Survey, 2005

Fee arrangement	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Indemnity										
Total	76	72	83	72	84	72	73	77	77	75
Self insured	32	30	38	27	37	30	25	38	39	31
With administrative services only contract	24	24	25	22	26	23	17	30	21	25
Without administrative services only contract	6	4	11	5	9	5	6	7	15	5
Not determinable	2	2	2	1	2	2	2	2	3	2
Insured	43	42	45	44	47	42	48	39	38	44
Combined financed	(¹)	(¹)	(¹)	(¹)	-	(¹)	-	1	-	(¹)
Traditional indemnity										
Total	7	6	10	-	10	6	7	7	17	6
Self insured	3	2	6	-	5	3	4	3	11	2
With administrative services only contract	2	2	3	-	4	1	2	2	4	2
Without administrative services only contract	1	(¹)	3	-	(¹)	1	2	1	6	(¹)
Not determinable	(¹)	(¹)	1	-	1	(¹)	(¹)	(¹)	1	(¹)
Insured	4	4	4	-	5	4	3	4	6	4
Indemnity in and outside of network										
Total	64	62	69	62	71	62	62	66	57	66
Self insured	27	25	32	22	32	25	19	33	26	27
With administrative services only contract	20	20	22	17	22	20	14	26	16	21
Without administrative services only contract	5	4	8	5	9	4	4	6	9	4
Not determinable	2	2	1	(¹)	1	2	2	1	2	1
Insured	37	37	37	40	39	37	43	33	30	38
Combined financed	(¹)	(¹)	(¹)	(¹)	-	(¹)	-	1	-	(¹)
Indemnity in and outside of network without primary care physician										
Total	51	50	54	52	56	49	50	52	45	52
Self insured	21	19	25	17	26	19	13	27	21	21
With administrative services only contract	16	15	18	12	18	15	9	21	11	16
Without administrative services only contract	4	2	6	4	7	3	2	5	8	3
Not determinable	1	2	1	(¹)	1	1	2	1	2	1
Insured	30	30	28	35	30	30	37	25	24	31
Combined financed	(¹)	(¹)	-	-	-	(¹)	-	(¹)	-	(¹)
Indemnity in and outside of network with primary care physician										
Total	13	13	15	-	14	13	12	14	-	13
Self insured	6	6	6	-	6	6	6	6	-	6
With administrative services only contract	5	5	4	-	4	5	5	5	-	5
Without administrative services only contract	1	1	2	-	2	1	1	1	-	1
Not determinable	(¹)	(¹)	-	-	-	(¹)	-	(¹)	-	(¹)
Insured	7	6	8	-	8	6	6	8	-	7
Combined financed	(¹)	(¹)	(¹)	-	-	(¹)	-	1	-	(¹)
Other²										
Total	4	3	4	4	4	4	4	4	4	4

See footnotes at end of table.

Table 1. Medical care benefits: Fee arrangement and financial intermediary, all private industry workers, National Compensation Survey, 2005
— Continued

Fee arrangement	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Prepaid										
Total	24	28	17	28	16	28	27	23	23	25
Self insured	2	3	(¹)	4	1	2	1	3	1	2
Insured	22	25	17	24	15	25	26	20	22	22
Prepaid in network only										
Total	21	24	14	25	13	24	24	19	20	21
Self insured	2	2	(¹)	4	1	2	1	3	1	2
Insured	19	22	13	21	12	22	23	16	19	19
Prepaid in and outside of network										
Total	4	4	3	4	3	4	3	4	3	4
Self insured	(¹)	(¹)	-	(¹)	(¹)	(¹)	(¹)	(¹)	-	(¹)
Insured	3	4	3	3	3	3	3	4	3	3

¹ Less than 0.5 percent.

² Includes exclusive provider organizations, which are groups of hospitals and physicians that contract to provide comprehensive medical services. Participants are required to obtain services from members of the organization in order to receive plan benefits.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 2. Medical care benefits: Coverage for selected services by type of plan, all private industry workers, National Compensation Survey, 2005

Type of plan and service	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
All plans										
Total	100	100	100	100	100	100	100	100	100	100
Hospital room and board	100	100	100	100	100	100	100	100	100	100
Inpatient surgery	97	97	98	95	97	97	97	96	94	97
Outpatient surgery ¹	97	97	98	95	97	97	98	96	94	98
Office physician visit	99	100	99	100	98	100	99	99	99	99
Extended care ²	77	75	79	76	77	76	75	78	72	77
Home health care ²	81	79	85	78	85	79	79	82	75	82
Inpatient hospice	72	71	75	67	79	69	69	75	65	74
Home hospice	13	12	16	9	17	12	11	15	15	13
Inpatient mental	93	93	94	92	93	93	90	96	93	93
Outpatient mental	90	89	91	93	89	91	87	93	92	90
Inpatient alcohol detoxification ³	97	97	97	98	97	97	96	97	98	97
Inpatient alcohol rehabilitation ⁴	84	83	84	89	83	84	80	87	87	83
Outpatient alcohol rehabilitation ⁴	84	83	84	87	81	84	80	86	87	83
Inpatient drug detoxification ³	97	97	97	98	97	97	96	97	98	97
Inpatient drug rehabilitation ³	84	83	84	89	83	84	80	87	86	83
Outpatient drug rehabilitation ⁴	83	83	84	86	81	84	80	86	86	83
Hearing care ⁵	25	28	21	20	21	27	28	23	29	24
Adult physical exams	76	79	70	79	72	77	73	78	66	77
Well baby care	76	77	73	79	75	76	72	80	68	77
Adult immunization and inoculation ...	55	56	53	56	52	56	54	56	55	55
Indemnity plans										
Total	100	100	100	100	100	100	100	100	100	100
Hospital room and board	100	100	100	100	100	100	100	100	100	100
Inpatient surgery	96	96	98	93	97	96	97	96	92	97
Outpatient surgery ¹	97	96	98	94	97	96	98	96	92	97
Office physician visit	99	99	99	100	98	100	99	99	99	99
Extended care ²	79	78	80	79	78	79	78	79	72	80
Home health care ²	81	78	84	81	83	79	78	83	75	82
Inpatient hospice	77	77	80	66	81	74	75	78	68	78
Home hospice	16	16	18	10	19	14	14	17	18	16
Inpatient mental	93	93	94	93	93	94	90	96	92	94
Outpatient mental	90	88	91	95	90	90	86	93	93	89
Inpatient alcohol detoxification ³	97	97	96	98	96	97	96	97	97	97
Inpatient alcohol rehabilitation ⁴	87	85	87	92	86	87	83	89	91	86
Outpatient alcohol rehabilitation ⁴	86	85	86	89	84	86	82	88	90	85
Inpatient drug detoxification ³	97	97	96	98	96	97	96	97	97	97
Inpatient drug rehabilitation ³	87	85	87	92	86	87	83	89	91	86
Outpatient drug rehabilitation ⁴	85	85	86	87	84	86	82	88	88	85
Hearing care ⁵	16	18	14	12	15	16	15	17	22	15
Adult physical exams	73	75	67	78	70	74	68	76	61	75
Well baby care	74	75	71	77	75	74	67	79	64	76
Adult immunization and inoculation ...	51	52	49	51	48	52	49	52	48	51

See footnotes at end of table.

Table 2. Medical care benefits: Coverage for selected services by type of plan, all private industry workers, National Compensation Survey, 2005 — Continued

Type of plan and service	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Prepaid plans										
Total	100	100	100	100	100	100	100	100	100	100
Hospital room and board	100	100	100	100	100	100	100	100	100	100
Inpatient surgery	98	97	97	100	95	98	97	98	99	97
Outpatient surgery ¹	98	98	97	99	95	99	99	98	100	98
Office physician visit	100	100	100	99	100	100	100	100	100	100
Extended care ²	70	69	75	69	75	69	67	73	71	70
Home health care ²	82	83	89	70	92	80	84	81	75	84
Inpatient hospice	58	58	54	68	67	56	54	63	52	59
Inpatient mental	93	92	95	91	92	93	89	96	93	93
Outpatient mental	91	91	91	90	88	92	92	91	87	92
Inpatient alcohol detoxification ³	97	97	98	99	98	97	96	99	100	97
Inpatient alcohol rehabilitation ⁴	76	76	70	82	66	78	73	78	72	76
Outpatient alcohol rehabilitation ⁴	77	77	76	82	69	79	77	78	78	77
Inpatient drug detoxification ³	97	97	98	99	98	97	96	99	100	97
Inpatient drug rehabilitation ³	75	76	69	82	64	78	73	77	71	76
Outpatient drug rehabilitation ⁴	78	77	76	82	69	79	77	78	78	77
Hearing care ⁵	52	53	56	42	50	53	63	42	52	52
Adult physical exams	85	87	84	80	80	87	89	82	84	86
Well baby care	82	82	82	81	77	83	84	80	82	82
Adult immunization and inoculation ...	67	65	73	68	71	67	67	67	78	66

¹ Charges incurred in the outpatient department of a hospital and outside the hospital.

² Some plans provide this care only to a patient who was previously hospitalized and is recovering without need of the extensive care provided by a general hospital.

³ Detoxification is the systematic use of medication and other methods under medical supervision, to reduce or eliminate the effects of substance abuse.

⁴ Rehabilitation is designed to alter abusive behavior in patients once they are free of acute physical and mental complications.

⁵ Plans provide, at a minimum, coverage for hearing examination expenses.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 3. Medical care benefits: Copayment provisions for hospital room and board by plan type, all private industry workers, National Compensation Survey, 2005

Plan type and copayment provision	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Indemnity										
Total ¹	100	100	100	100	100	100	100	100	100	100
Per confinement	88	90	80	97	74	93	85	89	91	87
Less than \$100	1	1	2	-	(²)	2	2	1	4	1
\$100	20	22	16	21	12	23	13	23	22	19
\$101-\$199	6	10	2	3	7	6	11	4	4	7
\$200	12	15	6	17	4	15	7	15	9	13
\$201-\$249	(²)	(²)	-	-	(²)	-	-	(²)	(²)	(²)
\$250	22	23	20	25	23	22	19	24	19	23
\$251-\$499	13	8	18	17	10	13	13	12	12	13
\$500	11	8	13	14	12	10	12	10	20	9
Greater than \$500	2	2	4	1	6	1	7	(²)	1	3
Unspecified amount	(²)	(²)	-	-	-	(²)	(²)	(²)	-	(²)
Limited to maximum dollar copayment amount per year ³	6	8	4	2	6	6	5	6	11	5
Copayment per year	7	4	14	1	18	3	2	10	2	8
Copayment per day	8	8	12	2	13	6	15	5	18	7
Copayment limited to a specified number of days	7	6	12	1	13	5	14	4	18	5
Prepaid										
Total ¹	100	100	100	-	100	100	100	100	-	100
Per confinement	84	85	84	-	70	87	93	76	-	84
Less than \$100	1	2	(²)	-	-	1	-	2	-	1
\$100	15	18	10	-	8	17	16	15	-	16
\$101-\$199	6	4	5	-	5	6	4	8	-	4
\$200	2	1	4	-	4	1	1	3	-	2
\$201-\$249	3	4	1	-	2	3	2	3	-	3
\$250	31	32	31	-	22	33	37	25	-	31
\$251-\$499	9	9	11	-	14	8	9	8	-	8
\$500	13	13	15	-	4	14	15	10	-	13
Greater than \$500	3	2	8	-	12	2	5	1	-	4
Unspecified amount	2	(²)	-	-	(²)	3	4	(²)	-	2
Limited to maximum dollar copayment amount per year ³	12	12	12	-	3	14	9	15	-	12
Copayment per year	1	1	(²)	-	1	1	(²)	2	-	1
Copayment per day	15	14	16	-	29	13	8	23	-	16
Copayment limited to a specified number of days	8	10	3	-	8	8	4	12	-	9

¹ Sum of individual items is greater than the total because some participants were in plans with more than one type of copayment.

² Less than 0.5 percent.

³ Limits placed on the maximum copayment an individual pays during the year. For example, an individual is subject to a copayment of \$100 per confinement with a

limit of \$300 per year.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 4. Medical care benefits: Relationship between alcohol and drug abuse treatment provisions in indemnity and prepaid plans, all private industry workers, National Compensation Survey, 2005

Coverage	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total ¹	100	100	100	100	100	100	100	100	100	100
Covered together ²	75	75	74	81	72	76	73	77	72	76
Covered separately but with the same limits ³	3	3	4	3	2	4	3	4	7	2
Other ⁴	18	20	17	13	22	17	18	18	17	18
Alcohol and drug abuse treatment not covered	1	1	1	1	(⁵)	1	1	1	1	1
Not determinable	3	2	4	2	4	2	5	1	3	3

¹ Includes workers in all medical plans.

² These are plans in which all limits that apply to alcohol abuse treatment also apply to drug abuse treatment. When care is received for one of these types of treatment, it reduces the availability of care from the other. For example, if alcohol and drug abuse treatments are limited to 30 days per year and 20 days are used for alcohol abuse treatment, then there are 10 days left for drug abuse treatment.

³ These are plans in which alcohol and drug abuse treatments are subject to separate, but identical, limits. For example, alcohol abuse treatment is limited to 30

days per year and drug abuse treatment is limited to a separate 30 days per year.

⁴ Includes plans in which alcohol abuse treatment coverage differs from drug abuse treatment coverage.

⁵ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 5. Indemnity plans: Coverage for selected services, all private industry workers, National Compensation Survey, 2005

Category of care and extent of coverage	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Hospital room and board										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	9	8	9	9	9	9	7	10	13	8
Subject to internal limits only ¹	6	6	6	9	6	6	5	7	8	6
Subject to internal and overall limits	17	16	17	24	16	18	15	19	22	17
Subject to overall limits only ²	68	70	67	59	70	67	73	64	57	70
Internal limits										
Dollar deductible	19	19	18	26	17	20	15	23	17	20
Dollar limits	1	(³)	(³)	3	(³)	1	1	(³)	2	(³)
Separate coinsurance	1	1	2	2	2	1	2	1	3	1
Other limit	1	1	1	(³)	(³)	1	2	(³)	1	1
Limits not determinable	(³)	-	(³)	3	-	1	-	1	2	(³)
Inpatient surgery										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	14	13	13	18	13	14	11	16	26	12
Subject to internal limits only ¹	3	3	2	4	2	3	2	3	1	3
Subject to internal and overall limits	5	2	8	8	8	3	4	6	4	5
Subject to overall limits only ²	79	81	77	69	77	79	84	75	69	80
Internal limits										
Dollar limits	2	(³)	5	(³)	5	(³)	-	3	1	2
Separate coinsurance	1	1	2	3	2	1	1	2	3	1
Other limit	4	4	3	9	3	5	5	4	1	5
Limits not determinable	(³)	(³)	-	(³)	-	(³)	-	(³)	-	(³)
Outpatient surgery⁴										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	12	12	10	17	13	12	8	15	19	11
Subject to internal limits only ¹	5	5	4	8	3	6	4	6	3	5
Subject to internal and overall limits	9	6	13	8	12	7	6	10	10	8
Subject to overall limits only ²	74	77	73	67	72	75	81	69	68	75
Internal limits										
Dollar limits	1	(³)	3	(³)	3	(³)	-	2	1	1
Separate coinsurance	2	1	4	3	3	2	2	3	6	2
Deductible per surgery	7	6	8	7	6	8	5	8	6	7
Other limit	4	4	3	6	3	4	5	3	1	4
Limits not determinable	(³)	(³)	-	(³)	-	(³)	-	(³)	-	(³)
Office physician visits										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	1	2	1	3	1	2	2	1	2	1
Subject to internal limits only ¹	53	55	48	63	47	56	60	48	45	55
Subject to internal limits plus overall limits ..	26	25	27	25	30	24	23	28	18	27
Subject to overall limits only ²	20	19	24	9	22	18	16	22	35	17

¹ Internal limits apply to individual categories of care; for example, internal limits or benefits for hospitalization. Limits may be set in terms of dollar or day ceilings on benefits, a requirement that the participant pay a percentage of costs (coinsurance), or a requirement that the participant pay a specific amount (deductible or copayment) before reimbursement begins or services are rendered.

² Overall limits apply to all benefits under the plan, not selected individual benefits. Overall limits are (1) deductibles and coinsurance percentages that must be paid by the participant before any plan benefits begin, and (2) overall limits on

plan benefits that can be paid.

³ Less than 0.5 percent.

⁴ Charges incurred in the outpatient department of a hospital and outside the hospital.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 6. Indemnity plans in and outside of network: Summary of selected features, all private industry workers, National Compensation Survey, 2005

In-network incentives	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Service subject to in-network incentive										
Hospital room and board	96	95	96	98	95	96	96	96	96	96
Surgery	95	95	95	99	96	95	94	96	96	95
Office visit	93	94	92	92	92	93	92	94	86	94
Outpatient prescription drugs	25	28	21	19	15	29	20	28	29	24
Not determinable	2	2	2	(¹)	3	1	2	1	2	2
Type of in-network incentive										
Coinsurance rate differs ²	92	93	90	93	91	92	92	91	82	93
Lower annual deductible ³	47	50	44	48	45	49	42	51	38	49

¹ Less than 0.5 percent.

² The coinsurance rate is higher if services are received from an approved provider. For example, in-network physician office visits had a 90-percent coinsurance payment, while out-of-network visits had an 80-percent payment.

³ The deductible is lower if services are received from an approved provider. For example, the individual in-network annual deductible requirement is \$100, while

the out-of-network requirement is \$500.

NOTE: Sum of individual items is greater than total because some participants were in plans with more than one type of limit. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 7. Indemnity plans with overall limits: Average dollar limits, all private industry workers, National Compensation Survey, 2005

Characteristics	Annual deductible ¹		Annual out-of-pocket expense maximum ²		Lifetime maximum ³
	Individual	Family	Individual	Family	
All workers	\$460	\$1,128	\$1,898	\$3,892	\$2,061,872
Worker characteristics					
White collar	494	1,205	1,932	3,887	2,239,838
Blue collar	424	1,045	1,796	3,759	1,961,799
Service	411	1,015	2,100	4,519	1,563,479
Full time	464	1,132	1,901	3,894	2,103,430
Part time	371	1,047	1,843	3,864	1,347,793
Union	334	658	1,571	3,170	1,411,448
Nonunion	482	1,208	1,952	3,988	2,181,617
Average wage less than \$15 per hour ...	485	1,204	1,944	3,943	1,957,653
Average wage \$15 per hour or higher ...	438	1,067	1,860	3,851	2,148,431
Establishment characteristics					
Goods producing	420	1,027	1,779	3,643	2,026,540
Service producing	479	1,182	1,957	4,022	2,080,975
1 to 99 workers	549	1,400	2,069	4,186	2,687,703
100 workers or more	387	915	1,762	3,653	1,610,312
Geographic areas⁴					
Metropolitan areas	463	1,111	1,877	3,865	2,107,583
Nonmetropolitan areas	446	1,190	1,984	3,998	1,892,734
New England	463	1,118	2,219	4,733	1,657,165
Middle Atlantic	411	1,022	1,773	3,606	1,902,548
East North Central	382	930	1,541	3,237	2,208,982
West North Central	439	1,134	1,767	3,304	1,857,106
South Atlantic	492	1,169	1,993	3,807	1,932,361
East South Central	423	1,189	2,026	4,665	1,947,796
West South Central	552	1,395	1,907	4,034	2,293,383
Mountain	647	1,494	2,309	5,530	2,152,061
Pacific	388	956	2,027	4,168	2,227,387

¹ The deductible is the amount of covered expenses that an individual or family must pay before any charges are paid by the medical care plan. Deductibles that apply separately to a specific category of expense, such as a deductible for each hospital admission, were excluded from this tabulation.

² The out-of-pocket expense maximum is the amount an individual or a family must pay before the plan will pay 100 percent of additional charges. Deductible amounts were excluded from computation of the out-of-pocket dollar limits. Usually, out-of-pocket limits were specified on an annual basis. Charges for certain services, such as mental health care, may not be counted toward the out-of-pocket maximum.

³ The maximum is the total amount of expenses that the plan will pay. Maximum described is for each insured person. Where the maximum differed for employees and dependents, the employee maximum was tabulated.

⁴ The nine census divisions are defined as follows: New England: Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont; Middle Atlantic: New Jersey, New York, and Pennsylvania; East North Central: Illinois, Indiana, Michigan, Ohio, and Wisconsin; West North Central: Iowa, Kansas, Minnesota, Missouri, Nebraska, North Dakota, and South Dakota; South Atlantic: Delaware, District of Columbia, Florida, Georgia, Maryland, North Carolina, South Carolina, Virginia, and West Virginia; East South Central: Alabama, Kentucky, Mississippi, and Tennessee; West South Central: Arkansas, Louisiana, Oklahoma, and Texas; Mountain: Arizona, Colorado, Idaho, Montana, Nevada, New Mexico, Utah, and Wyoming; and Pacific: Alaska, California, Hawaii, Oregon, and Washington.

NOTE: Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 8. Indemnity plans with overall limits: Amount of individual deductible,¹ all private industry workers, National Compensation Survey, 2005

Fee arrangement	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Indemnity										
Total	100	100	100	100	100	100	100	100	100	100
Deductible specified	77	75	79	76	80	75	80	74	79	76
Flat dollar amounts ²	76	74	79	75	78	75	79	74	78	76
\$100	6	4	8	8	6	6	4	7	13	5
\$150	4	3	5	7	4	4	2	5	14	2
\$200	7	7	9	4	9	6	7	8	7	7
\$250	12	12	11	15	14	11	13	11	10	13
\$300	10	10	11	7	12	10	4	15	8	11
\$400	3	3	3	5	3	3	4	3	4	3
\$500	16	16	17	14	15	16	22	11	8	17
\$1000	9	9	9	9	9	9	12	6	7	9
Other	1	1	(³)	(³)	1	(³)	1	1	(³)	1
No deductible	23	24	20	24	20	24	20	25	21	23
Not determinable	(³)	1	(³)	(³)	1	(³)	(³)	(³)	1	(³)
Average annual deductible individual	\$460	\$494	\$424	\$411	\$420	\$479	\$549	\$387	\$334	\$482
Average annual deductible family	\$1,128	\$1,205	\$1,045	\$1,015	\$1,027	\$1,182	\$1,400	\$915	\$658	\$1,208
Traditional Indemnity										
Total	100	100	100	100	100	100	100	100	100	100
Deductible specified	91	90	92	85	90	92	91	91	97	88
Flat dollar amounts ²	91	90	92	85	90	92	91	91	97	88
\$100	27	14	42	4	27	26	21	31	38	21
\$150	4	2	7	1	2	5	7	2	10	1
\$200	6	9	4	2	7	6	8	5	1	9
\$250	15	13	15	21	17	13	22	9	8	18
\$300	2	4	(³)	(³)	3	2	1	3	(³)	3
\$400	6	3	9	1	8	4	10	2	12	3
\$500	10	15	5	19	6	13	15	7	2	15
\$1000	9	13	2	32	5	11	2	15	10	9
Other	(³)	(³)	-	1	-	(³)	-	(³)	-	(³)
No deductible	8	10	6	14	9	8	9	8	1	12
Not determinable	1	(³)	1	(³)	1	(³)	(³)	1	2	(³)
Average annual deductible individual	\$377	\$460	\$263	\$648	\$367	\$384	\$302	\$437	\$329	\$404
Average annual deductible family	\$774	\$930	\$626	\$945	\$882	\$703	\$693	\$835	\$568	\$894

See footnotes at end of table.

Table 8. Indemnity plans with overall limits: Amount of individual deductible,¹ all private industry workers, National Compensation Survey, 2005 — Continued

Fee arrangement	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Indemnity in and outside of network without primary care physician										
Total	100	100	100	100	100	100	100	100	100	100
Deductible specified	79	78	82	80	79	79	80	79	80	79
Flat dollar amounts ²	78	76	81	80	78	79	79	78	80	78
\$100	4	3	4	10	4	5	3	5	8	4
\$150	4	2	5	9	5	3	1	6	19	1
\$200	7	8	7	5	8	7	6	8	9	7
\$250	13	14	10	16	13	13	14	12	10	13
\$300	12	11	15	8	15	11	5	17	11	12
\$400	3	3	2	6	2	3	4	2	(³)	3
\$500	15	13	20	12	16	15	19	12	10	16
\$750	2	2	2	1	3	1	3	1	(³)	2
\$1000	10	10	10	7	8	10	14	7	8	10
\$1500	2	3	(³)	(³)	(³)	2	3	(³)	-	2
Other	1	1	(³)	(³)	2	1	1	1	(³)	1
No deductible	20	21	18	20	20	20	19	21	19	20
Not determinable	1	1	(³)	1	1	1	1	1	1	1
Average annual deductible individual	\$480	\$517	\$458	\$376	\$433	\$502	\$590	\$394	\$334	\$503
Average annual deductible family	\$1,208	\$1,292	\$1,137	\$982	\$1,063	\$1,282	\$1,548	\$951	\$684	\$1,285
Indemnity in and outside of network with primary care physician⁴										
Total	100	100	100	100	100	100	100	100	100	100
Deductible specified	63	61	71	50	76	57	76	55	52	65
Flat dollar amounts ²	63	60	71	50	76	57	76	55	52	65
\$100	2	3	(³)	(³)	-	3	-	3	3	2
\$150	5	7	2	3	4	5	3	6	5	5
\$200	8	4	16	4	12	6	5	10	5	9
\$250	10	5	18	10	21	5	10	10	11	10
\$300	7	6	9	5	8	6	5	8	7	7
\$400	2	2	2	2	5	1	1	3	8	1
\$500	21	27	12	26	15	24	37	10	9	23
\$1000	5	3	9	(³)	11	2	10	1	2	5
Other	(³)	(³)	-	-	(³)	(³)	-	(³)	-	(³)
No deductible	37	39	29	50	24	43	24	45	48	35
Average annual deductible individual	\$426	\$437	\$415	\$408	\$410	\$436	\$527	\$331	\$388	\$430
Average annual deductible family	\$1,027	\$1,041	\$1,022	\$966	\$962	\$1,068	\$1,244	\$843	\$792	\$1,050

¹ The deductible is the amount of covered expenses that an individual or a family must pay before any charges are paid by the medical care plan. Deductibles that apply separately to a specific category of expense, such as a deductible for each hospital admission, were excluded from this tabulation.

² Includes other amounts not shown separately.

³ Less than 0.5 percent.

⁴ A provision in medical care plans that designates certain physicians and

hospitals as network providers. Services sought from health care providers who do not belong to the network are reimbursed at a lower rate than that applicable to network providers.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 9. Indemnity plans with overall limits: Individual deductible¹ difference between in-network and outside of network coverage, all private industry workers, National Compensation Survey, 2005

Comparison of deductibles in and outside of network	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Indemnity in and outside of network without primary care physician										
Total	100	100	100	100	100	100	100	100	100	100
Difference in deductible amounts between in and outside of network										
Less than \$200	47	49	43	45	45	48	42	51	35	49
\$200-\$399	3	3	4	3	3	3	1	5	7	3
\$400-\$599	20	22	18	20	19	21	17	23	16	21
\$600-\$999	13	12	15	12	15	12	8	17	12	13
\$1,000-\$1,399	2	2	1	3	2	2	2	2	1	2
\$1,400-\$1,999	5	6	5	1	5	5	7	3	(²)	6
\$2,000 and greater	2	3	(²)	1	-	2	3	(²)	-	2
Amount not determinable	2	2	1	3	1	2	3	1	(²)	2
Overall deductible does not differ between in and outside of network	(²)	(²)	-	-	-	(²)	-	(²)	-	(²)
Not determinable	53	50	57	55	55	52	58	49	64	51
Average difference between in and outside of network	1	1	(²)	1	1	1	1	1	1	1
Indemnity in and outside of network with primary care physician³										
Total	\$538	\$563	\$487	\$551	\$463	\$570	\$718	\$425	\$333	\$561
Difference in deductible amounts between in and outside of network										
Less than \$200	54	56	50	-	49	57	49	58	56	54
\$200-\$399	3	4	1	-	(²)	4	3	3	(²)	4
\$400-\$999	30	27	31	-	29	30	18	38	43	28
\$1,000 and greater	13	17	8	-	10	14	14	13	11	13
Amount not determinable	8	8	10	-	8	8	14	4	1	9
Overall deductible does not differ between in and outside of network	(²)	-	1	-	1	-	1	-	-	(²)
Average difference between in and outside of network	46	44	50	-	51	43	51	42	44	46
Average difference between in and outside of network										
	\$473	\$510	\$459	-	\$439	\$488	\$618	\$390	\$323	\$496

¹ The deductible is the amount of covered expenses that an individual or a family must pay before any charges are paid by the medical care plan. Deductibles that apply separately to a specific category of expense, such as a deductible for each hospital admission, were excluded from this tabulation.

² Less than 0.5 percent.

³ A provision in medical care plans that designates certain physicians and hospitals as network providers. Services sought from healthcare providers who do

not belong to the network are reimbursed at a lower rate than that applicable to network providers.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 10. Indemnity plans with overall limits: Relationship between individual and family deductible, all private industry workers, National Compensation Survey, 2005

Relationship between individual and family deductibles	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Individual and family deductible specified	70	69	73	60	74	68	74	66	66	70
Family deductible is multiple of individual deductible	65	64	70	55	72	62	67	64	65	65
Average multiple	2.5	2.5	2.5	2.5	2.5	2.5	2.5	2.5	2.4	2.5
Specified number of individual deductibles must be met to satisfy family deductible	4	5	3	5	2	5	7	2	1	5
Average number of individual deductibles	2.5	2.4	2.8	2.4	2.5	2.5	2.6	2.3	2.3	2.5
No deductible or no family deductible ...	30	30	26	40	26	32	26	33	34	29
Not determinable	(¹)	1	(¹)	(¹)	1	(¹)	(¹)	(¹)	1	(¹)

¹ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 11. Indemnity plans with overall limits: Coinsurance rates, all private industry workers, National Compensation Survey, 2005

Coinsurance amount	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Indemnity										
Total	100	100	100	100	100	100	100	100	100	100
With coinsurance ¹	82	81	85	77	85	81	86	80	81	82
80 percent	47	44	51	45	51	44	50	44	52	46
85 percent	3	3	4	6	3	4	3	4	8	3
90 percent	23	24	22	20	24	22	20	25	18	24
Other percentage	7	8	6	6	6	8	12	4	3	8
Percentage not determinable	2	2	1	(²)	1	2	(²)	3	1	2
Other	1	1	(²)	1	-	1	1	(²)	(²)	1
Without coinsurance ³	17	19	14	20	14	19	14	20	16	18
Not determinable	(²)	(²)	(²)	4	(²)	1	(²)	1	3	(²)
Traditional Indemnity										
Total	100	100	100	-	100	100	100	100	100	100
With coinsurance ¹	98	97	100	-	100	96	100	96	99	97
70 percent	4	8	1	-	1	6	6	3	2	6
75 percent	11	10	12	-	23	3	10	12	8	12
80 percent	68	61	77	-	64	70	67	69	86	59
85 percent	(²)	(²)	1	-	(²)	1	1	-	1	(²)
90 percent	7	8	5	-	6	8	6	9	2	10
Other percentage	6	9	4	-	5	7	10	3	1	9
Other	(²)	(²)	(²)	-	-	1	1	(²)	(²)	1
Without coinsurance ³	2	3	(²)	-	(²)	4	-	4	1	3
Not determinable	(²)	(²)	-	-	-	(²)	-	(²)	-	(²)
Indemnity in and outside of network without primary care physician										
Total	100	100	100	100	100	100	100	100	100	100
With coinsurance ¹	83	82	87	79	84	83	84	82	81	84
80 percent	48	47	51	45	51	47	50	47	47	48
85 percent	4	3	5	7	2	5	4	5	10	3
90 percent	25	24	27	21	28	23	22	27	24	25
Other percentage	4	5	4	6	2	6	7	2	(²)	5
Percentage not determinable	1	2	(²)	-	-	1	(²)	1	-	1
Other	1	1	(²)	1	-	1	1	(²)	(²)	1
Without coinsurance ³	16	18	13	16	16	16	15	17	14	16
Not determinable	1	(²)	(²)	5	(²)	1	(²)	1	4	(²)

See footnotes at end of table.

Table 11. Indemnity plans with overall limits: Coinsurance rates, all private industry workers, National Compensation Survey, 2005 — Continued

Coinsurance amount	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Indemnity in and outside of network with primary care physician⁴										
Total	100	100	100	-	100	100	100	100	-	100
With coinsurance ¹	67	63	75	-	81	60	72	63	-	68
80 percent	34	27	44	-	49	27	45	26	-	35
85 percent	2	2	3	-	6	1	-	4	-	1
90 percent	19	25	10	-	14	22	17	20	-	20
Other percentage	6	3	10	-	6	6	10	3	-	6
Percentage not determinable	6	6	7	-	8	5	-	10	-	6
Other	(²)	-	1	-	-	(²)	1	-	-	(²)
Without coinsurance ³	33	37	25	-	19	40	28	37	-	32

¹ Represents the initial coinsurance in plans that have 100-percent coverage after the individual pays a specified dollar amount toward expenses. For example, the plan pays 80 percent until the individual's out-of-pocket expenses reach \$1,000, and then coverage is at 100 percent. A few plans have more than one coinsurance rate. In those cases, the coinsurance rate shown is that which applies to the majority of benefits under the plan. Includes variable coinsurance rates not shown separately.

² Less than 0.5 percent.

³ Includes plans with overall benefit limitations, such as maximum dollar

amounts and deductibles, in which the coinsurance rate is 100 percent.

⁴ A provision in medical care plans that designates certain physicians and hospitals as network providers. Services sought from healthcare providers who do not belong to the network are reimbursed at a lower rate than that applicable to network providers.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 12. Indemnity plans with overall limits: Coinsurance rate difference between in-network and outside-of-network coverage, all private industry workers, National Compensation Survey, 2005

Coinsurance rate comparison	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Indemnity in and outside of network without primary care physician										
Total	100	100	100	100	100	100	100	100	100	100
Difference in coinsurance rates										
between in and outside of network ¹	93	94	90	92	92	93	94	92	82	94
Less than 10 percent	(²)	(²)	1	-	(²)	(²)	1	-	1	(²)
10 percent	12	13	12	9	16	10	13	12	11	13
15 percent	2	2	2	1	2	2	1	2	3	2
20 percent	56	55	61	51	58	55	58	55	51	57
25 percent	2	3	1	5	(²)	3	3	2	(²)	3
30 percent	12	13	12	10	12	13	12	13	10	13
35 percent	1	(²)	(²)	7	-	1	-	2	4	1
40 percent	3	3	1	9	1	3	2	3	1	3
Greater than 40 percent	1	1	1	(²)	1	1	(²)	1	1	1
Difference not determinable	2	4	(²)	-	-	4	4	1	-	3
Overall coinsurance rates do not differ between in and outside of network	7	6	9	3	7	6	6	7	14	6
Not determinable	1	(²)	(²)	5	(²)	1	(²)	1	4	(²)
Average percent difference between in and out of network	21.0	20.9	20.4	23.5	20.1	21.5	20.4	21.5	21.0	21.0
Indemnity in and outside of network with primary care physician³										
Total	100	100	100	100	100	100	100	100	100	100
Difference in coinsurance rates										
between in and outside of network ¹	94	94	94	99	95	94	92	96	97	94
Less than 10 percent	1	-	3	3	4	-	-	2	10	(²)
10 percent	12	11	16	5	12	13	23	5	6	13
15 percent	(²)	(²)	(²)	-	1	(²)	-	1	-	(²)
20 percent	50	51	43	73	52	49	43	55	48	50
25 percent	1	2	(²)	1	-	2	(²)	2	2	1
30 percent	18	17	20	12	16	19	20	16	27	16
40 percent	2	3	1	1	1	3	1	3	(²)	2
Greater than 40 percent	2	3	2	2	2	3	2	3	-	3
Difference not determinable	7	6	9	4	8	6	2	10	5	7
Overall coinsurance rates do not differ between in and outside of network	6	6	6	1	5	6	8	4	3	6
Average percent difference between in and outside of network	21.7	22.6	20.7	21.1	20.6	22.3	20.5	22.7	20.7	21.9

¹ The coinsurance rate is higher if services are received from an approved provider. For example, in-network physician office visits had a 90-percent coinsurance payment, while out-of-network visits had an 80-percent payment.

² Less than 0.5 percent.

³ A provision in medical care plans that designates certain physicians and hospitals as network providers. Services sought from healthcare providers who do

not belong to the network are reimbursed at a lower rate than that applicable to network providers.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 13. Indemnity plans with overall limits: Maximum out-of-pocket expense provisions, all private industry workers, National Compensation Survey, 2005

Type and amount of out-of-pocket expense provision	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
With limit on out-of-pocket expense	83	82	85	79	86	81	84	82	78	83
With an annual dollar maximum on out-of-pocket expense ¹	80	79	83	76	83	79	83	78	76	81
Per individual:										
Less than \$500	3	3	2	3	3	2	3	2	2	3
\$500	3	3	2	1	2	3	3	2	3	3
\$501-\$999	7	6	8	8	10	5	3	9	9	6
\$1,000	14	14	15	11	14	14	12	15	19	13
\$1,001-\$1,499	5	5	6	5	7	5	6	5	5	5
\$1,500	8	8	9	11	8	9	9	8	9	8
\$1,501-\$1,999	8	7	10	5	10	7	7	9	15	7
\$2,000	10	11	10	9	9	11	14	7	2	12
\$2,001-\$2,499	4	5	3	4	4	5	5	4	4	4
\$2,500	3	4	3	2	3	3	3	4	2	4
\$2,501-\$2,999	2	2	4	1	4	2	1	3	2	3
\$3,000	3	3	4	1	4	3	6	2	1	4
\$3,001-\$3,499	2	2	1	1	2	1	1	2	(²)	2
\$3,500	1	1	1	(²)	1	1	1	1	1	1
Greater than \$3,500	6	6	4	13	4	7	8	5	3	7
Per family:										
Less than \$1000	2	2	1	1	2	1	2	2	1	2
\$1,000	2	3	1	1	1	2	3	1	1	2
\$1,001-\$1,999	6	6	8	3	10	5	5	8	8	6
\$2,000	7	7	7	5	9	6	8	6	9	7
\$2,001-\$2,999	6	5	8	7	9	5	5	7	4	7
\$3,000	8	8	8	8	7	8	8	8	5	8
\$3,001-\$3,999	6	6	7	2	8	5	6	6	8	6
\$4,000	7	7	6	7	6	7	8	6	4	7
\$4,001-\$4,999	5	5	4	3	3	5	5	5	6	4
\$5,000	3	3	2	1	3	2	2	3	(²)	3
\$5,001-\$5,999	3	2	3	2	3	2	2	3	2	3
\$6,000	5	5	4	3	3	6	8	2	1	5
\$6,001-\$6,999	1	2	1	(²)	(²)	1	1	1	(²)	1
\$7,000	(²)	1	(²)	(²)	(²)	1	1	(²)	(²)	(²)
\$7,001-\$7,999	2	1	1	5	1	2	2	1	2	2
\$8,000	1	1	(²)	(²)	(²)	1	(²)	1	(²)	1
\$8,001-\$8,999	1	1	1	2	1	1	-	1	(²)	1
\$9,000	1	1	2	(²)	1	1	2	(²)	(²)	1
Greater than \$9,000	2	1	1	3	2	2	2	1	(²)	2
No family maximum	10	8	12	14	11	10	10	10	18	9
Family maximum cannot be computed ³	4	4	4	9	2	5	4	5	6	4
Annual maximum on out-of-pocket expense based on earnings	(²)	(²)	(²)	-	(²)	(²)	(²)	(²)	(²)	(²)
Annual maximum on out-of-pocket expense varies by coinsurance rate ⁴	1	1	(²)	2	(²)	1	1	1	1	1
Other	1	1	1	(²)	2	(²)	1	1	(²)	1
No out-of-pocket expense required ⁵	11	13	9	10	9	12	10	11	8	11

See footnotes at end of table.

Table 13. Indemnity plans with overall limits: Maximum out-of-pocket expense provisions, all private industry workers, National Compensation Survey, 2005 — Continued

Type and amount of out-of-pocket expense provision	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
No limit on out-of-pocket expenses	3	3	5	1	3	4	3	4	8	3
Not determinable	4	4	1	10	2	5	4	3	6	3
Average annual dollar maximum on individual out-of-pocket expenses	\$1,898	\$1,932	\$1,796	\$2,100	\$1,779	\$1,957	\$2,069	\$1,762	\$1,571	\$1,952
Average annual dollar maximum on family out-of-pocket expenses	\$3,892	\$3,887	\$3,759	\$4,519	\$3,643	\$4,022	\$4,186	\$3,653	\$3,170	\$3,988

¹ Deductible amounts were excluded from computation of the out-of-pocket dollar limits. With rare exceptions, an out-of-pocket limit was specified on an annual basis. Few workers were in plans in which the expense limit applied to a disability or to a period other than a year. Charges for certain services, such as mental health care, may not be counted toward the out-of-pocket maximum.

² Less than 0.5 percent.

³ These are plans in which a family maximum is stated in such a way that it cannot be computed. For example, the individual out-of-pocket expense is limited to \$1,000 per year, and the family out-of-pocket expense is limited to three individuals. The family out-of-pocket expense cannot be computed because each of the three individuals must separately reach an out-of-pocket limit of \$1,000. Thus, if

two individuals each reach \$1,000 in their out-of-pocket expenses, and two other family members reach \$900 and \$800, respectively, in out-of-pocket expenses, the family out-of-pocket limit would not have been met.

⁴ Some plans reimburse medical expenses at more than one coinsurance rate. These plans impose a limit on out-of-pocket expenses by specifying a maximum on covered medical expenses beyond which all expenses are paid at 100 percent.

⁵ All covered expenses are paid at 100 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 14. Traditional indemnity plans with overall limits: Maximum out-of-pocket expense provisions, all private industry workers, National Compensation Survey, 2005

Type and amount of out-of-pocket expense provision	All workers	Occupational group		Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100
With limit on out-of-pocket expense	82	92	70	87	79	89	76	70	88
With an annual dollar maximum on out-of-pocket expense ¹	79	87	70	87	75	88	72	63	87
Per individual:									
Less than \$500	6	8	5	6	6	7	6	1	9
\$500	2	2	2	3	1	3	1	(²)	3
\$501-\$999	6	3	11	16	(²)	3	9	9	5
\$1,000	12	16	4	6	15	6	16	11	12
\$1,001-\$1,499	3	2	5	(²)	6	6	1	4	3
\$1,500	9	11	7	(²)	15	11	8	11	8
\$1,501-\$1,999	15	11	17	24	9	16	13	22	11
\$2,000	8	9	7	12	6	10	6	1	11
\$2,001-\$2,499	2	3	2	-	4	4	1	2	3
\$2,500-\$3,000	7	8	7	12	4	10	5	(²)	10
Greater than \$3,000	8	14	3	6	9	12	5	2	12
Per family:									
Less than \$1,000	6	8	5	6	6	7	6	1	9
\$1,000	1	1	(²)	-	1	-	1	(²)	1
\$1,001-\$1,999	6	3	10	16	(²)	3	9	9	5
\$2,000	5	8	2	6	5	3	7	1	7
\$2,001-\$2,999	2	2	1	(²)	3	3	1	(²)	3
\$3,000	5	7	2	(²)	7	5	5	1	6
\$3,001-\$3,999	11	7	16	18	7	11	11	18	8
\$4,000	3	4	2	3	3	2	4	1	4
\$4,001-\$4,999	7	6	9	1	11	10	4	11	5
\$5,000	(²)	1	(²)	(²)	(²)	-	1	(²)	(²)
\$5,001-\$5,999	2	4	(²)	-	4	2	2	1	3
\$6,000	5	4	6	9	2	9	1	(²)	7
Greater than \$6,000	4	6	2	4	4	2	6	(²)	6
No family maximum	17	17	13	19	16	20	15	19	16
Family maximum cannot be computed ³	6	9	3	5	6	12	-	-	8
Annual maximum on out-of-pocket expense varies by coinsurance rate ⁴	2	4	-	-	3	-	4	6	(²)
Other	(²)	1	-	-	1	(²)	(²)	-	1

See footnotes at end of table.

Table 14. Traditional indemnity plans with overall limits: Maximum out-of-pocket expense provisions, all private industry workers, National Compensation Survey, 2005 — Continued

Type and amount of out-of-pocket expense provision	All workers	Occupational group		Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Goods producing	Service producing	1 to 99 workers	100 workers or more		
No out-of-pocket expense required ⁵	1	2	(²)	(²)	2	-	2	(²)	2
No limit on out-of-pocket expenses	16	4	29	13	18	11	20	30	9
Not determinable	1	1	(²)	-	1	(²)	1	-	1
Average annual dollar maximum on individual out-of-pocket expenses	\$1,765	\$1,902	\$1,625	\$1,762	\$1,767	\$1,975	\$1,558	\$1,407	\$1,894
Average annual dollar maximum on family out-of-pocket expenses	\$3,474	\$3,591	\$3,320	\$3,199	\$3,677	\$3,643	\$3,339	\$3,170	\$3,580

¹ Deductible amounts were excluded from computation of the out-of-pocket dollar limits. With rare exceptions, an out-of-pocket limit was specified on an annual basis. Few workers were in plans in which the expense limit applied to a disability or to a period other than a year. Charges for certain services, such as mental health care, may not be counted toward the out-of-pocket maximum.

² Less than 0.5 percent.

³ These are plans in which a family maximum is stated in such a way that it cannot be computed. For example, the individual out-of-pocket expense is limited to \$1,000 per year, and the family out-of-pocket expense is limited to three individuals. The family out-of-pocket expense cannot be computed because each of the three individuals must separately reach an out-of-pocket limit of \$1,000. Thus, if two individuals each reach \$1,000 in their

out-of-pocket expenses, and two other family members reach \$900 and \$800, respectively, in out-of-pocket expenses, the family out-of-pocket limit would not have been met.

⁴ Some plans reimburse medical expenses at more than one coinsurance rate. These plans impose a limit on out-of-pocket expenses by specifying a maximum on covered medical expenses beyond which all expenses are paid at 100 percent.

⁵ All covered expenses are paid at 100 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 15. Indemnity plans in and outside of network with overall limits: Maximum out-of-pocket expense provisions, all private industry workers, National Compensation Survey, 2005

Type and amount of out-of-pocket expense provision	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
With limit on out-of-pocket expense	84	82	88	79	86	83	84	83	81	84
With an annual dollar maximum on out-of-pocket expense ¹	82	79	86	79	83	81	83	80	80	82
Per individual:										
Less than \$500	2	2	2	4	3	2	2	2	2	2
\$500	3	3	3	2	2	3	3	2	3	2
\$501-\$999	7	6	7	8	8	6	3	9	9	6
\$1,000	15	14	18	10	16	14	13	16	21	14
\$1,001-\$1,499	6	5	6	6	8	5	6	5	6	6
\$1,500	9	7	10	11	10	8	10	8	9	9
\$1,501-\$1,999	7	6	9	4	7	7	5	9	13	6
\$2,000	11	11	10	10	9	11	16	7	3	12
\$2,001-\$2,499	5	5	3	4	4	5	5	4	5	4
\$2,500	4	4	3	2	3	4	3	4	2	4
\$2,501-\$2,999	3	2	5	1	5	2	1	4	2	3
\$3,000	3	3	4	1	3	3	6	2	1	4
\$3,001-\$3,499	2	2	2	1	2	2	1	2	(²)	2
\$3,500	1	1	1	(²)	1	1	1	(²)	1	1
Greater than \$3,500	7	7	4	14	3	8	9	5	4	7
Per family:										
Less than \$1,000	1	2	1	1	2	1	1	2	1	1
\$1,000	2	3	1	1	1	2	3	1	2	2
\$1,001-\$1,999	6	6	8	3	9	5	4	8	9	6
\$2,000	8	8	8	6	10	7	9	7	10	7
\$2,001-\$2,999	7	5	9	7	10	5	6	8	5	7
\$3,000	8	8	10	8	8	9	8	9	7	9
\$3,001-\$3,999	5	6	5	2	6	5	5	5	4	5
\$4,000	7	7	6	7	6	8	9	5	4	7
\$4,001-\$4,999	5	5	4	3	4	5	4	5	5	4
\$5,000	3	3	2	1	3	3	2	3	1	3
\$5,001-\$5,999	3	2	4	2	4	2	2	3	2	3
\$6,000	5	6	4	3	2	6	8	3	1	6
Greater than \$6,000	8	7	7	12	6	8	8	7	3	8
No family maximum	10	7	12	12	10	9	9	10	19	8
Family maximum cannot be computed ³	4	3	5	10	2	6	3	5	8	4
Annual maximum on out-of-pocket expense based on earnings	(²)	(²)	(²)	-	(²)	(²)	(²)	(²)	(²)	(²)
Annual maximum on out-of-pocket expense varies by coinsurance rate ⁴	1	1	(²)	(²)	(²)	1	(²)	1	(²)	1
Other	1	1	2	-	3	1	1	2	(²)	1

See footnotes at end of table.

Table 15. Indemnity plans in and outside of network with overall limits: Maximum out-of-pocket expense provisions, all private industry workers, National Compensation Survey, 2005 — Continued

Type and amount of out-of-pocket expense provision	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
No out-of-pocket expense required ⁵	11	12	9	10	10	11	10	12	10	11
No limit on out-of-pocket expenses	2	3	1	1	2	2	2	1	2	2
Not determinable	4	4	2	11	2	5	5	4	8	4
Average annual dollar maximum on individual out-of-pocket expenses	\$1,917	\$1,951	\$1,802	\$2,147	\$1,763	\$1,989	\$2,088	\$1,783	\$1,617	\$1,962
Average annual dollar maximum on family out-of-pocket expenses	\$3,941	\$3,937	\$3,786	\$4,575	\$3,663	\$4,077	\$4,250	\$3,689	\$3,196	\$4,027

¹ Deductible amounts were excluded from computation of the out-of-pocket dollar limits. With rare exceptions, an out-of-pocket limit was specified on an annual basis. Few workers were in plans in which the expense limit applied to a disability or to a period other than a year. Charges for certain services, such as mental health care, may not be counted toward the out-of-pocket maximum.

² Less than 0.5 percent.

³ These are plans in which a family maximum is stated in such a way that it cannot be computed. For example, the individual out-of-pocket expense is limited to \$1,000 per year, and the family out-of-pocket expense is limited to three individuals. The family out-of-pocket expense cannot be computed because each of the three individuals must separately reach an out-of-pocket limit of \$1,000. Thus, if

two individuals each reach \$1,000 in their out-of-pocket expenses, and two other family members reach \$900 and \$800, respectively, in out-of-pocket expenses, the family out-of-pocket limit would not have been met.

⁴ Some plans reimburse medical expenses at more than one coinsurance rate. These plans impose a limit on out-of-pocket expenses by specifying a maximum on covered medical expenses beyond which all expenses are paid at 100 percent.

⁵ All covered expenses are paid at 100 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 16. Indemnity plans with overall limits: Maximum benefit provisions, all private industry workers, National Compensation Survey, 2005

Type and dollar amount of maximum	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
With maximum limits	66	62	72	68	73	63	65	68	71	66
Lifetime maximum only ¹	66	62	71	68	72	63	64	67	69	65
Less than \$1,000,000	3	1	6	7	4	3	3	4	17	1
\$1,000,000	26	23	29	38	32	24	17	34	28	26
\$2,000,000	21	21	22	16	21	21	21	21	16	21
\$5,000,000	12	12	12	7	12	11	21	5	5	13
Greater than \$5,000,000	(²)	(²)	(²)	-	(²)	(²)	(²)	(²)	-	(²)
Other maximum	1	(²)	1	(²)	1	(²)	1	1	2	(²)
Unlimited maximum	27	30	24	26	23	29	28	26	25	27
Not determinable	7	8	4	5	4	8	7	6	3	7
Average lifetime maximum (in thousands)	\$2,062	\$2,240	\$1,962	\$1,563	\$2,027	\$2,081	\$2,688	\$1,610	\$1,411	\$2,182

¹ Includes other lifetime maximum limits not shown separately.

² Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 17. Indemnity plans: Coverage for alternatives to hospital care, all private industry workers, National Compensation Survey, 2005

Category of care and extent of coverage	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Extended care										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	3	2	2	9	1	4	4	2	1	3
Subject to internal limits only ¹	14	15	12	14	14	14	13	15	20	13
Subject to internal and overall limits	62	61	66	60	64	62	63	62	54	64
Subject to overall limits only ²	21	22	20	17	20	21	21	21	26	20
Internal limits										
Limit on days	69	69	70	66	74	67	70	68	59	71
Separate coinsurance	4	5	4	2	4	5	4	5	9	4
Limit to maximum percentage rate of prior hospital confinement	1	1	1	-	1	1	1	1	1	1
Other limits	8	7	9	13	7	9	7	9	6	9
Limits not determinable	1	1	1	4	(³)	2	1	1	5	1
Home health care										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	8	7	8	12	6	9	7	8	14	7
Subject to internal limits only ¹	14	13	13	16	12	14	15	13	12	14
Subject to internal and overall limits	50	48	53	48	49	50	50	50	50	50
Subject to overall limits only ²	29	32	26	24	33	27	28	29	25	29
Internal limits										
Limit on days	51	52	50	48	49	51	55	48	41	52
Separate coinsurance	5	5	4	6	4	5	3	6	12	4
Other limits	13	11	15	13	11	14	12	13	12	13
Limits not determinable	1	1	(³)	4	-	1	1	1	3	(³)
Hospice care										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	13	12	13	19	12	14	12	15	21	12
Subject to internal limits only ¹	11	10	11	20	11	12	11	12	13	11
Subject to internal and overall limits	26	26	29	14	32	23	26	26	21	27
Subject to overall limits only ²	49	51	47	47	46	51	52	47	45	50
Internal limits										
Limit on dollars	17	12	21	25	23	13	13	19	19	16
Separate coinsurance	6	8	4	6	4	7	6	6	5	6
Other limits	20	20	21	14	22	18	20	19	15	20
Limits not determinable	(³)	1	-	-	-	(³)	1	-	-	(³)

¹ Internal limits apply to individual categories of care; for example, internal limits or benefits for hospitalization. Limits may be set in terms of dollar or day ceilings on benefits, a requirement that the participant pay a percentage of costs (coinsurance), or a requirement that the participant pay a specific amount (deductible or copayment) before reimbursement begins or services are rendered.

² Overall limits apply to all benefits under the plan, not selected individual benefits. Overall limits are (1) deductibles and coinsurance percentages that must

be paid by the participant before any plan benefits begin, and (2) overall limits on plan benefits that can be paid.

³ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 18. Prepaid plans: Coverage for selected services and alternatives to hospital care, all private industry workers, National Compensation Survey, 2005

Category of care and extent of coverage	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Hospital room and board	100	100	100	100	100	100	100	100	100	100
Covered in full	46	51	38	37	46	47	46	47	52	46
Subject to limits ¹	54	49	62	63	54	53	54	53	48	54
Inpatient surgery	100	100	100	100	100	100	100	100	100	100
Covered in full	71	76	65	55	71	71	71	71	68	71
Subject to limits ¹	29	24	35	45	29	29	29	29	32	29
Outpatient surgery ²	100	100	100	100	100	100	100	100	100	100
Covered in full	49	54	41	36	47	49	44	53	38	50
Subject to limits ¹	51	46	59	64	53	51	56	47	62	50
Office physician visits	100	100	100	100	100	100	100	100	100	100
Covered in full	2	1	3	1	3	1	1	2	6	1
Subject to limits ¹	98	99	97	99	97	99	99	98	94	99
Total subject to copayment per visit ³	98	99	94	99	93	99	99	96	90	99
\$5 per visit	6	6	6	7	6	6	7	5	13	5
\$6-\$9 per visit	(⁴)	(⁴)	-	2	-	(⁴)	-	1	3	(⁴)
\$10 per visit	28	27	31	25	34	26	23	32	36	26
\$15 per visit	35	40	22	33	17	39	35	35	21	37
\$20 per visit	21	18	26	25	27	19	22	19	12	22
Greater than \$20 per visit	6	6	8	1	7	5	10	1	1	6
Unspecified copayment	2	1	1	7	2	2	2	2	4	2
Total subject to other limits only	1	(⁴)	3	-	4	-	(⁴)	1	5	(⁴)
Extended care ⁵	100	100	100	100	100	100	100	100	100	100
Covered in full	18	18	17	16	18	18	16	19	27	16
Subject to limits ¹	82	82	83	84	82	82	84	81	73	84
Home health care ⁵	100	100	100	100	100	100	100	100	100	100
Covered in full	70	74	67	50	68	70	75	64	63	71
Subject to limits ¹	30	26	33	50	32	30	25	36	37	29
Hospice care	100	100	100	100	100	100	100	100	-	100
Covered in full	78	78	69	89	62	82	86	71	-	77
Subject to limits ¹	22	22	31	11	38	18	14	29	-	23

¹ Limits may be set in terms of dollar or day ceilings on benefits, a requirement that the participant pay a percentage of costs (coinsurance), or a requirement that the participant pay a specific amount (deductible or copayment) before reimbursement begins or services are rendered.

² Charges incurred in the outpatient department of a hospital and outside of the hospital.

³ Includes other copayments not shown separately.

⁴ Less than 0.5 percent.

⁵ Some plans provide this care only to a patient who was previously hospitalized and is recovering without need of the extensive care provided by a general hospital.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 19. Prepaid plans: Summary of selected features, all private industry workers, National Compensation Survey, 2005

Selected feature	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Group/staff model ¹	13	12	17	15	14	13	18	9	17	13
Individual practice association model ² ..	40	45	35	27	32	42	44	37	30	42
Mixed model ³	24	23	26	28	28	24	24	25	23	25
Network model ⁴	10	9	10	18	10	10	9	12	13	10
Not determinable	11	11	13	13	16	10	5	17	18	10
Federally qualified ⁵	38	38	42	36	37	39	44	34	40	38

¹ Care is provided at centralized locations.

² Care is provided by doctors working out of their offices.

³ Care is provided by more than one type of model.

⁴ Care is provided by multiple physician groups that may involve single- and multispecialty groups.

⁵ A plan that satisfies specific requirements set forth in the Health Maintenance

Organization Act of 1973 and is eligible for grants and loans not available to nonqualified plans.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 20. Prepaid plans: Extent of coverage for extended care facilities, all private industry workers, National Compensation Survey, 2005

Type of coverage	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	18	18	17	16	18	18	16	19	27	16
Day limit	76	75	73	81	72	77	78	74	70	77
Per year	64	62	63	76	62	64	64	64	68	63
30	3	2	1	6	3	3	1	4	(¹)	3
45	3	3	3	7	6	3	2	4	2	3
60	13	12	17	15	20	11	10	16	13	13
90	4	3	4	8	4	4	1	6	10	2
100	28	27	26	36	20	30	35	22	34	27
120	9	12	5	3	7	10	9	9	5	10
Other	4	3	7	1	3	4	6	2	2	4
Per confinement	7	7	9	3	10	6	5	8	1	8
Per lifetime	3	5	-	(¹)	-	4	7	(¹)	(¹)	4
Not determinable	5	7	2	2	-	6	9	1	(¹)	6
Other limits only	6	6	9	3	8	5	6	6	2	7
Not determinable	1	1	1	-	1	(¹)	(¹)	1	1	1

¹ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 21. Outpatient prescription drug benefits: Summary of coverage, all private industry workers, National Compensation Survey, 2005

Type of coverage	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Coverage for name-brand drugs	100	100	100	99	99	100	100	99	100	100
Higher reimbursement for generic drugs	89	91	87	90	89	90	89	89	82	91
Coverage for mail order drugs	77	76	77	75	79	76	72	80	84	75
Higher reimbursement for prescriptions filled at selected pharmacies	20	22	18	13	14	22	17	22	22	20
Higher reimbursement for formulary drugs	44	47	41	37	41	45	49	40	42	44
Not determinable	3	2	3	6	3	3	3	3	5	3

NOTE: Where applicable, dash indicates no employees in this category, or data do not meet publication criteria.

Table 22. Outpatient prescription drug benefits: Name-brand drug provisions in indemnity plans, all private industry workers, National Compensation Survey, 2005

Types of coverage	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	1	1	1	(¹)	1	1	1	1	2	1
Subject to overall limits	20	20	21	14	17	21	17	22	23	19
Subject to copayment per prescription	65	66	66	60	67	64	62	67	58	67
Less than \$15.00	8	7	10	7	7	8	8	8	15	6
\$15.00	8	8	9	8	12	7	5	11	6	9
\$15.01–\$19.99	1	1	1	2	2	1	(¹)	2	(¹)	2
\$20.00	22	23	20	26	23	22	19	25	19	23
\$20.01–\$24.99	1	1	1	(¹)	2	1	2	(¹)	2	1
\$25.00	10	10	10	11	10	11	11	10	4	12
\$25.01–\$29.99	(¹)	(¹)	-	(¹)	-	(¹)	(¹)	(¹)	-	(¹)
\$30.00	9	10	9	6	8	10	11	8	6	10
\$30.01–\$34.99	(¹)	(¹)	-	(¹)	-	(¹)	-	(¹)	-	(¹)
\$35.00	2	3	1	1	1	2	4	1	(¹)	2
Greater than \$35.00	1	1	2	(¹)	2	1	2	1	(¹)	1
Unspecified copayment	2	2	2	(¹)	1	2	1	2	4	1
Subject to a separate yearly deductible	8	8	10	3	8	9	7	9	6	9
Subject to a separate coinsurance rate	16	16	17	9	17	15	15	16	15	16
Subject to a separate yearly maximum	3	2	4	1	4	2	3	2	3	2
Difference in cost between generic and name-brand drugs ²	17	17	15	22	15	18	17	17	18	17
Other	5	5	4	9	4	6	5	5	5	5
Not determinable	1	1	1	-	2	(¹)	2	(¹)	2	1

¹ Less than 0.5 percent.

² In these plans, the participant is required to use a generic equivalent when available; if a generic equivalent is not chosen, the individual must pay the difference in total cost between the name-brand and generic drug plus any required copayment. For example, if an individual is subject to a \$20 copayment for generic drugs and the name-brand equivalent is purchased, the individual must pay the

difference in total cost between the name-brand and generic drug, plus the \$20 copayment.

NOTE: Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 23. Outpatient prescription drug benefits: Name-brand drug provisions in prepaid plans, all private industry workers, National Compensation Survey, 2005

Types of coverage	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Subject to copayment per prescription	82	81	87	83	88	81	80	85	82	82
Less than \$15.00	8	7	10	9	13	7	5	10	20	6
\$15.00	13	15	9	13	18	12	5	21	11	14
\$15.01–\$19.99	(¹)	(¹)	1	(¹)	-	1	-	1	1	(¹)
\$20.00	28	28	27	27	28	28	27	29	19	29
\$20.01–\$24.99	(¹)	(¹)	-	-	-	(¹)	-	(¹)	-	(¹)
\$25.00	17	17	23	5	20	16	26	8	13	17
\$30.00	10	8	7	19	6	10	9	10	2	11
\$35.00	4	3	7	2	2	4	5	3	9	3
Greater than \$35.00	1	1	1	(¹)	-	1	1	2	2	1
Unspecified copayment	2	1	1	8	-	2	2	1	5	1
Subject to a separate yearly deductible	6	3	17	1	23	3	2	9	1	7
Subject to a separate coinsurance rate	4	5	4	1	3	4	3	5	5	4
Subject to a separate yearly maximum	2	2	(¹)	2	-	2	2	2	(¹)	2
Difference in cost between generic and name-brand drugs ²	12	14	8	11	5	14	16	9	12	13
Other	2	1	2	6	-	2	4	(¹)	1	2
Not determinable	1	(¹)	3	-	4	(¹)	(¹)	2	5	(¹)

¹ Less than 0.5 percent.

² In these plans, the participant is required to use a generic equivalent when available; if a generic equivalent is not chosen, the individual must pay the difference in total cost between the name-brand and generic drug plus any required copayment. For example, if an individual is subject to a \$5 copayment for generic drugs and the name-brand equivalent is purchased, the individual must pay the

difference in total cost between the name-brand and generic drug, plus the \$5 copayment.

NOTE: Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 24. Mental health care and substance abuse treatment benefits: Comparison with coverage for other illnesses, all private industry workers, National Compensation Survey, 2005

Comparison with coverage for other illnesses	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Mental health care										
Inpatient										
Total	100	100	100	100	100	100	100	100	100	100
Covered the same	14	16	14	8	13	15	13	15	19	13
Covered differently	86	84	86	92	87	85	87	85	81	87
Outpatient ¹										
Total	100	100	100	100	100	100	100	100	100	100
Covered the same	6	9	4	4	4	7	8	5	5	7
Covered differently	94	91	96	96	96	93	92	95	95	93
Alcohol abuse										
Inpatient detoxification ²										
Total	100	100	100	100	100	100	100	100	100	100
Covered the same	23	24	22	21	23	23	25	22	26	23
Covered differently	77	76	78	79	77	77	75	78	74	77
Inpatient rehabilitation ³										
Total	100	100	100	100	100	100	100	100	100	100
Covered the same	7	8	6	4	7	7	7	7	5	7
Covered differently	93	92	94	96	93	93	93	93	95	93
Outpatient rehabilitation ¹										
Total	100	100	100	100	100	100	100	100	100	100
Covered the same	4	5	3	4	4	4	5	4	1	5
Covered differently	96	95	97	96	96	96	95	96	99	95
Drug abuse										
Inpatient detoxification ²										
Total	100	100	100	100	100	100	100	100	100	100
Covered the same	23	25	22	19	23	23	25	22	26	22
Covered differently	77	75	78	81	77	77	75	78	74	78
Inpatient rehabilitation ³										
Total	100	100	100	100	100	100	100	100	100	100
Covered the same	6	7	5	2	6	6	7	6	5	6
Covered differently	94	93	95	98	94	94	93	94	95	94
Outpatient rehabilitation ¹										
Total	100	100	100	100	100	100	100	100	100	100
Covered the same	4	5	2	2	4	4	5	3	1	4
Covered differently	96	95	98	98	96	96	95	97	99	96

¹ Includes treatment in one or more of the following: outpatient department of a hospital, residential treatment center, organized outpatient clinic, day-night treatment center, or doctor's office. If benefits differed by location of treatment, the location offering the most beneficial coverage was tabulated.

² Detoxification is the systematic use of medication and other methods under medical supervision, to reduce or eliminate the effects of substance abuse.

³ Rehabilitation is designed to alter the abusive behavior in patients once they are free of acute physical and mental complications.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 25. Mental health care and substance abuse treatment benefits: Coverage in indemnity plans, all private industry workers, National Compensation Survey, 2005

Coverage limitation	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Mental health care										
Inpatient										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	2	2	1	3	1	2	3	1	2	2
Subject to internal limits only ¹	18	18	16	23	15	19	18	18	25	16
Subject to internal limits and overall limits ¹	68	66	70	69	69	67	67	68	58	70
Subject to overall limits only ¹	13	14	12	5	14	12	12	13	16	12
Outpatient²										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	1	1	1	2	1	1	1	1	1	1
Subject to internal limits only ¹	26	26	25	31	24	27	28	24	30	25
Subject to internal limits and overall limits ¹	68	68	69	65	70	67	66	70	67	68
Subject to overall limits only ¹	5	5	5	2	5	5	4	5	3	5
Alcohol abuse										
Inpatient detoxification³										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	2	2	2	1	2	2	2	2	2	2
Subject to internal limits only ¹	17	17	16	19	15	17	14	18	25	15
Subject to internal limits and overall limits ¹	65	63	69	61	67	64	64	66	59	66
Subject to overall limits only ¹	16	18	13	18	16	17	19	14	15	17
Inpatient rehabilitation⁴										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	1	1	1	(⁵)	1	1	2	(⁵)	1	1
Subject to internal limits only ¹	20	20	18	21	19	20	20	20	30	18
Subject to internal limits and overall limits ¹	73	72	76	71	72	74	73	73	66	75
Subject to overall limits only ¹	6	7	5	8	8	6	5	7	2	7
Outpatient rehabilitation²										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	1	(⁵)	1	(⁵)	1	(⁵)	(⁵)	1	(⁵)	1
Subject to internal limits only ¹	27	26	26	29	27	27	29	25	32	26
Subject to internal limits and overall limits ¹	71	71	71	70	69	71	69	72	66	71
Subject to overall limits only ¹	2	2	3	1	3	2	2	3	1	3

See footnotes at end of table.

Table 25. Mental health care and substance abuse treatment benefits: Coverage in indemnity plans, all private industry workers, National Compensation Survey, 2005 — Continued

Coverage limitation	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Drug Abuse										
Inpatient detoxification³										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	2	2	2	1	2	2	2	2	2	2
Subject to internal limits only ¹	16	16	16	19	15	17	14	18	25	15
Subject to internal limits and overall limits ¹	66	64	69	63	68	65	65	66	59	67
Subject to overall limits only ¹	16	18	13	16	16	16	19	13	15	16
Inpatient rehabilitation⁴										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	1	1	1	(⁵)	1	1	1	(⁵)	1	1
Subject to internal limits only ¹	19	20	18	21	18	20	19	20	30	17
Subject to internal limits and overall limits ¹	74	73	76	73	73	74	75	74	66	76
Subject to overall limits only ¹	6	7	5	6	7	5	5	6	2	6
Outpatient rehabilitation²										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	1	(⁵)	1	(⁵)	1	(⁵)	(⁵)	1	(⁵)	1
Subject to internal limits only ¹	26	26	25	26	27	25	29	24	31	25
Subject to internal limits and overall limits ¹	71	71	71	73	69	72	69	73	68	72
Subject to overall limits only ¹	2	2	3	1	3	2	2	3	1	3

¹ Separate limitations indicate that alcohol abuse treatment benefits are more restrictive than benefits for other treatments. For example, if a plan limits inpatient rehabilitation care to 30 days per year, but the limit on inpatient care for any other type of illness is greater than 30 days per year, the plan contains separate limits. The total is less than the sum of the individual items, because many plans had more than one type of limitation.

² Includes treatment in one or more of the following: outpatient department of a hospital, residential treatment center, organized outpatient clinic, day-night treatment center, or doctor's office. If benefits differed by location of treatment, the location offering the most beneficial coverage was tabulated.

³ Detoxification is the systematic use of medication and other methods under medical supervision, to reduce or eliminate the effects of substance abuse.

⁴ Rehabilitation is designed to alter the abusive behavior in patients once they are free of acute physical and mental complications.

⁵ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 26. Mental health care and substance abuse treatment benefits: Coverage in prepaid plans, all private industry workers, National Compensation Survey, 2005

Coverage limitation	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Mental health care										
Inpatient										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	14	17	8	7	10	15	14	14	11	14
Subject to limits ¹	86	83	92	93	90	85	86	86	89	86
Outpatient²										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	(³)	(³)	(³)	-	(³)	(³)	-	(³)	(³)	(³)
Subject to limits ¹	100	100	100	100	100	100	100	100	100	100
Alcohol abuse										
Inpatient detoxification⁴										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	16	16	17	10	16	16	16	15	19	15
Subject to limits ¹	84	84	83	90	84	84	84	85	81	85
Inpatient rehabilitation⁵										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	5	5	6	6	8	5	6	4	2	6
Subject to limits ¹	95	95	94	94	92	95	94	96	98	94
Outpatient rehabilitation²										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	1	2	(³)	(³)	1	1	1	1	(³)	1
Subject to limits ¹	99	98	100	100	99	99	99	99	100	99
Drug Abuse										
Inpatient detoxification⁴										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	16	16	17	10	16	16	16	15	19	15
Subject to limits ¹	84	84	83	90	84	84	84	85	81	85
Inpatient rehabilitation⁵										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	5	5	6	6	8	5	6	4	2	6
Subject to limits ¹	95	95	94	94	92	95	94	96	98	94
Outpatient rehabilitation²										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	1	2	(³)	(³)	1	1	1	1	(³)	1
Subject to limits ¹	99	98	100	100	99	99	99	99	100	99

¹ Limits may be set in terms of dollar or day ceilings on benefits, a requirement that the participant pay a percentage of cost (coinsurance), or a requirement that the participant pay a specific amount (deductible or copayment) before reimbursement begins or services are rendered.

² Includes treatment in one or more of the following: outpatient department of a hospital, residential treatment center, organized outpatient clinic, day-night treatment center, or doctor's office. If benefits differed by location of treatment, the location offering the most beneficial coverage was tabulated.

³ Less than 0.5 percent.

⁴ Detoxification is the systematic use of medication and other methods under medical supervision, to reduce or eliminate the effects of substance abuse.

⁵ Rehabilitation is designed to alter the abusive behavior in patients once they are free of acute physical and mental complications.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 27. Mental health care and substance abuse treatment benefits: Application to out-of-pocket expense provisions in indemnity plans, all private industry workers, National Compensation Survey, 2005

Type of coverage	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Mental health care										
Inpatient										
Total	100	100	100	100	100	100	100	100	100	100
Subject to plan's out-of-pocket limits	68	65	72	68	71	66	69	67	66	68
Not subject to plan's out-of-pocket limits	31	33	27	31	29	32	29	32	32	31
Not determinable	1	2	1	(1)	(1)	2	2	1	2	1
Outpatient²										
Total	100	100	100	100	100	100	100	100	100	100
Subject to plan's out-of-pocket limits	64	63	67	62	68	62	64	65	60	65
Not subject to plan's out-of-pocket limits	34	35	32	38	32	36	34	35	38	34
Not determinable	1	2	1	(1)	(1)	2	2	1	1	1
Alcohol abuse										
Inpatient detoxification³										
Total	100	100	100	100	100	100	100	100	100	100
Subject to plan's out-of-pocket limits	70	69	71	72	69	70	72	68	71	70
Not subject to plan's out-of-pocket limits	29	29	29	28	31	28	26	31	29	29
Not determinable	1	2	(1)	(1)	(1)	1	2	1	(1)	1
Inpatient rehabilitation⁴										
Total	100	100	100	100	100	100	100	100	100	100
Subject to plan's out-of-pocket limits	68	66	71	66	70	67	72	65	63	69
Not subject to plan's out-of-pocket limits	31	32	29	33	30	32	26	35	37	30
Not determinable	1	2	(1)	(1)	(1)	1	2	1	(1)	1
Outpatient rehabilitation²										
Total	100	100	100	100	100	100	100	100	100	100
Subject to plan's out-of-pocket limits	65	63	69	64	69	63	68	63	62	66
Not subject to plan's out-of-pocket limits	34	35	31	35	30	35	30	36	38	33
Not determinable	1	2	(1)	(1)	1	1	2	(1)	(1)	1

See footnotes at end of table.

Table 27. Mental health care and substance abuse treatment benefits: Application to out-of-pocket expense provisions in indemnity plans, all private industry workers, National Compensation Survey, 2005 — Continued

Type of coverage	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Drug abuse										
Inpatient detoxification³										
Total	100	100	100	100	100	100	100	100	100	100
Subject to plan's out-of-pocket limits	70	68	71	73	68	71	71	68	71	69
Not subject to plan's out-of-pocket limits	29	30	29	27	32	28	27	31	29	29
Not determinable	1	2	(¹)	(¹)	(¹)	1	2	1	(¹)	1
Inpatient rehabilitation⁴										
Total	100	100	100	100	100	100	100	100	100	100
Subject to plan's out-of-pocket limits	68	66	71	67	69	67	72	65	63	69
Not subject to plan's out-of-pocket limits	31	33	29	32	31	31	27	34	37	30
Not determinable	1	2	(¹)	(¹)	(¹)	1	2	1	(¹)	1
Outpatient rehabilitation²										
Total	100	100	100	100	100	100	100	100	100	100
Subject to plan's out-of-pocket limits	65	63	69	66	69	64	68	64	62	66
Not subject to plan's out-of-pocket limits	33	35	31	34	30	35	30	36	38	33
Not determinable	1	2	(¹)	(¹)	1	1	2	1	(¹)	1

¹ Less than 0.5 percent.

² Includes treatment in one or more of the following: outpatient department of a hospital, residential treatment center, organized outpatient clinic, day-night treatment center, or doctor's office. If benefits differed by location of treatment, the location offering the most beneficial coverage was tabulated.

³ Detoxification is the systematic use of medication and other methods under medical supervision, to reduce or eliminate the effects of substance abuse.

⁴ Rehabilitation is designed to alter the abusive behavior in patients once they are free of acute physical and mental complications.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 28. Mental health care benefits: Separate limits on coverage in indemnity and prepaid plans, all private industry workers, National Compensation Survey, 2005

Coverage limitation	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Indemnity										
Inpatient										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ¹	18	19	18	11	18	18	18	18	25	17
Subject to separate limits ²	82	81	82	89	82	82	82	82	75	83
Days	74	73	73	83	75	74	73	75	66	76
Dollars	8	6	12	6	9	8	12	5	13	7
Coinsurance	9	9	7	11	8	9	7	10	10	9
Copayment	8	9	5	11	5	9	10	7	5	9
Other ³	3	4	2	1	3	3	2	4	3	3
Outpatient⁴										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ¹	10	12	9	7	10	10	12	9	7	11
Subject to separate limits ²	90	88	91	93	90	90	88	91	93	89
Days	74	73	72	83	76	73	71	76	68	75
Dollars	9	7	14	2	10	9	13	7	13	8
Coinsurance	18	15	22	20	24	15	18	18	24	17
Copayment	24	26	20	27	19	27	25	24	17	26
Other ³	7	8	5	6	5	8	7	7	6	7

See footnotes at end of table.

Table 28. Mental health care benefits: Separate limits on coverage in indemnity and prepaid plans, all private industry workers, National Compensation Survey, 2005 — Continued

Coverage limitation	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Prepaid										
Inpatient										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ¹	23	26	19	14	23	23	22	23	17	23
Subject to separate limits ²	77	74	81	86	77	77	78	77	83	77
Days	68	66	72	76	73	67	63	73	79	67
Dollars	4	3	4	5	4	4	7	1	-	4
Coinsurance	4	4	4	4	(⁵)	5	4	5	4	4
Copayment	24	20	27	38	21	25	34	15	25	24
Other ³	1	1	1	(⁵)	3	(⁵)	1	1	-	1
Outpatient⁴										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ¹	10	12	6	5	6	10	10	9	4	10
Subject to separate limits ²	90	88	94	95	94	90	90	91	96	90
Days	78	79	77	73	82	77	74	81	91	76
Dollars	3	2	4	(⁵)	3	2	4	1	(⁵)	3
Coinsurance	5	4	5	10	3	5	4	5	1	5
Copayment	54	52	55	61	49	55	57	51	60	53
Other ³	1	2	1	(⁵)	2	1	(⁵)	2	2	1

¹ These include plans that provide coverage without any separate limits; they also include plans that provide coverage subject to only the major medical limits of the plan.

² Separate limitations indicate that mental health care benefits are more restrictive than benefits for other treatments. For example, if a plan limits inpatient mental health care to 30 days per year, the plan contains separate limits. The total is less than the sum of the individual items because many plans had more than one type of limitation.

³ These are plans for which comparisons were made between copayments and coinsurances for mental health care and all other illnesses. For example, outpatient mental health care had a 50-percent coinsurance payment, while office visits for

other illnesses had a \$10 copayment.

⁴ Includes treatment in one or more of the following: outpatient department of a hospital, residential treatment center, organized outpatient clinic, day-night treatment center, or doctor's office. If benefits differed by location of treatment, the location offering the most beneficial coverage was tabulated.

⁵ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 29. Alcohol abuse treatment benefits: Separate limits on coverage in indemnity plans, all private industry workers, National Compensation Survey, 2005

Coverage limitation	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Inpatient detoxification¹										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ²	23	25	21	23	23	24	26	21	26	23
Subject to separate limits ³	77	75	79	77	77	76	74	79	74	77
Days	63	63	61	68	59	65	63	63	62	63
Dollars	20	17	28	12	26	17	20	20	20	20
Coinsurance	7	6	8	5	9	6	7	7	10	6
Copayment	9	9	6	13	6	10	11	7	9	9
Other ⁴	4	4	5	1	6	3	2	6	4	4
Inpatient rehabilitation⁵										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ²	9	10	8	9	10	9	9	9	7	10
Subject to separate limits ³	91	90	92	91	90	91	91	91	93	90
Days	75	77	70	81	68	78	76	74	81	74
Dollars	23	19	32	13	30	19	24	22	22	23
Coinsurance	9	9	9	10	9	9	7	11	17	8
Copayment	10	11	8	14	8	12	14	8	10	10
Other ⁴	5	5	7	1	9	4	4	7	4	6
Outpatient rehabilitation⁶										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ²	6	7	6	4	8	6	7	6	3	7
Subject to separate limits ³	94	93	94	96	92	94	93	94	97	93
Days	66	68	60	79	58	70	67	66	66	67
Dollars	24	21	31	13	31	20	26	22	24	24
Coinsurance	17	15	21	16	23	15	15	18	28	15
Copayment	23	26	18	25	17	26	26	22	12	25
Other ⁴	9	9	9	6	10	8	7	10	7	9

¹ Detoxification is the systematic use of medication and other methods under medical supervision, to reduce or eliminate the effects of substance abuse.

² These include plans that provide coverage without any separate limits; they also include plans that provide coverage subject to only the major medical limits of the plan.

³ Separate limitations indicate that alcohol abuse treatment benefits are more restrictive than benefits for other treatments. For example, if a plan limits inpatient rehabilitation care to 30 days per year, but the limit on inpatient care for any other type of illness is greater than 30 days per year, the plan contains separate limits. The total is less than the sum of the individual items because many plans had more than one type of limitation.

⁴ These are plans for which comparisons were made between copayments and coinsurances for alcohol abuse treatment and all other illnesses. For example,

outpatient alcohol abuse treatment had a 50-percent coinsurance payment, while office visits for other illnesses had a \$10 copayment.

⁵ Rehabilitation is designed to alter the abusive behavior in patients once they are free of acute physical and mental complications.

⁶ Includes treatment in one or more of the following: outpatient department of a hospital, residential treatment center, organized outpatient clinic, day-night treatment center, or doctor's office. If benefits differed by location of treatment, the location offering the most beneficial coverage was tabulated.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 30. Alcohol abuse treatment benefits: Separate limits on coverage in prepaid plans, all private industry workers, National Compensation Survey, 2005

Coverage limitation	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Inpatient detoxification¹										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ²	37	35	46	32	49	34	38	36	39	36
Subject to separate limits ³	63	65	54	68	51	66	62	64	61	64
Days	49	52	40	49	40	51	44	54	48	49
Dollars	5	3	7	10	6	5	5	5	3	5
Coinsurance	5	4	6	4	6	4	4	6	2	5
Copayment	22	20	19	35	12	24	28	16	24	21
Other ⁴	2	1	2	2	4	1	1	2	2	2
Inpatient rehabilitation⁵										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ²	11	11	16	8	22	9	12	10	5	12
Subject to separate limits ³	89	89	84	92	78	91	88	90	95	88
Days	79	83	65	77	65	81	77	80	87	77
Dollars	7	5	11	12	7	7	8	6	5	7
Coinsurance	4	4	8	1	8	4	4	5	3	5
Copayment	28	25	29	44	19	30	37	20	37	27
Other ⁴	2	1	3	2	4	1	1	3	2	2
Outpatient rehabilitation⁶										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ²	6	7	4	5	4	6	6	6	1	7
Subject to separate limits ³	94	93	96	95	96	94	94	94	99	93
Days	71	74	69	63	71	71	63	79	77	70
Dollars	6	5	9	8	7	6	8	5	5	6
Coinsurance	7	8	8	6	6	8	10	5	1	8
Copayment	52	50	51	68	36	56	55	50	63	51
Other ⁴	2	2	1	3	5	1	(⁷)	4	2	2

¹ Detoxification is the systematic use of medication and other methods under medical supervision, to reduce or eliminate the effects of substance abuse.

² These include plans that provide coverage without any separate limits; they also include plans that provide coverage subject to only the major medical limits of the plan.

³ Separate limitations indicate that alcohol abuse treatment benefits are more restrictive than benefits for other treatments. For example, if a plan limits inpatient rehabilitation care to 30 days per year, but the limit on inpatient care for any other type of illness is greater than 30 days per year, the plan contains separate limits. The total is less than the sum of the individual items because many plans had more than one type of limitation.

⁴ These are plans for which comparisons were made between copayments and coinsurances for alcohol abuse treatment and all other illnesses. For example,

outpatient alcohol abuse treatment had a 50-percent coinsurance payment, while office visits for other illnesses had a \$10 copayment.

⁵ Rehabilitation is designed to alter the abusive behavior in patients once they are free of acute physical and mental complications.

⁶ Includes treatment in one or more of the following: outpatient department of a hospital, residential treatment center, organized outpatient clinic, day-night treatment center, or doctor's office. If benefits differed by location of treatment, the location offering the most beneficial coverage was tabulated.

⁷ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 31. Drug abuse treatment benefits: Separate limits on coverage in indemnity plans, all private industry workers, National Compensation Survey, 2005

Coverage limitation	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Inpatient detoxification¹										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ²	23	24	20	21	23	23	25	21	25	22
Subject to separate limits ³	77	76	80	79	77	77	75	79	75	78
Days	63	63	62	70	59	65	64	63	62	64
Dollars	20	16	28	12	26	17	20	20	20	20
Coinsurance	7	6	8	5	9	6	7	7	10	6
Copayment	9	9	6	13	6	10	11	7	9	9
Other ⁴	4	4	5	1	6	3	2	6	4	4
Inpatient rehabilitation⁵										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ²	9	10	8	7	10	8	9	9	7	9
Subject to separate limits ³	91	90	92	93	90	92	91	91	93	91
Days	75	77	71	83	68	79	76	75	81	74
Dollars	23	19	32	13	30	20	24	22	22	23
Coinsurance	9	9	9	10	9	9	8	10	17	8
Copayment	10	11	8	14	8	12	14	8	10	10
Other ⁴	5	5	7	1	9	4	4	7	4	6
Outpatient rehabilitation⁶										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ²	6	7	5	2	7	5	6	5	3	6
Subject to separate limits ³	94	93	95	98	93	95	94	95	97	94
Days	67	68	61	81	58	71	68	66	65	67
Dollars	23	20	31	13	31	20	25	22	24	23
Coinsurance	17	15	21	16	23	15	15	19	28	15
Copayment	23	26	18	26	17	26	26	22	12	25
Other ⁴	9	9	9	6	10	8	7	10	7	9

¹ Detoxification is the systematic use of medication and other methods under medical supervision, to reduce or eliminate the effects of substance abuse.

² These include plans that provide coverage without any separate limits; they also include plans that provide coverage subject to only the major medical limits of the plan.

³ Separate limitations indicate that drug abuse treatment benefits are more restrictive than benefits for other treatments. For example, if a plan limits inpatient rehabilitation care to 30 days per year, but the limit on inpatient care for any other type of illness is greater than 30 days per year, the plan contains separate limits. The total is less than the sum of the individual items because many plans had more than one type of limitation.

⁴ These are plans for which comparisons were made between copayments and coinsurances for drug abuse treatment and all other illnesses. For example,

outpatient drug abuse treatment had a 50-percent coinsurance payment, while office visits for other illnesses had a \$10 copayment.

⁵ Rehabilitation is designed to alter the abusive behavior in patients once they are free of acute physical and mental complications.

⁶ Includes treatment in one or more of the following: outpatient department of a hospital, residential treatment center, organized outpatient clinic, day-night treatment center, or doctor's office. If benefits differed by location of treatment, the location offering the most beneficial coverage was tabulated.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 32. Drug abuse treatment benefits: Separate limits on coverage in prepaid plans, all private industry workers, National Compensation Survey, 2005

Coverage limitation	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Inpatient detoxification¹										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ²	37	36	46	32	49	35	39	36	39	37
Subject to separate limits ³	63	64	54	68	51	65	61	64	61	63
Days	48	51	40	49	40	50	43	54	48	49
Dollars	5	3	7	10	6	5	5	5	3	5
Coinsurance	5	4	6	4	6	4	4	6	2	5
Copayment	21	20	18	35	12	23	28	15	23	21
Other ⁴	2	1	2	2	4	1	1	2	2	2
Inpatient rehabilitation⁵										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ²	11	10	14	7	19	9	13	9	2	12
Subject to separate limits ³	89	90	86	93	81	91	87	91	98	88
Days	79	83	67	78	68	81	77	81	89	78
Dollars	7	5	11	12	7	7	8	6	5	7
Coinsurance	4	4	8	1	9	4	4	5	3	5
Copayment	29	25	31	45	19	31	37	21	38	27
Other ⁴	2	1	3	2	4	1	1	3	2	2
Outpatient rehabilitation⁶										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ²	6	7	4	5	4	6	6	6	1	7
Subject to separate limits ³	94	93	96	95	96	94	94	94	99	93
Days	71	74	69	63	71	71	63	79	77	70
Dollars	6	5	9	8	7	6	8	5	5	6
Coinsurance	7	8	8	6	6	8	10	5	1	8
Copayment	52	49	49	68	37	55	55	49	63	50
Other ⁴	2	2	1	3	5	1	(7)	4	2	2

¹ Detoxification is the systematic use of medication and other methods under medical supervision, to reduce or eliminate the effects of substance abuse.

² These include plans that provide coverage without any separate limits; they also include plans that provide coverage subject to only the major medical limits of the plan.

³ Separate limitations indicate that drug abuse treatment benefits are more restrictive than benefits for other treatments. For example, if a plan limits inpatient rehabilitation care to 30 days per year, but the limit on inpatient care for any other type of illness is greater than 30 days per year, the plan contains separate limits. The total is less than the sum of the individual items because many plans had more than one type of limitation.

⁴ These are plans for which comparisons were made between copayments and coinsurances for drug abuse treatment and all other illnesses. For example,

outpatient drug abuse treatment had a 50-percent coinsurance payment, while office visits for other illnesses had a \$10 copayment.

⁵ Rehabilitation is designed to alter the abusive behavior in patients once they are free of acute physical and mental complications.

⁶ Includes treatment in one or more of the following: outpatient department of a hospital, residential treatment center, organized outpatient clinic, day-night treatment center, or doctor's office. If benefits differed by location of treatment, the location offering the most beneficial coverage was tabulated.

⁷ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 33. Dental care benefits: Coverage for selected procedures and median percentage of usual, customary, and reasonable charge, all private industry workers, National Compensation Survey, 2005

Categories of care and extent of coverage	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Exams										
Total	100	100	100	100	100	100	100	100	100	100
Covered ¹	100	100	100	100	100	100	100	100	100	100
In full ²	21	19	22	22	24	19	18	22	22	20
Scheduled cash allowance	2	1	3	1	3	1	2	2	3	2
Subject to copayment ³	4	3	3	8	2	4	5	3	3	4
Percent of usual, customary, and reasonable charge ⁴	73	75	71	67	70	74	74	72	72	73
Other ⁵	1	1	1	(⁶)	1	1	1	1	(⁶)	1
Not covered	(⁶)	(⁶)	-	-	-	(⁶)	(⁶)	-	-	(⁶)
Not determinable	(⁶)	-	-	(⁶)	-	(⁶)	-	(⁶)	-	(⁶)
Median percent	100	100	100	100	100	100	100	100	100	100
Xrays										
Total	100	100	100	100	100	100	100	100	100	100
Covered ¹	100	100	100	100	100	100	100	100	100	100
In full ²	20	19	22	22	23	19	19	21	21	20
Scheduled cash allowance	2	1	3	1	3	1	2	2	3	2
Subject to copayment ³	4	3	3	9	2	4	5	3	4	4
Percent of usual, customary, and reasonable charge ⁴	73	75	72	67	71	74	74	73	72	74
Other ⁵	1	1	1	(⁶)	1	1	1	1	(⁶)	1
Not covered	(⁶)	(⁶)	-	-	-	(⁶)	(⁶)	-	-	(⁶)
Not determinable	(⁶)	-	-	(⁶)	-	(⁶)	-	(⁶)	-	(⁶)
Median percent	100	100	100	100	100	100	100	100	100	100
Fillings										
Total	100	100	100	100	100	100	100	100	100	100
Covered ¹	100	100	100	99	100	100	100	100	100	100
In full ²	4	5	2	2	3	4	1	5	4	4
Scheduled cash allowance	4	4	4	3	3	4	5	3	5	3
Subject to copayment ³	5	5	5	4	6	5	8	3	5	5
Percent of usual, customary, and reasonable charge ⁴	87	86	88	91	88	87	85	88	87	87
Other ⁵	1	1	1	(⁶)	1	1	1	1	(⁶)	1
Not covered	-	-	-	-	-	-	-	-	-	-
Not determinable	(⁶)	(⁶)	-	1	-	(⁶)	(⁶)	(⁶)	-	(⁶)
Median percent	80	80	80	80	80	80	80	80	80	80

See footnotes at end of table.

Table 33. Dental care benefits: Coverage for selected procedures and median percentage of usual, customary, and reasonable charge, all private industry workers, National Compensation Survey, 2005 — Continued

Categories of care and extent of coverage	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Surgery⁷										
Total	100	100	100	100	100	100	100	100	100	100
Covered ¹	99	99	100	99	100	99	99	100	100	99
In full ²	3	3	2	1	3	3	1	4	3	3
Scheduled cash allowance	4	4	4	3	3	4	5	3	5	4
Subject to copayment ³	6	6	5	4	6	5	9	4	6	6
Percent of usual, customary, and reasonable charge ⁴	87	85	88	91	88	87	84	88	86	87
Other ⁵	1	1	1	(⁶)	1	1	1	1	(⁶)	1
Not covered	(⁶)	(⁶)	-	(⁶)	-	(⁶)	-	(⁶)	-	(⁶)
Not determinable	(⁶)	1	(⁶)	(⁶)	(⁶)	1	1	(⁶)	(⁶)	(⁶)
Median percent	80	80	80	80	80	80	80	80	80	80
Periodontal care										
Total	100	100	100	100	100	100	100	100	100	100
Covered ¹	98	97	99	98	99	97	96	99	99	98
In full ²	2	2	1	(⁶)	1	2	1	2	2	2
Scheduled cash allowance	4	4	4	6	3	5	5	4	5	4
Subject to copayment ³	6	7	6	4	7	6	9	5	8	6
Percent of usual, customary, and reasonable charge ⁴	86	84	87	91	87	85	80	89	85	86
Other ⁵	1	1	1	(⁶)	1	1	1	1	(⁶)	1
Not covered	1	(⁶)	1	1	1	(⁶)	1	1	(⁶)	1
Not determinable	2	2	1	(⁶)	(⁶)	2	4	(⁶)	(⁶)	2
Median percent	80	80	80	80	80	80	80	80	80	80
Endodontics										
Total	100	100	100	100	100	100	100	100	100	100
Covered ¹	98	98	99	99	99	98	96	99	99	98
In full ²	2	2	2	(⁶)	1	2	1	2	2	2
Scheduled cash allowance	4	4	4	3	3	4	5	3	5	4
Subject to copayment ³	6	7	6	4	7	6	8	5	7	6
Percent of usual, customary, and reasonable charge ⁴	86	84	88	92	87	85	81	89	86	86
Other ⁵	1	1	1	(⁶)	1	1	1	1	(⁶)	1
Not covered	(⁶)	(⁶)	1	1	1	(⁶)	1	(⁶)	(⁶)	(⁶)
Not determinable	1	2	(⁶)	(⁶)	(⁶)	2	3	(⁶)	(⁶)	2
Median percent	80	80	80	80	80	80	80	80	80	80

See footnotes at end of table.

Table 33. Dental care benefits: Coverage for selected procedures and median percentage of usual, customary, and reasonable charge, all private industry workers, National Compensation Survey, 2005 — Continued

Categories of care and extent of coverage	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Crowns										
Total	100	100	100	100	100	100	100	100	100	100
Covered ¹	98	98	98	98	97	98	98	98	99	98
In full ²	1	1	1	(⁶)	1	1	1	(⁶)	1	(⁶)
Scheduled cash allowance	4	4	4	4	3	5	5	4	5	4
Subject to copayment ³	7	7	7	3	8	6	9	6	8	6
Percent of usual, customary, and reasonable charge ⁴	87	86	87	91	86	87	83	88	85	87
Other ⁵	1	1	1	(⁶)	1	1	1	1	(⁶)	1
Not covered	2	2	2	2	3	1	2	2	1	2
Not determinable	(⁶)	(⁶)	(⁶)	-	(⁶)	(⁶)	(⁶)	(⁶)	(⁶)	(⁶)
Median percent	50	50	50	50	50	50	50	50	50	50
Prosthetics										
Total	100	100	100	100	100	100	100	100	100	100
Covered ¹	97	96	97	98	94	98	97	97	98	96
In full ²	(⁶)	(⁶)	1	(⁶)	1	(⁶)	1	(⁶)	(⁶)	(⁶)
Scheduled cash allowance	4	4	4	4	3	5	5	4	5	4
Subject to copayment ³	7	7	7	3	8	6	9	6	8	7
Percent of usual, customary, and reasonable charge ⁴	85	84	86	91	83	87	82	87	86	85
Other ⁵	1	1	1	(⁶)	1	1	1	1	(⁶)	1
Not covered	2	2	2	2	3	1	2	2	1	2
Not determinable	1	2	1	(⁶)	3	1	1	2	(⁶)	2
Median percent	50	50	50	50	50	50	50	50	50	50

See footnotes at end of table.

Table 33. Dental care benefits: Coverage for selected procedures and median percentage of usual, customary, and reasonable charge, all private industry workers, National Compensation Survey, 2005 — Continued

Categories of care and extent of coverage	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Orthodontia										
Total	100	100	100	100	100	100	100	100	100	100
Covered ^{1,8}	73	73	76	64	75	72	68	76	80	72
In full ²	(⁶)	(⁶)	(⁶)	-	(⁶)	(⁶)	-	(⁶)	-	(⁶)
Scheduled cash allowance	6	6	5	7	4	7	5	6	9	5
Subject to copayment ³	6	6	7	5	7	6	9	5	6	6
Percent of usual, customary, and reasonable charge ⁴	62	61	67	53	66	61	55	66	68	61
Other ⁵	4	4	3	4	2	5	3	5	4	4
Not covered	21	22	20	26	20	22	24	20	14	23
Not determinable	5	5	4	9	4	6	8	4	6	5
Median percent	50	50	50	50	50	50	50	50	50	50

¹ Sum of individual items is greater than total because some participants were in plans with more than one limit.

² Includes plans that paid the full cost, with no deductible or maximum dollar amount.

³ Participant pays a specific amount per procedure and plan pays all remaining expenses. In the case of orthodontia, the copayment is generally applied once per lifetime.

⁴ Charges assessed by healthcare providers based on the usual, customary, and reasonable (UCR) fees in the locality. Normally a plan will pay all or a portion of the expenses incurred up to the UCR charge; expenses above the UCR charge must be paid by the plan participant.

⁵ Includes plans that provide care based on an incentive schedule or discounted benefit. An incentive schedule is a reimbursement arrangement in which the

percentage of dental expenses paid by the plan increases if regular dental appointments are scheduled. Discounted benefits are available if obtained from an approved provider.

⁶ Less than 0.5 percent.

⁷ Excludes plans that limited coverage to accidental injuries, removal of impacted wisdom teeth, or repair of jaw.

⁸ Includes plans that have coverage, but the type is unknown. Previously, these plans were included under the category "Not determinable".

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 34. Dental care benefits: Amount of individual deductible,¹ all private industry workers, National Compensation Survey, 2005

Type of deductible	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Subject to separate dental deductible ² ..	73	72	73	79	71	74	75	72	60	75
Yearly deductible only	72	72	72	79	71	73	74	72	59	75
\$25	11	11	11	12	15	10	9	12	14	11
\$50	51	53	47	53	43	55	53	51	34	55
Other	9	6	13	9	12	7	10	8	8	9
Unspecified	1	1	1	4	1	2	2	1	3	1
Lifetime deductible only	(³)	(³)	1	(³)	-	1	1	(³)	1	(³)
Both yearly and lifetime deductible	(³)	(³)	(³)	-	-	(³)	(³)	-	(³)	(³)
No deductible	24	25	24	20	25	24	23	25	35	22
Not determinable	3	3	3	1	4	2	2	3	5	2
Average employee yearly deductible	\$51	\$50	\$55	\$50	\$53	\$51	\$53	\$50	\$51	\$51

¹ Amount of deductible described is for each insured person. In some plans, the individual and family deductibles are identical. Excludes separate deductibles for orthodontic procedures.

² A single deductible may not apply to all covered dental procedures. If separate deductibles applied to different procedures, the sum of the deductible amounts was tabulated.

³ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 35. Dental care benefits: Relationship of yearly family deductibles to yearly individual deductibles, all private industry workers, National Compensation Survey, 2005

Relationship between individual and family deductible	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total ¹	100	100	100	100	100	100	100	100	100	100
With individual and family deductible	56	54	59	62	58	56	54	58	41	59
Family deductible is:										
2 times individual deductible	12	14	7	15	11	13	11	13	12	12
3 times individual deductible	42	39	49	45	44	42	40	44	28	45
Other	2	1	3	1	3	1	3	1	1	2
No deductible or no family deductible	40	42	37	32	37	41	41	39	51	37
Not determinable	3	3	3	1	4	2	2	3	5	2

¹ Includes workers where the individual or family deductible is unspecified.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 36. Dental care benefits: Maximum benefit provision,¹ all private industry workers, National Compensation Survey, 2005

Dollar amount ²	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Yearly maximum specified ³	88	88	91	79	91	86	85	89	87	88
Less than \$1,000	8	7	9	5	10	7	7	8	7	8
\$1,000	31	28	37	31	33	30	31	31	30	31
\$1,001–\$1,499	6	7	6	4	4	7	4	7	6	6
\$1,500	30	33	24	31	30	30	33	29	23	32
Greater than \$1,500	13	13	15	8	14	13	9	15	21	11
Unspecified	(⁴)	(⁴)	(⁴)	(⁴)	1	(⁴)	1	(⁴)	-	(⁴)
No yearly maximum	10	10	7	15	7	11	12	9	9	10
Maximum provision not determinable	3	2	2	6	3	3	4	2	4	2
Average yearly maximum	\$1,321	\$1,337	\$1,296	\$1,305	\$1,308	\$1,327	\$1,310	\$1,327	\$1,413	\$1,304

¹ Includes all covered dental procedures except orthodontia. Amount of maximum specified is for each insured person.

² Coverage for dental procedures may be subject to scheduled allowance, deductible, or coinsurance provisions, in addition to maximum dollar limitations.

³ If separate yearly maximums applied to different procedures, the sum of the maximum was tabulated. Maximums applied to dental expenses only.

⁴ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 37. Orthodontia care benefits: Maximum benefit provision,¹ all private industry workers, National Compensation Survey, 2005

Dollar amount	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Lifetime maximum specified	79	78	81	71	83	77	70	83	80	78
Less than \$1,000	6	5	6	6	3	6	5	6	8	5
\$1,000	29	26	34	31	28	29	31	28	26	29
\$1,001–\$1,499	2	3	2	1	2	3	2	3	2	2
\$1,500	25	28	20	22	27	24	18	29	14	27
Greater than \$1,500	17	16	20	12	22	14	14	18	30	14
Dollar amount unspecified	(²)	(²)	(²)	(²)	1	(²)	1	(²)	(²)	(²)
No lifetime maximum	20	21	18	27	16	22	28	16	17	21
Not determinable	1	1	1	1	1	1	2	1	2	1
Average lifetime maximum ³	\$1,385	\$1,385	\$1,402	\$1,322	\$1,482	\$1,343	\$1,342	\$1,403	\$1,535	\$1,352

¹ Coverage for orthodontic procedure may be subject to scheduled allowance, deductible, or coinsurance provisions, in addition to maximum dollar limitations.

² Less than 0.5 percent.

³ The average is presented for all covered workers; averages exclude workers without the plan provision.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 38. Orthodontia care benefits: Type of individuals covered, all private industry workers, National Compensation Survey, 2005

Type of individual covered	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Dependent children only	47	45	51	43	47	47	41	50	49	46
Employee and dependents	47	48	44	44	48	46	49	45	45	47
Not determinable	7	7	5	13	5	7	10	5	7	7

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 39. Orthodontia care benefits: Comparison in dollar maximums between employees and dependents, all private industry workers, National Compensation Survey, 2005

Categories of care and extent of coverage	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Difference in dollar maximums	3	3	2	4	4	2	3	3	2	3
No difference in dollar maximums	96	96	96	96	93	97	95	96	97	96
Not determinable	1	1	2	(¹)	3	(¹)	2	1	1	1

¹ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 40. Vision care benefits: Coverage for selected procedures, all private industry workers, National Compensation Survey, 2005

Type of vision benefit	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Exams										
Total	100	100	100	100	100	100	100	100	100	100
Covered ¹	99	99	100	100	100	99	99	100	100	99
In full	29	28	31	26	34	27	31	28	34	27
Scheduled cash allowance	20	17	27	16	23	18	18	21	28	18
Subject to copayment	48	50	41	61	40	51	47	49	40	51
Retail discount	4	5	3	2	3	4	5	3	1	5
Other ²	2	3	2	1	3	2	2	2	3	2
Not covered	(³)	(³)	(³)	(³)	-	(³)	(³)	(³)	-	(³)
Not determinable	(³)	(³)	(³)	(³)	-	1	1	(³)	-	1
Glasses										
Total	100	100	100	100	100	100	100	100	100	100
Covered ¹	100	100	100	100	100	100	100	100	100	100
In full	13	13	12	12	17	11	13	13	17	11
Scheduled cash allowance	50	50	50	50	47	51	43	53	51	50
Subject to copayment	33	33	32	38	29	35	30	35	31	34
Retail discount	20	22	15	21	17	20	29	14	11	22
Other ²	3	3	4	2	4	3	3	3	4	3
Not covered	(³)	(³)	(³)	-	-	(³)	(³)	(³)	(³)	(³)
Contacts⁴										
Total	100	100	100	100	100	100	100	100	100	100
Covered ¹	99	100	98	100	98	100	98	100	98	100
In full	8	9	7	8	8	9	11	7	6	9
Scheduled cash allowance	60	59	63	61	64	59	49	66	65	59
Subject to copayment	22	20	24	27	21	23	21	23	33	19
Retail discount	21	23	16	23	17	23	29	17	12	24
Other ²	3	3	4	2	7	2	2	4	4	3
Not covered	(³)	(³)	1	(³)	1	(³)	1	(³)	2	(³)
Not determinable	(³)	(³)	(³)	(³)	(³)	(³)	1	(³)	1	(³)

¹ The total is less than the sum of individual items because many participants are in plans with more than one type of limitation.

² Includes plans subject to coinsurance and retail discount.

³ Less than 0.5 percent.

⁴ Includes plans that provide coverage for elected purchase of contact lenses;

medically necessary contact lenses (that is, cataract surgery) normally are provided under the surgical portion of the medical plan and are not described in this table.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category.

Chapter 2. Retirement Income Benefits

Retirement plans are classified as either defined benefit or defined contribution plans. Defined benefit plans determine payments according to a fixed formula based on salary, years of service, and age. Defined contribution plans determine payouts on the amount of money contributed and the rate of return on the money invested.

Defined Benefit Plans

Defined benefit pension plans provide employees with guaranteed retirement benefits based on benefit formulas. A participant's retirement age, length of service, and preretirement earnings may affect the benefits received. Definitions, key provisions, and related terms follow.

Traditional

Terminal-earnings formulas. Benefits are based on a percentage of average earnings during a specified number of years at the end of a worker's career (or when earnings are highest), multiplied by the number of years of service recognized by the plan.

Career earnings formulas. Benefits are based on a percentage of an average of career earnings for every year of service recognized by the plan.

Dollar amount formulas. Benefits are based on a dollar amount per month for each year of service recognized by the plan.

Percentage-of-contribution formulas. Benefits are based on employer and, occasionally, employee contributions. Benefits equal a percentage of total contributions.

Other types

Cash balance formulas. Benefits are computed as a percentage of each employee's account balance. Employers specify a contribution, and a rate of interest on that contribution, that will provide a set amount at retirement, generally as a lump sum.

Pension equity. For each year of work, employees are credited with a percentage applied to their final average earnings. Benefits are generally disbursed as a lump sum.

Normal retirement

Normal retirement is the age at which plan participants may retire and receive all accrued benefits.

Early retirement

Early retirement is the age (or a combination of age and service) at which plan participants may retire and receive all accrued benefits, minus a reduction for the years prior to their normal retirement age.

Benefit payment methods

Payments from defined benefit plans may be in the form of a straight life annuity, a joint-and-survivor annuity, a percentage of unreduced accrued benefit, or a lump sum.

Straight life annuity. A periodic payment made for the life of the retiree, with no additional payments to survivors.

Joint-and-survivor annuity. The Employee Retirement Income Security Act of 1974 (ERISA) requires defined benefit pension plans that offer an annuity as a payment option to provide a qualified joint-and-survivor annuity (QJSA) as the normal benefit payment for married participants. A QJSA is an immediate annuity for the life of the participant and a survivor annuity for the life of the participant's spouse. The amount of the survivor annuity may not be less than 50 percent, or more than 100 percent, of the amount payable during the time the participant and spouse are both alive. The annuity payable for the life of the participant is lower than that for a straight life annuity; to account for the increased length of time over which payments will be made, this reduction may be a percentage of the straight life benefit, such as 10 percent, or may be based on the life expectancy of the participant and spouse.

Percentage of unreduced accrued benefit. Under this method, the participant's pension is not reduced to adjust for survivor benefits. The participant will receive an amount equal to the straight life annuity, and the spouse will receive a proportion of that amount, often 50 percent, should the participant die.

Lump-sum payment. The participant may opt for a full lump sum, with no further benefits received from the plan. If a plan provides for a partial lump-sum payment, the participant will usually receive a reduced annuity as well.

Vesting

Vesting. This term refers to the amount of time a participant must work before earning a nonforfeitable right to a retirement benefit. Once vested, the accrued benefit is retained even if the worker leaves the employer before reaching retirement age.

Cliff vesting. No vesting occurs until an employee satisfies the service requirements for 100-percent vesting—for example, 5 years.

Graded vesting. An employee's nonforfeitable percentage of employer contributions increases over time, until reaching 100 percent.

Integration with Social Security

Defined benefit plans may “integrate” retirement benefits with Social Security benefits. Under this approach, the employer's contribution to Social Security (FICA taxes) is taken into account when plan benefits are computed. Integration may be accomplished by an offset or a step-rate method.

Offset. Part of a participant's Social Security benefit is subtracted from the benefit otherwise payable by the plan. The maximum allowable offset is 83.3 percent of the Social Security benefit. The most common offset is 50 percent.

Step rate. Lower benefit rates are applied to earnings up to the specified taxable Social Security wage base (that is, the earnings subject to Social Security tax) in a given year.

Portability

Portability is a participant's ability to maintain and transfer accumulated pension benefits when changing jobs. Portability provisions in defined benefit plans generally cover portability of assets, portability of credited service, or both.

Portability of assets. Participants can withdraw their accumulated pension benefits or transfer them to another retirement arrangement.

Portability of credited service. Participants are allowed to count the years of service with a previous employer when determining benefits from their current employer.

Disability retirement

Retirement resulting from a totally disabling injury or illness prior to eligibility for early or normal retirement. Plans providing disability retirement benefits may have a service requirement of 10 years or more. Benefits may be immediate or deferred.

Defined Contribution Plans

Defined contribution plans are retirement plans that specify the level of employer contributions and place those contributions into individual employee accounts.

Plan types

Savings and thrift plans. Employees may contribute a predetermined portion of earnings (usually pretax)—all or part of which the employer matches—to an individual account. Employers may match a fixed percentage of employee contributions or a percentage that varies by length of service, the amount of employee contribution, or other factors. Contributions are invested as directed by the employee or employer. Although usually designed as a long-term savings vehicle, savings and thrift plans may allow withdrawals and loans before retirement.

Deferred profit-sharing plans. A company credits a portion of company profits to employees' accounts. Plans may establish a formula for sharing profits, but this is not a requirement. Most plans hold money in employee accounts until retirement, disability, or death.

Money purchase pension plans. Fixed employer contributions, typically calculated as a percentage of employee earnings, are allocated to individual employee accounts each year. Some plans may allow employee contributions, but employees are usually not required to make any contributions. Employers may also make profit-sharing contributions to these plans at their discretion.

Employee stock ownership plans (ESOPs). The employer pays a designated amount, often borrowed, into a fund which then invests primarily in company stock. Any debt incurred in the purchase of the stock is repaid by the company. Stock then is distributed to employees according to a formula.

Individual retirement accounts (IRAs). An IRA is a retirement savings plan. There are several types of IRAs: Traditional IRAs, Roth IRAs, SEP IRAs, and SIMP IRAs. Traditional and Roth IRAs are established by individuals who are allowed to contribute earnings up to a set maximum dollar amount. SEPs and SIMPs are retirement plans established by employers. (See SEPs and SIMPs definitions for more details.)

Simplified employee pensions (SEPs). An individual retirement account (IRA) is established for each eligible employee. The employee is immediately vested in employer contributions and generally directs the investment of the money. These arrangements are sometimes called SEP-IRA's.

Savings-incentive match plans (SIMPs). These plans can be adopted by employers who have 100 or fewer employees and

who do not offer any other retirement plans. The plans can be either IRAs established for each employee or part of a 401(k) plan (defined later in this chapter under “Related plans and terms”). Within limits, contributions to these plans are not tax deductible until withdrawn. SIMPs are subject to simplified reporting requirements.

Internal Revenue Code (IRC) Section 401(k) (salary reduction with employer contribution) plan. This plan allows employees to make pretax contributions to deferred compensation plans through salary reduction agreements. These arrangements often are associated with savings and thrift and other defined contribution plans.

Investment choices

Company stock. Employees receive equity in the company that sponsors the defined contribution plan.

Common stock fund. This is a professionally managed fund invested in the common stock of a variety of companies.

Fixed-interest securities. These securities include bonds and other non-Federal instruments that pay a fixed interest rate over a period of time.

Diversified investments. These are professionally managed funds that are invested in more than one type of equity or debt instrument.

Money market fund. This is a professionally managed mutual fund that invests in short-term Treasury bills, certificates of deposit, or corporate bonds. The fund managers sell shares to investors, who receive regular payments of interest.

Withdrawals and loans

Withdrawals. Prior to normal payout (usually at retirement), defined contribution plan participants may be allowed to withdraw all or a portion of the employer funds from their accounts. While most early withdrawals incur tax penalties, hardship withdrawals do not. (See below.) To avoid tax penalties, many plans have loan provisions that allow employees to borrow from their accounts, with interest, for a specified period of time.

Hardship withdrawals. Employees are usually not penalized when money is withdrawn as a result of a hardship, often defined as a death or illness of a family member, educational expenses, sudden uninsured losses, or a need to prevent eviction from one’s primary residence.

Loans. Defined contribution plans may allow participants to borrow employer funds, with interest, from their accounts. Loan amounts are often limited to a portion of the account balance. They usually have to be repaid within 5 years, but longer payment periods may apply for home purchase or renovation loans.

Transfers or rollovers. A rollover is a direct payment of plan benefits from a defined contribution plan into an IRA or another employer’s plan. In a direct rollover, the employee is not taxed on the payment until it is later withdrawn or distributed.

Vesting

Vesting refers to the amount of time a participant must work before earning a nonforfeitable right to a retirement benefit. Once vested, the worker retains the accrued benefit even if he or she leaves the employer before reaching retirement age. Under ERISA, defined contribution plans are subject to the same vesting rules as defined benefit plans, but vesting schedules vary. Vesting schedules apply only to employer contributions; employee contributions (including pretax contributions) are always 100-percent vested.

Immediate full vesting. Employees are immediately eligible to receive 100 percent of employer contributions.

Graded vesting. An employee’s nonforfeitable percentage of employer contributions increases over time, until vesting reaches 100 percent.

Cliff vesting. No vesting occurs until an employee satisfies the service requirements for 100-percent vesting—for example, 5 years.

Employer contribution methods

Specified matching percent. This feature is common in savings and thrift plans. The employer matches a specified percentage of employee contributions. The matching percentage can vary by length of service, amount of employee contribution, and other factors.

Fixed percentage of profits formula. This feature is common in deferred profit-sharing plans. The employer contributes a fixed percentage of total annual profits to the plan. For example, no matter what the level of profits, 5 percent is contributed to the plan. Profits may include those for the entire company or just those in a specific business unit. In a variation of this formula, employers set aside a reserve amount of profits (for example, \$1 million) and pay only a fixed percentage of any profits above this amount into the employees’ defined contribution plan.

Percentage of employee earnings. The employer contributes a fixed percentage of each employee’s earnings to his or her individual account. This feature is common in money purchase plans.

Related plans and terms

Stock bonus plan. Contributions are placed in a trust fund that invests in securities, including those of the employing

company. This type of plan is financed by the employer or jointly by the employer and employee. Upon the employee's retirement or separation from the company, proceeds from the trust fund are paid out in the form of company stock or cash.

Automatic enrollment. As soon as eligibility requirements are met, employees become automatically covered under a plan but have the right to decline coverage at any time. A minimum default employee contribution is usually set, but employees may choose to contribute a different percentage.

Table 41. Defined benefit plans: Summary of plan provisions, all private industry workers, National Compensation Survey, 2005

Plan provisions	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Benefits based on earnings	53	56	43	73	39	59	48	54	37	61
Benefits with integrated formula	28	32	21	37	29	28	25	30	11	37
Benefits subject to a maximum	20	18	21	25	17	21	24	19	12	24
Early retirement benefits available	82	76	89	94	90	79	76	84	87	80
Disability retirement benefits available ..	76	69	85	82	90	69	73	77	88	69

NOTE: Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 42. Defined benefit plans: Eligibility requirements, all private industry workers, National Compensation Survey, 2005

Eligibility requirement	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Plan participation available to new employees	93	95	88	100	87	96	91	94	88	96
With minimum age or service requirements	72	74	66	84	58	79	70	73	60	79
Service requirement only	25	28	22	14	28	23	21	26	19	27
Less than 1 year	4	3	6	3	8	2	6	3	5	3
1 year	20	25	16	10	20	21	15	22	14	24
Greater than 1 year	(¹)	(¹)	(¹)	-	-	(¹)	-	(¹)	(¹)	(¹)
Age 21	46	45	42	69	29	54	47	45	37	50
No service requirement	6	7	5	3	7	5	6	6	5	6
Less than 1 year	1	1	(¹)	(¹)	-	1	(¹)	1	(¹)	1
1 year	37	37	30	66	21	44	36	37	25	43
Greater than 1 year	3	(¹)	7	-	(¹)	4	5	2	7	(¹)
Other than age 21	2	2	2	1	1	2	2	2	3	1
No service requirement	(¹)	1	(¹)	(¹)	-	1	1	(¹)	(¹)	(¹)
Less than 1 year	(¹)	(¹)	-	-	-	(¹)	1	-	-	(¹)
1 year	1	1	2	1	1	2	(¹)	2	3	(¹)
No minimum age or service requirement	21	21	21	16	29	17	21	21	27	17
Plan participation not available to new employees	3	3	3	(¹)	4	2	2	3	3	3
Not determinable	4	2	9	(¹)	9	2	7	3	9	2
Average service requirement (in months)	12	12	12	12	11	12	12	12	13	12

¹ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 43. Defined benefit plans: Plan sponsor, all private industry workers, National Compensation Survey, 2005

Plan sponsor	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Single employer	82	92	68	77	74	86	73	85	57	95
Multiemployer group ¹	17	7	31	23	26	13	24	15	42	4
Employer association ²	1	1	(³)	-	-	1	2	-	(³)	1

¹ Plans established by a labor organization and provided to employees of two or more unrelated companies in accordance with a collective bargaining agreement.

² Plans provided by a group of employers that banded together to provide benefits.

³ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 44. Defined benefit plans: Primary formula, all private industry workers, National Compensation Survey, 2005

Characteristics	Traditional					Cash balance	Pension equity
	All traditional plans	Percent of terminal earnings	Percent of career earnings	Dollar amount formula	Percent of contribution formula		
All workers	75	39	14	18	4	23	2
Worker characteristics							
White collar	65	46	10	6	3	33	2
Blue collar	87	27	16	37	7	12	1
Service	86	41	32	12	(¹)	14	1
Full time	74	39	11	19	4	24	2
Part time	83	37	36	7	4	17	(¹)
Union	88	21	15	41	10	12	(¹)
Nonunion	68	48	13	6	1	29	3
Average wage less than \$15 per hour ...	77	44	18	11	4	22	1
Average wage \$15 per hour or higher ...	74	37	12	21	4	24	2
Establishment characteristics							
Goods producing	88	32	7	42	7	10	2
Service producing	68	42	17	6	3	30	2
1 to 99 workers	73	27	21	16	9	25	1
100 workers or more	75	42	12	19	3	23	2

¹ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 45. Defined benefit plans: Integration with Social Security, all private industry workers, National Compensation Survey, 2005

Integration with Social Security	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
With integrated formula	28	32	21	37	29	28	25	30	11	37
Step-rate excess ¹	20	21	14	33	16	21	20	19	9	25
Social Security breakpoint	19	21	14	33	16	21	19	19	9	25
Dollar amount breakpoint	(²)	(²)	(²)	-	(²)	(²)	(²)	(²)	-	(²)
Offset by Social Security ³	9	11	8	4	13	8	5	10	2	13
Without integrated formula	70	67	75	62	67	71	75	68	85	62
Not determinable	2	1	3	1	5	1	(²)	3	4	1

¹ Formula applies lower benefit rate to earnings subject to FICA (Social Security) taxes or below a specific dollar breakpoint.

² Less than 0.5 percent.

³ Benefit as calculated by formula is reduced by portion of primary Social Security payment.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 46. Defined benefit plans: Terminal earnings formulas, all private industry workers, National Compensation Survey, 2005

Terminal earnings	All workers	Occupational group		Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100
Flat percent per year of service	43	43	35	28	49	42	43	66	38
Less than 1.00 percent	1	1	(¹)	(¹)	1	2	1	-	1
1.00–1.24 percent	6	6	6	6	6	3	7	5	7
1.25–1.49 percent	4	4	2	5	3	2	4	3	4
1.50–1.74 percent	17	15	22	16	17	10	18	21	16
1.75–1.99 percent	12	12	3	-	16	12	12	29	8
2.00–2.24 percent	3	4	1	(¹)	4	12	1	5	3
2.25 percent or greater	1	1	(¹)	1	1	-	1	4	(¹)
Percent per year varies	47	47	56	69	39	42	48	26	52
By service	11	11	13	28	5	-	13	10	11
By earnings	23	21	33	29	21	24	23	13	26
By earnings and service	13	15	10	12	13	18	12	3	15
Other	10	10	10	3	12	16	9	8	10
Average flat percent per year of service	1.59	1.60	1.56	1.49	1.62	1.66	1.58	1.76	1.52

¹ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 47. Defined benefit plans: Definitions of terminal earnings, all private industry workers, National Compensation Survey, 2005

Terminal earnings definition	All workers	Occupational group		Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100
1 year	(¹)	(¹)	(¹)	-	(¹)	-	(¹)	(¹)	(¹)
3 years	20	19	14	15	22	9	22	43	14
Last 3	1	2	1	1	1	-	2	5	1
High 3	1	1	1	3	(¹)	1	1	(¹)	1
Of last 10	1	1	1	2	-	-	1	-	1
Of career	(¹)	(¹)	(¹)	-	(¹)	1	(¹)	(¹)	(¹)
Of other time period	(¹)	(¹)	-	(¹)	-	-	(¹)	-	(¹)
High consecutive 3	18	16	12	12	20	7	20	38	13
Of last 10	5	4	6	4	6	5	5	10	4
Of career	12	11	6	6	14	2	14	28	8
Of other time period	(¹)	1	-	1	-	-	(¹)	-	(¹)
5 years	72	74	78	84	68	74	72	42	79
Last 5	1	1	-	-	1	-	1	(¹)	1
High 5	20	18	31	19	21	31	18	18	21
Of last 10	18	15	28	19	18	29	16	15	19
Of career	3	2	4	-	4	2	3	4	2
High consecutive 5	51	55	46	65	45	43	52	23	57
Of last 10	39	42	38	47	36	37	39	17	44
Of career	11	13	8	18	8	6	12	6	12
Of other time period	1	1	1	-	1	-	1	-	1
Other period	7	6	9	1	9	13	6	14	5
Not determinable	1	1	-	-	1	4	(¹)	-	1

¹ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 48. Defined benefit plans: Dollar amount formulas, all private industry workers, National Compensation Survey, 2005

Dollar amount formula	All workers	Blue-collar occupations	Goods-producing industries	Establishments with 100 workers or more	Union workers
Total	100	100	100	100	100
Flat monthly amount per year of service	84	91	88	89	94
\$5.00–\$9.99	12	16	16	12	14
\$10.00–\$14.99	6	7	7	7	6
\$15.00–\$19.99	2	1	3	2	3
\$20.00–\$24.99	4	5	5	5	5
\$25.00–\$29.99	4	6	6	5	5
\$30.00–\$34.99	9	9	9	12	9
\$35.00–\$39.99	10	11	10	12	11
\$40.00–\$44.99	9	5	4	8	11
\$45.00–\$49.99	12	12	14	14	12
\$50.00–\$54.99	5	4	1	3	5
\$55.00 or more	11	14	13	8	13
Dollar amount varies	16	9	12	11	6
By service	7	1	1	5	1
By earnings	9	8	11	6	5
Average flat dollar amount per year of service	\$41.65	\$42.16	\$40.97	\$36.66	\$42.72

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 49. Defined benefit plans: Maximum benefit provisions, all private industry workers, National Compensation Survey, 2005

Maximum benefit provisions	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Subject to maximum years of credited service	20	18	21	25	17	21	24	19	12	24
Less than 30	4	4	4	3	-	6	8	3	1	5
30	3	3	4	4	3	3	2	4	2	4
31-34	(¹)	(¹)	(¹)	-	-	(¹)	-	(¹)	-	(¹)
35	10	8	12	15	12	9	12	9	6	12
40	2	2	2	1	1	3	1	3	2	2
Greater than 40	1	1	1	1	1	1	1	1	1	1
Not subject to maximum	67	67	70	56	73	64	59	69	73	63
Not determinable	13	15	9	20	10	15	17	12	15	13
Average credited service maximum	33.1	33.0	33.2	33.3	35.3	32.3	31.9	33.6	34.6	32.8

¹ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 50. Defined benefit plans: Selected age and service requirements for normal retirement,¹ all private industry workers, National Compensation Survey, 2005

Age or service requirement	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
No age requirement	11	15	7	3	6	13	20	8	8	12
Less than 30 years of service	9	13	4	3	4	11	14	7	5	11
30 years of service	2	2	3	-	3	2	6	1	3	2
Age 55	1	1	2	(²)	2	1	1	1	2	1
Less than 30 years of service	1	1	1	-	1	1	(²)	1	1	1
30 years of service	(²)	(²)	1	(²)	1	(²)	1	(²)	1	(²)
Age 60 ³	9	8	10	16	7	10	8	10	14	7
No service requirement	2	2	2	1	3	1	-	2	2	1
5 years of service	6	6	5	12	1	8	5	6	8	5
10 years of service	1	(²)	2	3	1	1	1	1	2	(²)
Age 62 ³	15	11	23	7	24	11	15	15	21	12
No service requirement	3	2	5	1	3	3	7	2	1	4
5 years of service	5	4	8	4	8	4	(²)	7	8	4
10 years of service	5	4	9	(²)	12	2	6	5	9	3
15 years of service	(²)	(²)	1	-	1	(²)	(²)	(²)	1	(²)
Age 65 ³	59	63	48	74	55	60	47	62	43	67
No service requirement	25	30	20	15	26	24	20	27	16	30
5 years of service	30	31	22	56	20	35	28	31	24	33
10 years of service	(²)	(²)	(²)	-	-	(²)	-	(²)	-	(²)
Sum of age plus service ⁴	1	1	1	-	2	(²)	1	1	1	1
Equals less than 80	(²)	(²)	-	-	-	(²)	-	(²)	(²)	(²)
Equals 80	(²)	-	(²)	-	1	-	-	(²)	1	-
Equals more than 80	1	1	(²)	-	2	(²)	1	1	(²)	1

¹ Normal retirement is defined as the point at which the participant could retire and immediately receive all accrued benefits by virtue of service and earnings, without reduction due to age. If a plan had alternative age and service requirements, the earliest age and associated service were tabulated; if one alternative did not specify an age, it was the requirement tabulated. Some age and service requirements are not shown separately.

² Less than 0.5 percent.

³ Includes other service requirements not shown separately.

⁴ In some plans, participants must also satisfy a minimum age or service requirement. These plans are also included in the totals for specific age and service requirements.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 51. Defined benefit plans: Availability of lump-sum benefits at retirement, all private industry workers, National Compensation Survey, 2005

Option	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
With lump sum available	52	64	34	57	40	59	49	54	40	59
Full lump sum available	43	53	23	55	26	51	41	43	31	49
Partial lump sum with reduced annuity	9	10	10	2	14	7	7	10	9	9
Other	1	1	1	1	(¹)	1	1	1	1	1
No lump sum available	40	30	55	42	47	37	46	39	49	36
Not determinable	7	6	11	1	14	4	6	8	11	5

¹ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 52. Defined benefit plans: Selected age and service requirements for early retirement,¹ all private industry workers, National Compensation Survey, 2005

Age or service requirement	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
With early retirement available	82	76	89	94	90	79	76	84	87	80
No age requirement	2	1	4	(²)	4	1	(²)	2	4	1
Less than 30 years of service	(²)	1	-	(²)	-	1	(²)	(²)	-	1
30 years of service	1	(²)	4	-	4	-	-	2	4	(²)
Less than age 55	11	12	8	15	10	11	7	12	15	9
5 years of service	4	5	-	12	-	6	1	5	7	2
10 years of service	4	3	6	1	8	2	3	4	5	3
15 years of service	1	1	(²)	-	1	(²)	(²)	1	(²)	1
20 years of service	1	2	-	(²)	-	1	2	1	-	1
25 years of service	1	1	1	1	-	2	1	1	2	(²)
Age 55	62	60	64	65	67	59	55	64	56	65
No service requirement ³	4	4	3	4	2	4	8	2	(²)	5
5 years of service	18	17	19	22	19	18	9	21	18	18
10 years of service	34	33	34	34	42	29	30	35	35	33
15 years of service	4	5	2	4	1	5	2	4	2	5
20 years of service	2	1	4	(²)	1	3	6	1	1	3
25 years of service	(²)	-	(²)	1	-	(²)	-	(²)	-	(²)
Age 60	3	1	4	14	3	3	6	2	3	3
5 years of service	(²)	(²)	1	-	1	(²)	-	(²)	1	(²)
10 years of service	2	(²)	1	12	1	2	5	1	(²)	2
15 years of service	(²)	(²)	1	-	1	(²)	-	1	1	(²)
Age 62	1	1	3	-	3	(²)	3	1	2	1
Sum of age plus service ⁴	6	4	9	-	8	4	5	6	8	4
Equals less than 80	2	3	2	-	6	(²)	1	3	(²)	3
Equals 80	3	1	7	-	2	4	5	3	8	1
Early retirement not available	12	18	5	4	3	16	14	11	7	15
Not determinable	6	6	6	3	7	5	10	5	6	6

¹ Early retirement is defined as the point at which a worker could retire and immediately receive accrued benefits based on service and earnings, but reduced for each year prior to normal retirement age. If a plan had alternative age and service requirements, the earliest age and associated service were tabulated; if one alternative did not specify an age, it was the requirement tabulated. Many age and service requirements are not shown separately.

² Less than 0.5 percent.

³ Where no service requirement is specified for early retirement, the service

required for full vesting, usually 5 years, applies.

⁴ In some plans, participants must also satisfy a minimum age or service requirement. These plans are also included in the totals for specific age and service requirements.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 53. Defined benefit plans: Early retirement reductions,¹ all private industry workers, National Compensation Survey, 2005

Early retirement reduction	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Uniform percentage of reduction ²	32	28	38	26	46	24	35	31	37	29
Reduction varies by age ³ or service	46	47	41	65	33	54	49	45	50	44
Actuarial reduction ⁴	13	14	16	2	14	13	10	14	11	15
Other reduction ⁵	(⁶)	1	(⁶)	-	(⁶)	1	2	(⁶)	(⁶)	1
Not determinable	8	10	5	7	7	8	4	9	2	11

¹ Reduction for each year prior to normal retirement.

² In specific cases, uniform percentage reductions may approximate actuarial reductions, such as early retirement at age 55 with a reduction of 6 percent per year between age 55 and the plan's normal retirement age of 62.

³ The rate of reduction is held constant within age brackets, but differs among brackets, sometimes in approximation of an actuarial table. For example, benefits may be reduced by 6 percent for each year between age 60 and the plan's normal retirement age, and by 3 percent for each year retirement precedes age 60. Also includes some plans that reduce benefits arithmetically for each year immediately below normal retirement age and actuarially below a specified age, usually 55.

⁴ The amount of the normal retirement benefit is reduced based on actuarial assumptions, so that on average, the beneficiary receives the same total lifetime benefit regardless of retirement age.

⁵ Reduced amount was not derived from normal retirement formula.

⁶ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 54. Defined benefit plans: Initiation of disability retirement benefits, all private industry workers, National Compensation Survey, 2005

Characteristics	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
With disability retirement available	76	69	85	82	90	69	73	77	88	69
Benefits begin:										
Immediately ¹	40	30	57	28	55	32	34	41	55	32
Deferred	33	37	25	41	31	34	30	34	30	35
Not determinable	3	1	3	13	4	3	8	1	2	3
Disability coverage not available	14	17	9	10	4	18	18	12	7	17
Not determinable	11	14	6	8	7	13	9	11	4	14

¹ Immediate disability pensions may be supplemented by additional allowances until an employee reaches a specified age or becomes eligible for Social Security.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 55. Defined benefit plans: Postretirement survivor benefits, all private industry workers, National Compensation Survey, 2005

Survivor benefit	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
With postretirement survivor benefits	98	99	100	87	100	97	99	98	97	99
Joint-and-survivor annuity ¹	95	97	94	87	92	97	94	95	91	98
50 percent only	23	18	27	36	18	26	27	22	28	20
51–99 percent only	3	2	5	2	7	2	5	3	7	2
100 percent only	2	4	1	(²)	1	3	4	2	(²)	3
Retiree choice of percentages	65	71	60	48	64	65	55	68	54	70
Not determinable	2	2	1	(²)	2	2	3	1	2	2
Percent of accrued benefit	3	2	6	1	8	1	4	3	6	1
No postretirement survivor benefits	2	1	(²)	13	-	3	1	2	3	1

¹ An annuity that provides income during the lifetime of both the retiree and the surviving spouse. The accrued pension will usually be actuarially reduced at retirement because of the longer time that payments are expected to be made. Employees and their spouses are required to waive the spouse annuity in writing if they desire either a pension during the employee's lifetime only or another option offered by the plan, such as guarantee of payment for a specified period.

² Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 56. Defined benefit plans: Preretirement survivor benefits, all private industry workers, National Compensation Survey, 2005

Survivor benefit	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
With preretirement survivor benefits ¹	95	94	98	98	99	94	94	96	97	95
Equivalent to joint-and-survivor annuity ²	76	70	85	69	83	72	70	77	82	72
50 percent of employee's pension	55	48	64	61	61	52	49	57	63	51
Other percent of employee's pension ³	6	6	8	4	9	5	10	5	7	6
Employee choice of percent	12	15	9	2	10	13	7	13	10	13
Percent of accrued benefit	18	21	10	27	13	20	21	17	13	20
Other ⁴	2	2	2	2	3	2	3	2	2	2
No preretirement survivor benefits	1	1	(⁵)	-	(⁵)	1	(⁵)	1	(⁵)	1
Not determinable	4	5	2	2	1	5	6	3	3	4

¹ Survivor annuity is based upon the benefit the employee would have received if retirement had occurred on the date of death.

² The spouse annuity is computed as if the employee had retired with a joint-and-survivor annuity. That is, the accrued pension is first reduced because of the longer time that payments were expected to be made to both the retiree and the surviving spouse. The spouse's share is then the specified percentage of the reduced amount.

³ Other percentages range from 51 percent to 100 percent of the retiree's

pension.

⁴ Includes annuity based on a dollar amount formula or a percentage of earnings.

⁵ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 57. Defined benefit plans: Vesting requirements, all private industry workers, National Compensation Survey, 2005

Vesting requirement	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Immediate full vesting	2	1	4	1	5	(¹)	-	2	4	1
Cliff vesting ²	89	91	86	93	85	91	90	89	89	89
Less than 5 years	2	2	1	2	1	2	2	1	1	2
5 years	84	87	79	90	78	87	79	86	80	87
10 years	2	1	4	(¹)	4	(¹)	2	2	4	(¹)
Other	1	(¹)	1	-	2	(¹)	2	(¹)	1	1
Graded vesting ³	7	7	8	6	8	7	8	7	6	8
Not determinable	1	1	2	-	2	1	2	1	(¹)	2

¹ Less than 0.5 percent.

² Under a cliff-vesting schedule, an employee is not entitled to any benefits accrued under a pension plan until satisfying the requirement for 100-percent vesting.

³ Graded vesting schedules give an employee rights to a gradually increasing share of pension benefits determined by years of service, eventually reaching

100-percent vesting status.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 58. Defined benefit plans: Provisions for early receipt of deferred vested benefits, all private industry workers, National Compensation Survey, 2005

Early retirement provision	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Immediate	21	31	9	7	10	26	23	20	10	27
Early retirement	58	52	65	68	60	57	49	61	65	55
Reduction same as early retirement ..	43	36	50	62	37	46	29	47	50	40
Reduction not the same as early retirement	12	13	12	2	19	8	16	10	12	12
Not determinable	4	4	3	4	4	3	4	4	4	3
Normal retirement	11	9	14	8	17	7	7	12	14	9
Not determinable	10	8	13	18	13	9	22	7	11	10

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 59. Traditional defined benefit plans: Selected age and service requirements for early retirement,¹ all private industry workers, National Compensation Survey, 2005

Age or service requirement	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
With early retirement available	97	97	95	98	95	98	97	97	95	98
No age requirement	2	1	4	(²)	5	1	(²)	3	4	1
Less than 30 years of service	(²)	1	-	(²)	-	1	(²)	(²)	-	1
30 years of service	2	(²)	4	-	5	-	-	2	4	(²)
Less than age 55	15	19	9	18	12	16	10	16	17	13
5 years of service	5	8	-	14	-	9	1	7	8	3
10 years of service	5	5	6	1	9	2	4	5	5	5
15 years of service	1	2	(²)	-	1	1	1	1	(²)	1
20 years of service	1	2	-	(²)	-	2	2	1	-	2
25 years of service	1	1	1	2	-	2	2	1	3	1
Age 55	69	73	66	65	69	70	67	70	60	76
No service requirement ³	3	4	1	1	-	4	6	2	(²)	4
5 years of service	20	20	20	19	21	19	12	22	18	21
10 years of service	39	41	37	38	44	36	39	39	38	39
15 years of service	4	6	2	5	1	6	2	5	2	6
20 years of service	3	2	5	(²)	1	4	8	2	1	4
25 years of service	(²)	-	(²)	1	-	(²)	-	(²)	-	(²)
Age 60	4	1	4	16	4	4	8	3	3	4
5 years of service	(²)	(²)	1	-	1	(²)	-	1	1	(²)
10 years of service	2	1	2	15	2	3	7	1	1	4
15 years of service	1	(²)	1	-	1	(²)	-	1	1	(²)
Age 62	2	1	3	-	4	1	5	1	2	1
Sum of age plus service ⁴	7	6	11	-	9	7	7	7	9	7
Equals less than 80	3	4	2	-	6	1	1	3	(²)	5
Equals 80	5	2	9	-	2	6	7	4	9	2
Early retirement not available	2	2	2	(²)	2	1	-	2	1	2
Not determinable	2	1	3	1	3	1	3	1	4	1

¹ Early retirement is defined as the point at which a worker could retire and immediately receive accrued benefits based on service and earnings, but reduced for each year prior to normal retirement age. If a plan had alternative age and service requirements, the earliest age and associated service were tabulated; if one alternative did not specify an age, it was the requirement tabulated. Many age and service requirements are not shown separately.

² Less than 0.5 percent.

³ Where no service requirement is specified for early retirement, the service

required for full vesting, usually 5 years, applies.

⁴ In some plans, participants must also satisfy a minimum age or service requirement. These plans are also included in the totals for specific age and service requirements

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 60. Traditional defined benefit plans: Early retirement reductions,¹ all private industry workers, National Compensation Survey, 2005

Early retirement reduction	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Uniform percentage of reduction ²	34	31	40	28	47	26	37	34	38	32
Reduction varies by age ³ or service	47	50	40	63	32	56	50	46	49	45
Actuarial reduction	13	12	16	1	15	12	10	14	11	14
Other reduction ⁴	(⁵)	(⁵)	(⁵)	-	(⁵)	(⁵)	-	(⁵)	(⁵)	(⁵)
Not determinable	6	7	4	8	6	6	4	7	2	9

¹ Reduction for each year prior to normal retirement.

² In specific cases, uniform percentage reductions may approximate actuarial reductions, such as early retirement at age 55 with a reduction of 6 percent per year between age 55 and the plan's normal retirement age of 62.

³ The rate of reduction is held constant within age brackets, but differs among brackets, sometimes in approximation of an actuarial table. For example, benefits may be reduced by 6 percent for each year between age 60 and the plan's normal retirement age, and by 3 percent for each year retirement precedes age 60. Also

includes some plans that reduce benefits arithmetically for each year immediately below normal retirement age and actuarially below a specified age, usually 55.

⁴ Reduced amount was not derived from normal retirement formula.

⁵ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 61. Traditional defined benefit plans: Provisions for early receipt of deferred vested benefits, all private industry workers, National Compensation Survey, 2005

Early retirement provision	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Immediate	4	6	1	2	2	5	3	4	1	5
Early retirement	73	73	72	74	67	76	65	75	71	74
Reduction same as early retirement ..	54	49	56	67	42	61	38	58	55	53
Reduction not the same as early retirement	15	20	13	2	21	12	22	13	13	17
Not determinable	4	4	3	5	4	4	4	4	4	4
Normal retirement	12	11	15	5	19	8	8	13	15	10
Not determinable	12	10	12	19	12	11	24	8	12	11

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 62. Cash balance plans: Employer and interest rate contributions, all private industry workers, National Compensation Survey, 2005

Basis of contributions	All workers	White collar occupations	Service producing industries	Establishment size		Nonunion
				1 to 99 workers	100 workers or more	
Employer contribution						
Total	100	100	100	100	100	100
Flat percent	17	11	11	21	16	14
Percent based on ¹	83	89	89	79	84	86
Social Security wage base	10	10	9	-	14	10
Age	58	67	64	57	59	62
Service	41	44	43	31	44	45
Earnings	14	12	12	9	15	14
Interest rate contribution						
Total	100	100	100	100	100	100
U.S. Government securities	57	55	53	52	59	58
Flat percent	19	20	22	24	17	16
Schedule of percents	2	2	2	-	2	1
Other	4	5	5	-	6	4
Not determinable	18	19	18	24	16	21
Average flat percent	4.5	4.7	5.1	5.0	4.3	4.3

¹ The characteristics listed below are not mutually exclusive. For example, a plan may be based on age and service.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 63. Defined contribution plans: Participation in types of plans with employer contributions, all private industry workers, National Compensation Survey, 2005

Characteristics	Savings and thrift	Deferred profit sharing	Employee stock ownership	Money purchase pension	Stock bonus	Simplified employee pension	Savings incentive match plan	Salary reduction with employer contributions, 401 (k) plan
All workers	65	30	4	16	(1)	1	3	92
Worker characteristics								
White collar	68	30	4	16	(1)	1	3	96
Blue collar	62	33	5	12	(1)	(1)	4	86
Service	53	25	3	29	-	2	2	87
Full time	66	29	4	16	(1)	1	3	93
Part time	54	38	3	22	(1)	(1)	3	88
Union	51	23	3	37	-	-	-	75
Nonunion	66	31	4	14	(1)	1	4	94
Average wage less than \$15 per hour ...	59	36	5	14	(1)	1	4	89
Average wage \$15 per hour or higher ...	69	26	3	18	(1)	1	2	94
Establishment characteristics								
Goods producing	64	31	4	15	(1)	(1)	3	92
Service producing	65	30	4	17	(1)	1	3	92
1 to 99 workers	60	33	5	11	-	2	8	89
100 workers or more	68	28	3	20	(1)	(1)	-	94

¹ Less than 0.5 percent.

NOTE: Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 64. Savings and thrift plans: Summary of provisions, all private industry workers, National Compensation Survey, 2005

Provision	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Automatic enrollment feature	6	6	10	2	10	5	4	7	3	7
Pretax contributions allowed	99	99	99	98	99	99	100	99	98	99
Transfer/rollover contributions allowed ..	80	81	75	86	78	80	81	79	73	80
Employee choice of investments for employee contributions	91	91	92	91	89	92	91	92	97	91
Employee choice of investments for employer contributions	76	75	77	84	72	78	71	79	82	76
Immediate full vesting	22	24	20	20	17	24	16	26	29	22

NOTE: Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 65. Savings and thrift plans: Plan sponsor, all private industry workers, National Compensation Survey, 2005

Characteristics	Total	Single employer	Multiemployer group ¹	Employer association ²
All workers	100	99	1	(³)
Worker characteristics				
White collar	100	100	(³)	(³)
Blue collar	100	98	²	-
Service	100	100	(³)	-
Union	100	93	⁷	-
Nonunion	100	100	(³)	(³)
Establishment characteristics				
Goods producing	100	98	²	-
Service producing	100	99	(³)	(³)
1 to 99 workers	100	99	1	(³)
100 workers or more	100	99	1	-

¹ Plans established by a labor organization and provided to employees of two or more unrelated companies in accordance with a collective bargaining agreement.

² Plans provided by a group of employers that banded together to provide benefits.

³ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 66. Savings and thrift plans: Transfer and rollover provisions,¹ all private industry workers, National Compensation Survey, 2005

Rollover availability	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Transfers/rollovers allowed	80	81	75	86	78	80	81	79	73	80
Transfers/rollovers not allowed	3	2	3	4	1	3	3	3	2	3
Not determinable	18	17	22	10	21	16	16	18	26	17

¹ Participants are allowed to transfer/rollover contributions and earnings from a previous employer's plan.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 67. Savings and thrift plans: Maximum employee contributions,¹ all private industry workers, National Compensation Survey, 2005

Maximum employee contribution	All workers	Occupational group			Industry		Establishment size		Union	Nonunion	Average wage less than \$15 per hour	Average wage \$15 per hour or higher
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more				
Total	100	100	100	100	100	100	100	100	100	100	100	100
Percentage of employee earnings	53	51	56	55	54	52	52	53	59	52	54	52
Less than 10 percent	1	1	(²)	(²)	(²)	1	(²)	1	(²)	1	(²)	1
10 percent	1	1	2	(²)	2	1	(²)	2	2	1	2	1
12 percent	2	1	3	1	3	1	3	1	-	2	2	2
13-14 percent	1	1	1	(²)	1	1	-	1	1	1	2	(²)
15 percent	15	14	16	24	14	15	22	11	7	16	16	14
16 percent	7	7	8	1	10	5	4	8	19	6	3	9
17 percent	1	(²)	2	1	3	(²)	-	2	(²)	1	1	1
18 percent	2	2	1	9	1	3	(²)	4	3	2	3	2
19 percent	(²)	(²)	-	-	-	(²)	-	(²)	-	(²)	(²)	(²)
20 percent	10	9	13	13	13	9	8	11	11	10	11	9
21 percent	(²)	(²)	(²)	1	(²)	1	(²)	1	(²)	(²)	1	(²)
25 percent	13	15	9	5	7	15	14	12	16	13	14	12
Specified dollar amount	(²)	(²)	-	(²)	-	(²)	-	(²)	(²)	(²)	(²)	(²)
Up to Internal Revenue Code limit	46	47	44	39	46	45	48	44	40	46	42	47
Not determinable	2	2	(²)	6	(²)	2	(²)	3	(²)	2	3	1
Average ³ maximum contribution (percent of earnings)	18.4	18.8	17.8	17.6	17.5	18.7	18.3	18.4	18.9	18.3	18.6	18.3

¹ Includes contributions that are not matched by the employer. If maximum contributions vary, such as by length of service, the highest possible contribution was tabulated.

² Less than 0.5 percent.

³ The average is presented for all covered workers; averages exclude workers

without the plan provision.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 68. Savings and thrift plans: Method of determining employee pretax contribution, all private industry workers, National Compensation Survey, 2005

Method of pretax contribution	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Pretax contributions allowed	99	99	99	98	99	99	100	99	98	99
All contributions must be pretax	56	56	51	75	53	58	57	56	43	58
At option of employee, all contributions	42	41	47	23	45	40	41	42	53	41
At option of employee, up to specified amount	1	1	(¹)	(¹)	(¹)	1	(¹)	1	1	1
Initial contributions must be pretax; additional contributions cannot be pretax	(¹)	1	(¹)	-	-	1	1	(¹)	2	(¹)
Pretax allowed, options unknown	(¹)	(¹)	(¹)	-	-	(¹)	(¹)	-	-	(¹)
No pretax contributions allowed	(¹)	(¹)	-	(¹)	-	(¹)	-	(¹)	(¹)	(¹)
Not determinable	1	(¹)	1	2	1	(¹)	(¹)	1	2	1

¹ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 69. Savings and thrift plans: Maximum pretax employee contributions,¹ all private industry workers, National Compensation Survey, 2005

Maximum pretax contribution	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Percent of employee earnings	55	53	56	62	54	55	53	56	61	54
Less than 10 percent	1	1	(²)	(²)	(²)	1	(²)	1	(²)	1
10 percent	1	1	2	(²)	2	1	(²)	2	2	1
12 percent	1	1	3	1	3	1	3	(²)	-	2
13-14 percent	1	1	1	(²)	1	1	-	1	1	1
15 percent	15	14	16	25	14	16	22	11	7	16
16 percent	7	7	8	1	10	5	4	8	19	6
17 percent	1	(²)	2	1	2	(²)	-	1	(²)	1
18 percent	2	2	1	9	1	3	(²)	4	3	2
19 percent	(²)	(²)	-	-	-	(²)	-	(²)	-	(²)
20 percent	10	9	13	13	13	9	9	11	13	10
21 percent	(²)	(²)	(²)	1	(²)	1	(²)	1	(²)	(²)
25 percent	13	15	9	5	7	15	14	12	16	12
Amount not determinable	2	2	(²)	6	(²)	2	(²)	3	(²)	2
Specified dollar amount	(²)	(²)	-	(²)	-	(²)	-	(²)	(²)	(²)
Up to Internal Revenue Code limit	45	46	43	38	46	45	47	44	39	46
Option unknown	(²)	(²)	(²)	-	-	(²)	(²)	-	-	(²)
Average ³ maximum pretax contribution (percent of earnings)	18.3	18.6	17.8	17.6	17.5	18.6	18.3	18.3	19.0	18.2

¹ Includes contributions that are not matched by the employer. If maximum contributions vary, such as by length of service, the highest possible contribution was tabulated.

² Less than 0.5 percent.

³ The average is presented for all covered workers; averages exclude workers

without the plan provision.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 70. Savings and thrift plans: Method of employer matching contributions, all private industry workers, National Compensation Survey, 2005

Characteristics	Total	Specified matching percent ¹	Varies by service	Varies by amount of contribution	Varies by profit level	Other	Not determinable
All workers	100	67	3	17	2	8	3
Worker characteristics							
White collar	100	69	3	16	2	8	2
Blue collar	100	63	2	18	2	10	4
Service	100	69	4	20	-	6	1
Union	100	67	8	14	4	5	(²)
Nonunion	100	67	2	17	1	9	3
Establishment characteristics							
Goods producing	100	62	1	18	4	10	4
Service producing	100	69	3	17	1	8	2
1 to 99 workers	100	70	1	19	(²)	6	4
100 workers or more	100	66	4	16	2	9	2

¹ Plans in which the employer matches a specified percentage of employee contributions. For example, the employer matches 50 percent of employee earnings up to 6 percent.

² Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 71. Savings and thrift plans: Employee contributions by employer specified matching percentage, all private industry workers, National Compensation Survey, 2005

Specified matching percentage and employee contribution	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Less than 2 percent	(¹)	(¹)	1	1	(¹)	(¹)	(¹)	(¹)	-	(¹)
2 percent	4	4	5	8	5	4	2	6	1	5
3 percent	14	15	8	24	6	17	21	10	8	15
4 percent	16	17	14	10	17	16	14	17	7	17
5 percent	13	14	8	19	9	14	11	14	13	13
6 percent	41	38	50	35	47	39	39	42	62	39
Greater than 6 percent	10	9	13	3	14	8	13	8	9	10
1-49 percent employer match										
Total employee contribution ...	14	13	19	9	19	13	21	10	10	14
Less than 2 percent	(¹)	(¹)	-	1	-	(¹)	-	(¹)	-	(¹)
2 percent	1	(¹)	3	-	3	-	1	1	1	1
3 percent	(¹)	(¹)	-	1	-	(¹)	-	(¹)	-	(¹)
4 percent	4	4	5	1	4	4	7	2	2	4
5 percent	1	1	(¹)	2	2	1	2	(¹)	-	1
6 percent	4	3	8	4	8	3	4	5	7	4
Greater than 6 percent	4	4	3	(¹)	2	4	7	1	1	4
50 percent employer match										
Total employee contribution ...	39	35	43	55	54	34	29	45	47	38
2 percent	1	(¹)	1	(¹)	1	1	-	1	-	1
3 percent	3	3	2	9	2	3	4	2	(¹)	3
4 percent	6	6	6	5	7	6	1	9	4	6
5 percent	4	4	3	14	2	5	2	6	12	4
6 percent	22	20	27	27	34	18	18	24	29	21
Greater than 6 percent	2	2	4	1	6	1	3	2	2	2
51-99 percent employer match										
Total employee contribution ...	9	9	11	2	7	10	8	9	27	7
3 percent	1	1	1	1	2	1	(¹)	1	3	1
4 percent	(¹)	(¹)	(¹)	1	(¹)	(¹)	1	(¹)	(¹)	(¹)
5 percent	1	1	1	-	-	1	1	(¹)	-	1
6 percent	6	6	7	(¹)	1	7	7	5	24	4
Greater than 6 percent	1	1	2	-	3	(¹)	-	2	(¹)	1
100 percent employer match										
Total employee contribution ...	36	41	25	34	20	41	42	33	15	38
Less than 2 percent	(¹)	(¹)	1	-	(¹)	(¹)	(¹)	(¹)	-	(¹)
2 percent	3	3	(¹)	7	1	4	1	4	-	3
3 percent	10	11	5	14	2	13	16	6	5	11
4 percent	6	7	3	3	6	5	5	6	1	6
5 percent	7	8	4	3	4	7	7	7	1	7
6 percent	8	8	8	4	4	9	9	7	2	9
Greater than 6 percent	2	2	3	2	3	2	3	2	6	2

¹ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 72. Savings and thrift plans: Investment choices, all private industry workers, National Compensation Survey, 2005

Investment choice	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Employee contributions										
Total	100	100	100	100	100	100	100	100	100	100
Total with investment choice allowed ¹ ..	91	91	92	91	89	92	91	92	97	91
Company stock	25	26	24	21	22	26	19	29	42	24
Other common stock fund	43	43	43	48	33	47	37	47	55	42
Fixed interest securities or investments	46	46	46	50	37	50	39	51	61	45
Diversified investments	46	45	50	49	42	48	38	51	63	45
Other ²	13	14	8	16	5	15	10	14	13	13
Not determinable	4	4	4	2	5	4	4	4	6	4
No choice of investment	1	1	(³)	3	(³)	2	1	1	-	1
Not determinable	7	7	8	7	11	6	8	7	3	8
Employer contributions										
Total	100	100	100	100	100	100	100	100	100	100
Total with investment choice allowed ¹ ..	76	75	77	84	72	78	71	79	82	76
Company stock	19	19	18	19	16	20	14	22	31	18
Other common stock fund	37	36	37	47	26	41	30	41	47	36
Fixed interest securities or investments	39	37	40	48	29	42	31	43	50	38
Diversified investments	40	38	42	47	33	42	33	44	52	39
Other ²	10	11	7	15	5	12	8	12	9	10
Not determinable	2	2	3	1	4	2	1	3	6	2
No choice of investment	9	11	6	7	5	11	11	8	9	9
Not determinable	15	14	17	9	23	12	18	13	9	15

¹ Sums of individual items exceed totals because multiple choices are available to many employees.

² Includes purchase of U.S. Government securities, life insurance, annuities, real estate, mortgage, and deposits in credit unions or savings accounts.

³ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 73. Savings and thrift plans: Eligibility requirements, all private industry workers, National Compensation Survey, 2005

Eligibility requirement	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
With minimum age or service requirement	78	76	82	79	76	79	86	74	73	79
Service requirement only	32	33	32	25	34	31	25	36	34	32
3 months or less	9	9	8	11	12	8	3	12	10	9
6 months	5	4	6	8	5	5	3	5	1	5
1 year	18	19	18	6	17	18	18	17	24	17
Greater than 1 year	1	1	(¹)	(¹)	-	1	-	1	(¹)	1
Age 21	37	35	37	50	26	41	50	29	29	37
No service requirement	3	4	1	7	1	4	6	2	3	3
1-11 months	6	6	6	13	5	7	6	7	3	7
1 year	27	25	31	29	19	29	38	20	23	27
Greater than 1 year	(¹)	(¹)	-	(¹)	-	(¹)	-	(¹)	(¹)	(¹)
Other than age 21	9	8	13	5	16	7	10	9	10	9
No service requirement	2	2	2	1	3	2	1	3	6	2
1-11 months	4	3	6	1	5	3	5	3	2	4
1 year	3	3	6	3	8	2	4	3	1	4
No minimum age or service requirement	15	17	10	7	16	14	8	18	19	14
Not determinable	7	7	7	14	8	7	6	8	8	7
Average service requirement (in months)	9.3	9.4	9.5	8.2	8.7	9.6	10.2	8.8	9.8	9.3

¹ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 74. Savings and thrift plans: Automatic enrollment requirements, all private industry workers, National Compensation Survey, 2005

Automatic enrollment requirement	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1 to 99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
Required	6	6	10	2	10	5	4	7	3	7
Default method based on percentage	6	5	9	2	9	5	4	7	3	6
Less than 2.00	1	1	1	-	1	1	(1)	1	-	1
2.00–2.99	2	2	3	1	2	2	2	2	2	2
3.00–3.99	2	2	3	(1)	5	1	1	3	(1)	2
4.00 or greater	1	1	2	(1)	2	1	2	1	(1)	1
Method not determinable ..	(1)	(1)	(1)	(1)	1	(1)	-	1	(1)	(1)
Not required	90	91	86	97	87	92	93	89	94	90
Not determinable	3	3	4	1	3	3	3	3	3	3
Average percentage	2.6	2.5	2.8	2.5	2.8	2.5	3.0	2.4	2.3	2.6

¹ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 75. Savings and thrift plans: Vesting provisions, all private industry workers, National Compensation Survey, 2005

Characteristics	Total	Immediate full vesting	Cliff vesting ¹	Graded vesting ²	Not determinable
All workers	100	22	22	47	8
Worker characteristics					
White collar	100	24	23	45	8
Blue collar	100	20	21	50	8
Service	100	20	23	50	7
Union	100	29	29	34	8
Nonunion	100	22	22	48	8
Establishment characteristics					
Goods producing	100	17	20	52	10
Service producing	100	24	23	45	7
1 to 99 workers	100	16	20	57	8
100 workers or more	100	26	24	41	8

¹ Under cliff vesting, an employee is not entitled to any benefits until satisfying requirements for 100 percent vesting.

² Under graded vesting, an employee's rights to benefits increase with length of service, eventually reaching 100 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 76. Deferred profit-sharing plans: Employer contribution, all private industry workers, National Compensation Survey, 2005

Characteristics	Total	Based on stated formula	No stated formula	Not determinable
All workers	100	64	34	2
Worker characteristics				
White collar	100	60	38	2
Blue collar	100	68	30	2
Service	100	79	20	(¹)
Union	100	65	35	-
Nonunion	100	64	34	2
Establishment characteristics				
Goods producing	100	67	33	-
Service producing	100	63	35	3
1 to 99 workers	100	66	32	3
100 workers or more	100	62	36	1

¹ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 77. Deferred profit-sharing plans: Allocation of employer contributions to individual employee accounts, all private industry workers, National Compensation Survey, 2005

Characteristics	Total	Proportional to earnings	Other allocation formula ¹	Not determinable
All workers	100	62	12	9
Worker characteristics				
White collar	100	63	13	7
Blue collar	100	59	11	12
Service	100	71	1	10
Union	100	50	43	1
Nonunion	100	64	9	10
Establishment characteristics				
Goods producing	100	55	12	15
Service producing	100	65	11	7
1 to 99 workers	100	50	17	12
100 workers or more	100	72	8	7

¹ Includes other allocation formulas such as plans based on employee contributions, employee earnings and service, or shares distributed equally.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 78. Deferred profit-sharing plans: Eligibility requirements, all private industry workers, National Compensation Survey, 2005

Eligibility requirement	All workers	Occupational group			Industry		Establishment size		Union	Nonunion
		White collar	Blue collar	Service	Goods producing	Service producing	1-99 workers	100 workers or more		
Total	100	100	100	100	100	100	100	100	100	100
With minimum age or service requirement	75	70	81	91	76	75	80	72	60	77
Service requirement only	21	20	26	7	30	17	12	28	24	21
3 months or less	5	5	5	2	8	3	2	7	-	5
4-5 months	(¹)	(¹)	-	-	-	(¹)	-	(¹)	-	(¹)
6 months	4	3	5	2	6	3	4	4	11	3
1 year	12	12	16	3	17	11	7	17	13	12
Greater than 1 year	(¹)	(¹)	-	-	-	(¹)	-	(¹)	-	(¹)
Age 21	43	38	43	77	31	47	54	34	31	44
No service requirement	2	2	-	12	-	3	3	2	-	3
1-11 months	9	11	6	3	5	10	4	13	20	8
1 year	31	24	37	62	26	33	47	20	12	33
Other than age 21	12	12	12	7	15	11	14	10	5	12
No service requirement	2	2	-	-	-	2	-	3	-	2
1-11 months	6	5	9	2	11	4	9	4	4	6
1 year	4	4	3	4	4	4	5	3	(¹)	4
No minimum age or service requirement	6	3	12	1	15	2	3	8	39	3
Not determinable	19	26	7	9	9	23	17	20	2	21
Average service requirement (in months)	9.2	8.7	9.5	11.1	8.8	9.4	10.0	8.5	6.7	9.4

¹ Less than 0.5 percent.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Table 79. Money purchase pension plans: Employer contributions, all private industry workers, National Compensation Survey, 2005

Employer contribution	All workers	White-collar occupations	Service-producing industries	Establishment size		Nonunion
				1 to 99 workers	100 workers or more	
Total	100	100	100	100	100	100
Fixed percentage of earnings	66	74	74	57	69	74
Less than 3 percent	13	14	10	17	12	15
3.00–5.99	28	29	31	19	31	34
6.00–8.99	16	21	21	2	20	15
9.00–11.99	3	5	5	5	3	3
12.00 percent or greater	6	6	8	13	3	6
Percentage varies by earnings	4	3	5	4	4	3
Dollar amount per hour worked	9	2	2	21	5	4
Other ¹	17	20	18	10	19	19
Not determinable	4	1	1	8	3	1

¹ Includes other plans where the percentage of employer contributions varies by age, service, or a combination of age and service.

NOTE: Because of rounding, sums of individual items may not equal totals. Where applicable, dash indicates no employees in this category or data do not meet publication criteria.

Appendix A. Technical Note

The National Compensation Survey (NCS) healthcare and retirement series provides information on detailed provisions of medical care, prescription drug, dental, vision, defined benefit, and defined contribution plans. The portion of the NCS sample from which estimates on employee benefits are made covers all private sector establishments in the United States, with the exception of farms and private households.

Scope of survey

The 2005 NCS data on provisions of healthcare and retirement plans were obtained from 3,227 private industry establishments representing approximately 102 million workers; of this number, over 79 million were full-time workers, and the remainder—approximately 23 million—were part-time workers. The NCS uses the establishment's definitions of full- and part-time status. For purposes of this survey, an establishment is an economic unit that produces goods or services, a central administrative office, or an auxiliary unit providing support services to a company. The establishment is usually at a single physical location.

Industry groups¹

Detailed industries are classified into two broad groups:

Goods producing. These industries include mining, construction, and manufacturing.

Service producing. These industries include transportation, communications, and public utilities; wholesale trade; retail trade; finance, insurance, and real estate; and other service industries.

Occupational groups²

Narrowly defined occupations selected for study are classified into one of the following three broad occupational groups.

White collar. This group includes professional, technical, executive, administrative, managerial, and related occupations;

clerical and administrative support occupations; and sales occupations.

Blue collar. This group includes precision production, craft, and repair occupations; machine operators and inspectors; transportation and moving occupations; and handlers, equipment cleaners, helpers, and laborers.

Service occupations. Included in this group are protective service, food service, health service, cleaning and building service, personal service occupations.

Excluded from the survey are self-employed persons, proprietors, major stockholders, members of a corporate board who are not otherwise officers of the corporation, volunteers, unpaid workers, family members who are paid token wages, the permanently disabled, and partners in unincorporated firms.

Definition of terms

Full-time worker. A full-time worker is any employee that the employer considers to be full time.

Part-time worker. A part-time worker is any employee that the employer considers to be part time.

Union worker. An employee is a union worker if all of the following conditions apply to his or her occupation:

- A labor organization is recognized as the bargaining agent for all workers in the occupation.
- Wage-and-salary rates are determined through collective bargaining or negotiations.
- Settlement terms, which must include earnings provisions and may include benefit provisions, are embodied in a signed, mutually binding collective bargaining agreement.

Nonunion worker. An employee in an occupation not meeting the conditions for union coverage is considered a nonunion worker.

Calculation details

Averages for occupations within an establishment were used to produce estimates for worker groups averaging hourly pay

¹ Many of the Bureau of Labor Statistics data series have transitioned to the new industrial classification, the North American Industry Classification System (NAICS). To produce the data under the benefits provisions series, establishments are still classified under the Standard Industrial Classification system (SIC). The transition is planned for 2008.

² Many of the Bureau of Labor Statistics data series have transitioned to the new occupational classification system, the Standard Occupational Classification (SOC). To produce the data under the benefits provisions series, workers are still classified under the Occupational Classification System (OCS). The transition is planned for 2008.

below \$15 and for those averaging \$15 and above. Individual workers can fall into an earnings category different from the average for an occupation and establishment into which they are classified.

The calculations are not based on actual decisions regarding coverage made by employees within the occupations. For example, in an occupation in which five single employees and five married employees are participating in a medical plan, the calculations for this table use all 10 employees in both single and family-coverage computations; the calculations are not based on the assumption that the five single employees have single coverage or that the five married employees have family coverage. Rather, the deductible calculations are based on the assumption that all 10 employees have identical coverage.

Benefit areas

BLS requests that, for sampled occupations, establishments provide data on the incidence (defined as the rate of access to or participation in) and selected details of each of the following benefit areas: Paid leave; short- and long-term disability benefits; medical, dental, and vision care; prescription drug coverage; life insurance; defined benefit pensions; and defined contribution plans. Data also are collected on the incidence of certain other benefits, such as travel accident insurance, nonproduction cash bonuses, child care, adoption assistance, long-term-care insurance, flexible workplaces, wellness programs, fitness centers, job-related and non-job-related educational assistance, and subsidized commuting. Data on incidence and key provisions (such as medical plan premiums for example) are published separately from data on detailed provisions included in this publication. The latest release of incidence and key provisions data can be found at <http://www.bls.gov/ncs/ebs/sp/ebsm0004.pdf>

BLS field economists also ask respondents to provide Summary Plan Provision documents for defined benefit pensions; defined contribution plans; and medical, prescription drug, dental, and vision care plans. BLS analyzes these plans in Washington to garner the required data on plan provisions. The data in this publication provide the results of this analysis.

Sample design and data collection

The sample for this survey was selected on the basis of a 3-stage design. The first stage involved the selection of areas. The NCS sample consists of 152 metropolitan areas and nonmetropolitan areas that represent the Nation's 326 Metropolitan Statistical Areas (as defined by the Office of Management and Budget) and the remaining portions of the 50 States. Metropolitan areas are either Metropolitan Statistical Areas (MSAs) or Consolidated Metropolitan Statistical Areas (CMSAs), as defined by the Office of Management and Budget in 1994. Nonmetropolitan areas are counties that do not fit the metropolitan area definitions.

In the second stage, the sample of establishments was drawn from a sampling frame composed of State Unemployment Insurance reports within sampled areas. Each sampling

frame is stratified by sampling cell. A sampling cell consists of an area or a group of areas by industry. Each sampled establishment was selected within a sampling cell with a probability proportional to its employment. This technique allows larger establishments to have a greater chance of being selected for the sample. Weights were applied to each establishment when the data were tabulated so that each establishment represents units in the economy similar to those not selected for collection.

The third stage of sample selection was a probability sample of occupations within a sampled establishment. Identifying the occupations for which data were to be collected involved a 4-step process:

1. Probability-proportional-to-size selection of establishment jobs.
2. Classification of jobs into occupations based on the Census of Population system.
3. Characterization of jobs as full time versus part time, union versus nonunion, and time versus incentive.
4. Determination of the level of work of each job.

BLS field economists visit sampled establishments or contact them by telephone to collect data for the survey. To reduce the reporting burden, field economists ask respondents to provide Summary Plan Provision documents for health and retirement plans.

Data calculation

Tabulations in this bulletin show the percentage of all employees who receive specified benefits, as well as information on the provisions of many of these benefits. To present provision data, tabulations generally indicate the percentage of all employees receiving a benefit (participants) who are covered by specified features. For example, a tabulation may show the percentage of workers with medical care benefits who participate in a prepaid plan.

The majority of tables in the bulletin exhibit the percentage of all employees who have access to or are participating in a particular benefit plan, or the percentage covered by a specific provision. In addition, average benefit provisions, such as the average annual deductible in healthcare plans, are presented. In some cases, tabulations indicate both the percentage of employees with a given provision and the average value of that provision. For example, in table 8, total represents the number of workers participating in indemnity plans with overall limits and the percentage of workers who must pay selected deductibles (such as \$200, \$250, and \$300 per year), as well as the average deductible. All tabulations of averages include only those employees actually covered by the provision being averaged.

Survey estimation methods

The survey design uses an estimator that assigns the inverse of each sample unit's probability of selection as a weight to the unit's data at each stage of sample selection stage and four weight adjustment factors. The first factor adjusts for establishment nonresponse and the second factor adjusts for occupational nonresponse. The third factor adjusts for any special situations that may have occurred during data collection. The fourth factor, poststratification, also called benchmarking, is introduced to adjust the estimated employment totals to actual counts of employment by industry for the survey reference date.

The general form of the estimator for a population total Y is

$$Y = \sum_{i=1}^n \frac{f_{2i} f_{3i} f_{1i}}{p_i} \sum_{j=1}^{o_i} \frac{Y_{ij} f_{ij}}{P_{ij}}$$

where

n = number of responding sample establishments;

o_i = occupation sample size selected from the i th establishment;

Y_{ij} = value for the characteristics of the j th selected occupation in the i th selected establishment;

P_i = probability of including the i th establishment in the sample;

P_{ij} = probability of including the j th occupation in the sample of occupations from the i th establishment;

f_{1i} = weight adjustment factor for nonresponse for the i th establishment;

f_{ij} = weight adjustment factor for nonresponse for the j th occupation in the i th establishment;

f_{2i} = weight adjustment factor for any special situation

that may have occurred for the i th establishment;

f_{3i} = weight adjustment factor for poststratification totals for the i th establishment.

Appropriate employment or establishment totals are used to calculate the proportion, mean, or percentage that is desired.

Reliability of estimates

The statistics in this bulletin are estimates derived from a sample of usable occupation quotes selected from the responding establishments. They are not tabulations based on data from all employees in private establishments within the scope of the survey. Consequently, the data are subject to sampling and nonsampling errors.

Sampling errors are the differences that can arise between results derived from a sample and those computed from observations of all units in the population being studied. When probability techniques are used to select a sample, statistical measures called "standard errors" can be calculated to measure possible sampling errors. No estimates of sampling error were calculated for this survey.

Nonsampling errors also affect survey results. They can be attributed to many sources: Inability to obtain information about all establishments in the sample; definitional difficulties; differences in the interpretation of questions; inability or unwillingness of respondents to provide correct information; mistakes in recording or coding data; and other errors of collection, response, processing, coverage, and estimation for missing data.

Computer edits of the data and professional review of both individual and summarized data reduce the non-sampling errors in recording, coding, and processing the data. However, to the extent that the characteristics of non-respondents are not the same as those of respondents, non-sampling errors are introduced in the development of estimates.

Table A-1. Number of establishments and occupational observations studied and estimated number of workers within the scope of the survey, all private industry workers, National Compensation Survey, 2005

Characteristics	Number of establishments studied	Number of occupational observations	Estimated number of workers ¹
Total	3,227	18,198	102,279,083
Worker characteristics			
White-collar occupations	—	11,084	53,034,822
Blue-collar occupations	—	4,916	29,128,201
Service occupations	—	2,198	20,116,060
Full time	—	15,252	79,062,096
Part time	—	2,946	23,216,987
Union	—	2,431	10,746,652
Nonion	—	15,767	91,532,431
Average wage less than \$15 per hour ...	—	8,258	57,878,625
Average wage \$15 per hour or more	—	9,940	44,400,458
Establishment characteristics			
Goods-producing industries	727	4,225	22,161,097
Service-producing industries	2,500	13,973	80,117,986
1 to 99 workers	1,298	5,346	54,710,143
100 workers or more	1,929	12,852	47,568,940
Geographic areas			
Metropolitan areas	2,588	14,803	84,800,962
Nonmetropolitan areas	639	3,395	17,478,122
New England	208	1,224	5,666,839
Middle Atlantic	460	2,627	15,163,552
East North Central	621	3,586	17,660,154
West North Central	267	1,442	7,316,857
South Atlantic	533	2,988	17,647,108
East South Central	189	1,077	6,473,871
West South Central	348	1,952	11,734,711
Mountain	222	1,244	6,985,154
Pacific	379	2,058	13,630,836

¹ Employment estimates are not as precise as those developed from other BLS surveys with larger samples and designed specifically for employment estimates. The employment estimates in this table are presented only to indicate the approximate size of various classifications to the whole private economy.

NOTE: Because of rounding, sums of individual items may not equal totals. Dashes indicate data not available since establishment counts are not estimated for worker characteristics.

Appendix B. Survey Response

Data for the 2005 National Compensation Survey benefits series were collected from June 2004 to December 2005, reflecting an average reference period of 2005. Respondents were asked for the most current information as of the time of data collection.

The following summary is a composite of establishment responses to the survey:

Establishments	Number
In sample	4,473
Out of business or out of scope	529
Unable or unwilling to respond	717
Responding fully or partially	3,227

The responding establishments yielded 18,198 occupational observations (quotes) for which data were collected.

For establishments unable or unwilling to provide the minimum amount of usable data, a weight adjustment is made on the basis of the sample unit employment. This technique assumes that the mean value of the nonrespondents equals the mean value of the respondents at some “detailed” cell level. These cells are defined in a manner that groups together establishments that are homogeneous with respect to the characteristics of interest. In most cases, the cells are the same as those used for sample selection.

For establishments unable or unwilling to provide data for a specific occupation, a similar cell-level approach is used to make adjustments to the sampled occupation weights in responding establishments. The characteristics of interest include the major occupation group of the unreported occupations.

Imputation procedures were used for missing items, such as participation values, plan provisions, and employee and employer medical premium values, within responding occupational observations (quotes).

The following procedures were used to adjust for missing data from partial and full refusals. First, the percentage of plan participants was imputed in cases where that number was not reported. Each of these participant values was imputed by selecting a similar plan from another occupational observation with usable participation data.

Second, when not available, plan provisions were imputed by selecting a usable plan from another occupational observation with similar plan characteristics. Provisions from the selected plan were then used to represent the missing data. The following tabulation gives the participation imputation percentages for the various benefit areas:

Benefit area	Imputation percentage
Defined benefit	48
Defined contribution	52
Medical care	50
Dental benefits	54
Vision benefits	47
Prescription drugs	50

Finally, imputations for employee and employer medical premiums were made in cases where one or both of the premium values were not reported for a particular plan. One or both of the premiums were imputed by selecting usable premium values from another occupational observation with similar plan characteristics.