

National Compensation Survey: Employee Benefits in Private Industry in the United States, 2003



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Preface

This bulletin presents findings of the 2003 National Compensation Survey (NCS) conducted by the Bureau of Labor Statistics (BLS). The survey provides data on detailed provisions of healthcare and retirement plans in private industry. Data on incidence and provisions of selected benefit plans have been published separately; the latest release, March 2005, can be found at the BLS World Wide Web site at www.bls.gov/ncs/ebs/sp/ebsm0003.pdf.

The public may access other NCS benefit incidence and provisions data through the 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: OCLTINFO@bls.gov. Sensory-impaired individuals may obtain information in this publication upon request. Voice telephone: (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. The period for compiling these data was December 2002 through April 2004; thus,

they have a 2003 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. In most cases, the tables in this bulletin refer to the percentage of all employees who receive specified benefits, as well as the provisions of many of these benefits. For provision data, tabulations generally indicate the percentage of all employees receiving a benefit (that is, participants) who are covered by specified features.

Most 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 account 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 17 indicates that 79 percent of workers in prepaid plans have inpatient surgery costs covered in full, while 21 percent are subject to limits. In this case, the title reads “*Prepaid plans.*” The “*total*” line in table 17 (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 5, 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 or pay for services rendered in the hospital or by a qualified medical care provider. Plans that provide only dental, vision, or prescription drug coverage are tabulated separately and described in their own sections below.

Healthcare 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 inside 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 of nondiscounted charges from providers. Under this type of plan, there may be a requirement to obtain a primary care physician's referral before 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 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 out of network (point of service or POS 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).

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

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 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.

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 typical limit is a lifetime maximum of \$1 million per individual.

Maximum out-of-pocket expense. This is a limit on the dollar amount 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 in 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—

before 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 from 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 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 inpatient 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 healthcare. 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 an 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.

Stop-loss coverage. Stop-loss coverage is a form of reinsurance for self-insured employers that limits the amount the employer will have to pay for each employee’s healthcare (individual limit) or for the total expenses of the employer (group limit).

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 miscellaneous hospital charges.

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

Generic drugs. These are drugs that are not under patents. 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 healthcare provider. Drugs not approved by the healthcare pro-

vider are nonformulary drugs, for which enrollees receive less generous benefits, such as a higher per prescription copayment.

Copayment. A copayment is the amount the employee must pay each time a specific service is received.

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).

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

Vision Care

Vision care plans provide coverage for eyeglasses, eye examinations, 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, 2003

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	77	77	67	79	75	76	76	71	77
Self insured	31	30	32	29	31	30	23	37	30	31
With administrative services only contract	20	19	23	18	23	19	13	26	19	20
Without administrative services only contract	7	7	6	8	5	8	6	8	9	7
Not determinable	4	4	3	3	3	4	4	3	3	4
Insured	46	47	46	38	48	45	53	40	40	47
Traditional indemnity										
Total	7	7	9	-	8	7	7	8	13	6
Self insured	4	4	5	-	3	4	3	4	9	3
With administrative services only contract	2	2	2	-	2	1	1	2	3	1
Without administrative services only contract	2	2	3	-	1	2	2	2	5	1
Not determinable	(1)	(1)	(1)	-	(1)	(1)	(1)	(1)	(1)	(1)
Insured	4	3	5	-	5	3	4	4	4	3
Indemnity in and out of network										
Total	67	68	67	61	70	66	68	67	57	69
Self insured	26	26	27	26	27	26	19	32	22	27
With administrative services only contract	18	16	21	18	21	17	12	23	15	19
Without administrative services only contract	5	6	3	6	4	5	4	6	4	5
Not determinable	3	4	2	2	3	3	4	3	3	3
Insured	41	42	40	35	43	40	48	35	35	42
Indemnity in and out of network without primary care physician										
Total	54	54	55	52	57	53	55	53	45	56
Self insured	22	21	24	24	23	22	16	27	19	23
With administrative services only contract	15	13	19	16	18	14	10	20	13	16
Without administrative services only contract	5	5	3	6	3	5	4	5	4	5
Not determinable	2	2	2	2	3	2	2	2	2	2
Insured	32	33	31	28	34	31	39	25	25	33

See footnotes at end of table.

Table 1. Medical care benefits: Fee arrangement and financial intermediary, all private industry workers, National Compensation Survey, 2003
— 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 out of network with primary care physician										
Total	13	14	12	9	13	13	12	14	12	13
Self insured	4	5	3	2	4	4	3	5	3	4
With administrative services only contract	3	3	2	2	3	3	2	3	2	3
Without administrative services only contract	(¹)	(¹)	1	(¹)	1	(¹)	-	1	(¹)	1
Not determinable	1	1	(¹)	(¹)	-	1	1	(¹)	(¹)	1
Insured	9	9	9	7	9	9	9	9	10	9
Other²										
Total	2	2	1	1	1	2	2	2	1	2
Prepaid										
Total	24	23	23	33	21	25	24	24	29	23
Self insured	2	2	1	1	1	2	1	2	1	2
Insured	22	21	22	32	20	23	23	22	28	21
Prepaid in network only										
Total	20	19	19	28	18	21	20	20	24	19
Self insured	1	2	1	1	1	2	(¹)	2	1	1
Insured	19	17	18	28	17	19	20	18	24	18
Prepaid in and out of network										
Total	4	4	-	-	-	4	-	4	-	4
Self insured	(¹)	(¹)	-	-	-	(¹)	-	(¹)	-	(¹)
Insured	4	4	-	-	-	4	-	4	-	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, 2003

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	99	99	99	99	100	98	98	99	99	99
Inpatient surgery	96	97	96	96	98	96	96	97	97	96
Outpatient surgery ¹	96	97	95	93	98	95	96	96	97	96
Office physician visit	99	100	99	96	99	99	99	99	99	99
Extended care ²	79	80	79	72	77	80	78	80	77	79
Home health care ²	85	84	87	82	87	84	85	85	87	84
Inpatient hospice	71	71	72	64	74	70	67	74	72	71
Home hospice	15	16	14	15	14	16	10	19	17	15
Inpatient mental	92	92	93	92	94	92	92	93	94	92
Outpatient mental	93	93	92	91	94	92	92	93	96	92
Inpatient alcohol detoxification ³	94	94	94	94	95	93	93	94	95	93
Inpatient alcohol rehabilitation ⁴	85	85	84	81	86	84	83	86	83	85
Outpatient alcohol rehabilitation ⁴	88	88	87	86	88	88	88	87	89	88
Inpatient drug detoxification ³	94	94	94	95	95	93	93	94	95	94
Inpatient drug rehabilitation ³	85	85	84	82	86	84	82	86	83	85
Outpatient drug rehabilitation ⁴	88	88	86	88	88	87	87	88	88	87
Hearing care ⁵	25	25	23	32	25	25	23	26	30	24
Adult physical exams	69	69	68	70	74	66	67	69	66	69
Well baby care	77	77	77	79	80	76	76	78	77	77
Adult immunization and inoculation ...	50	49	52	52	58	47	50	51	50	50
Indemnity plans										
Total	100	100	100	100	100	100	100	100	100	100
Hospital room and board	99	98	99	98	100	98	98	99	99	99
Inpatient surgery	97	96	98	96	99	96	96	98	98	97
Outpatient surgery ¹	97	97	98	97	99	97	97	98	98	97
Office physician visit	99	100	98	100	99	99	99	99	98	99
Extended care ²	81	82	81	78	79	83	79	84	79	82
Home health care ²	85	83	89	80	87	84	84	85	88	84
Inpatient hospice	76	75	78	71	81	74	73	78	78	76
Home hospice	16	16	15	19	15	16	11	20	17	16
Inpatient mental	93	93	94	89	94	92	92	94	96	92
Outpatient mental	92	92	94	87	94	92	92	93	96	92
Inpatient alcohol detoxification ³	93	93	93	92	94	92	91	94	94	93
Inpatient alcohol rehabilitation ⁴	89	89	89	83	89	88	88	89	89	88
Outpatient alcohol rehabilitation ⁴	89	89	89	83	89	89	89	89	90	89
Inpatient drug detoxification ³	93	93	93	93	94	92	91	94	94	93
Inpatient drug rehabilitation ³	88	89	88	84	89	88	87	89	89	88
Outpatient drug rehabilitation ⁴	89	89	89	85	89	89	88	89	90	89
Hearing care ⁵	15	16	14	21	16	15	12	18	19	15
Adult physical exams	65	64	66	60	70	62	63	66	60	65
Well baby care	76	75	77	72	77	75	75	76	75	76
Adult immunization and inoculation ...	46	44	49	48	53	43	46	46	45	46

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, 2003 — 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	99	100	97	100	100	98	100	98	100	98
Inpatient surgery	95	98	88	97	96	95	96	94	95	95
Outpatient surgery ¹	91	95	85	85	96	89	93	89	94	90
Office physician visit	99	100	100	89	100	98	100	97	100	98
Extended care ²	72	73	73	60	69	73	75	69	74	71
Home health care ²	86	88	82	87	85	86	89	83	86	86
Inpatient hospice	55	59	51	48	47	58	48	60	58	54
Home hospice	13	14	12	7	11	13	8	16	15	12
Inpatient mental	90	89	90	98	93	90	93	88	89	91
Outpatient mental	93	95	86	100	95	92	95	91	96	92
Inpatient alcohol detoxification ³	97	98	95	98	99	96	98	95	99	96
Inpatient alcohol rehabilitation ⁴	72	73	69	77	75	71	67	76	68	73
Outpatient alcohol rehabilitation ⁴	84	85	79	93	85	84	85	83	85	84
Inpatient drug detoxification ³	97	98	95	98	99	96	98	95	99	96
Inpatient drug rehabilitation ³	72	73	69	77	75	71	67	76	68	73
Outpatient drug rehabilitation ⁴	84	85	79	93	85	84	85	83	85	84
Hearing care ⁵	54	55	52	55	56	54	60	49	56	54
Adult physical exams	81	84	73	91	87	79	82	80	81	81
Well baby care	83	85	76	93	89	81	81	84	83	83
Adult immunization and inoculation ...	65	68	62	60	74	62	65	65	62	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. Indemnity plans: Coverage for selected services, all private industry workers, National Compensation Survey, 2003

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	10	9	11	5	9	10	10	9	15	9
Subject to internal limits only ¹	8	8	9	7	9	8	8	9	10	8
Subject to internal and overall limits	13	12	12	17	13	12	9	15	12	13
Subject to overall limits only ²	70	70	68	71	69	70	73	67	63	71
Internal limits										
Dollar deductible	16	17	15	21	16	17	13	19	14	17
Dollar limits	1	(³)	2	2	2	(³)	(³)	1	2	1
Separate coinsurance	2	2	3	3	4	2	2	3	3	2
Other limit	1	1	2	(³)	1	1	1	1	4	1
Limits not determinable	(³)	(³)	1	-	-	(³)	1	-	-	(³)
Inpatient surgery										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	15	14	19	7	17	14	15	15	28	12
Subject to internal limits only ¹	4	3	4	4	5	3	4	4	1	4
Subject to internal and overall limits	3	3	5	2	4	3	2	4	6	3
Subject to overall limits only ²	78	80	73	86	73	80	79	78	65	81
Internal limits										
Dollar limits	1	1	2	(³)	2	1	(³)	1	1	1
Separate coinsurance	3	2	3	4	3	2	2	3	2	3
Other limit	3	3	3	2	4	3	2	4	3	3
Limits not determinable	(³)	(³)	(³)	(³)	1	(³)	1	-	-	(³)
Outpatient surgery⁴										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	12	11	16	2	17	10	11	12	23	10
Subject to internal limits only ¹	7	7	8	4	7	7	10	5	4	8
Subject to internal and overall limits	8	8	8	12	8	9	9	8	8	8
Subject to overall limits only ²	73	74	69	82	68	75	70	75	65	74
Internal limits										
Dollar limits	1	1	2	(³)	2	1	(³)	1	2	1
Separate coinsurance	3	2	4	2	4	2	2	3	4	3
Deductible per surgery	9	10	7	10	5	11	13	6	4	10
Other limit	3	3	3	3	4	2	2	3	3	3
Limits not determinable	(³)	(³)	(³)	(³)	1	(³)	(³)	-	-	(³)
Office physician visits										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	1	1	1	2	1	1	1	1	2	1
Subject to internal limits only ¹	46	49	44	42	45	47	52	42	38	48
Subject to internal limits plus overall limits ..	31	31	30	33	31	31	28	33	21	33
Subject to overall limits only ²	22	19	25	23	23	21	19	24	38	19

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 4. Indemnity plans in and out of network: Summary of selected features, all private industry workers, National Compensation Survey, 2003

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	94	94	93	94	92	95	92	95	90	94
Surgery	94	94	92	95	92	94	93	94	91	94
Office visit	92	93	90	94	89	93	91	93	89	93
Outpatient prescription drugs	24	26	20	20	20	26	19	28	23	24
Not determinable	4	3	5	1	5	3	4	4	5	4
Type of in-network incentive										
Coinsurance rate differs ¹	85	86	83	86	88	84	84	86	81	86
Lower annual deductible ²	35	37	31	33	35	34	32	37	29	35

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 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 5. Indemnity plans with overall limits: Average dollar limits, all private industry workers, National Compensation Survey, 2003

Characteristics	Annual deductible ¹		Annual out-of-pocket expense maximum ²		Lifetime maximum ³
	Individual	Family	Individual	Family	
All workers	\$430	\$1,080	\$1,962	\$3,908	\$1,887,453
Worker characteristics					
White collar	430	1,041	1,885	3,536	1,965,777
Blue collar	411	1,084	2,020	4,441	1,742,310
Service	511	1,337	2,299	4,522	2,018,060
Full time	435	1,094	1,935	3,895	1,903,004
Part time	338	858	2,510	4,168	1,605,403
Union	284	755	2,061	4,047	1,515,785
Nonunion	455	1,136	1,949	3,892	1,954,958
Average wage less than \$15 per hour ...	441	1,122	2,109	4,025	1,863,314
Average wage \$15 per hour or higher ...	418	1,039	1,820	3,800	1,912,828
Establishment characteristics					
Goods producing	413	1,117	1,885	4,103	1,883,516
Service producing	437	1,065	1,993	3,827	1,889,305
1 to 99 workers	496	1,270	2,122	3,915	2,227,580
100 workers or more	369	917	1,819	3,903	1,608,797
Geographic areas⁴					
Metropolitan areas	444	1,132	1,948	3,906	1,898,957
Nonmetropolitan areas	376	876	2,018	3,917	1,844,452
New England	447	1,141	1,839	3,599	1,753,884
Middle Atlantic	400	1,038	1,737	3,677	1,703,049
East North Central	386	971	1,557	3,131	2,255,687
West North Central	373	824	1,429	3,100	1,845,256
South Atlantic	468	1,155	1,933	4,064	1,947,022
East South Central	470	1,334	2,307	4,840	1,673,892
West South Central	516	1,290	1,999	4,291	1,831,795
Mountain	442	1,120	2,409	4,205	1,750,121
Pacific	380	1,009	2,697	4,794	1,729,878

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 6. Indemnity plans with overall limits: Amount of individual deductible,¹ all private industry workers, National Compensation Survey, 2003

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	73	70	76	81	73	73	77	70	71	73
Flat dollar amount	73	70	75	80	72	73	76	69	71	73
Less than \$200	12	10	17	10	16	10	11	13	30	9
\$200	11	11	10	8	11	10	9	12	11	11
\$201–249	(²)	(²)	(²)	-	(²)	(²)	(²)	(²)	(²)	(²)
\$250	12	11	15	10	14	12	11	14	13	12
\$251–299	-	-	-	-	-	-	-	-	-	-
\$300	8	8	9	6	8	9	8	9	7	9
Greater than \$300	29	29	24	47	23	31	37	22	10	32
Other	1	(²)	1	1	1	1	(²)	1	1	1
No deductible	25	28	22	18	26	25	21	28	27	25
Not determinable	2	2	2	1	1	2	2	1	2	2
Average annual deductible individual	\$430	\$430	\$411	\$511	\$413	\$437	\$496	\$369	\$284	\$455
Average annual deductible family	1,080	1,041	1,084	1,337	1,117	1,065	1,270	917	755	1,136
Traditional Indemnity										
Total	100	100	100	-	100	100	100	100	100	100
Deductible specified	86	85	88	-	93	82	85	87	96	82
Flat dollar amount	84	84	85	-	90	82	82	86	93	81
Less than \$200	41	31	53	-	49	38	34	47	72	30
\$200	10	17	2	-	5	12	10	9	(²)	13
\$201–249	1	1	-	-	2	-	2	-	-	1
\$250	5	7	4	-	6	5	3	8	6	5
\$251–299	-	-	-	-	-	-	-	-	-	-
\$300	7	7	8	-	15	4	7	7	7	7
Greater than \$300	20	21	19	-	14	23	27	15	7	25
Other	1	(²)	3	-	3	1	2	1	4	1
No deductible	12	12	11	-	6	15	13	11	3	16
Not determinable	2	3	1	-	1	3	2	2	1	3
Average annual deductible individual	\$374	\$341	\$423	-	\$364	\$379	\$549	\$242	\$186	\$450
Average annual deductible family	792	712	881	-	816	779	1,154	525	428	959

See footnotes at end of table.

Table 6. Indemnity plans with overall limits: Amount of individual deductible,¹ all private industry workers, National Compensation Survey, 2003 — 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	78	75	83	82	79	78	82	74	78	78
Flat dollar amount	78	74	82	82	78	77	82	74	78	78
Less than \$200	11	9	15	6	15	9	10	12	26	9
\$200	12	12	13	10	13	12	9	14	16	12
\$201–249	(²)	(²)	(²)	-	-	(²)	-	(²)	(²)	(²)
\$250	14	13	17	8	16	13	13	14	14	14
\$251–299	-	-	-	-	-	-	-	-	-	-
\$300	9	9	11	7	9	10	9	9	9	9
Greater than \$300	31	31	27	51	26	34	40	24	12	34
Other	(²)	(²)	1	(²)	(²)	(²)	(²)	1	(²)	(²)
No deductible	21	25	16	17	20	21	17	24	20	21
Not determinable	1	1	2	1	1	1	(²)	2	3	1
Average annual deductible individual	\$431	\$432	\$408	\$516	\$414	\$438	\$472	\$391	\$312	\$449
Average annual deductible family	1,124	1,073	1,144	1,378	1,174	1,102	1,251	1,010	874	1,161
Indemnity in and outside of network with primary care physician³										
Total	100	100	100	-	100	100	100	100	100	100
Deductible specified	40	42	29	-	23	47	38	41	24	43
Flat dollar amount	39	41	29	-	23	46	38	39	24	41
Less than \$200	2	2	1	-	-	2	(²)	3	2	1
\$200	4	5	1	-	3	4	2	5	3	4
\$201–249	-	-	-	-	-	-	-	-	-	-
\$250	10	9	9	-	4	12	6	13	14	9
\$251–299	-	-	-	-	-	-	-	-	-	-
\$300	6	8	2	-	1	8	6	6	1	7
Greater than \$300	18	17	14	-	15	19	24	13	4	20
Other	1	1	1	-	-	1	(²)	2	(²)	1
No deductible	56	53	67	-	77	47	53	59	76	53
Not determinable	4	5	3	-	-	6	9	-	-	5
Average annual deductible individual	\$485	\$469	\$464	-	\$544	\$473	\$673	\$360	\$337	\$501
Average annual deductible family	1,115	1,070	1,092	-	1,288	1,076	1,600	797	813	1,149

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 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 7. Indemnity plans with overall limits: Individual deductible¹ difference between in-network and outside of network coverage, all private industry workers, National Compensation Survey, 2003

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	34	37	29	35	33	35	33	35	21	36
Less than \$200	3	2	4	3	4	2	4	2	3	3
\$200–\$399	13	15	11	13	14	13	7	18	10	13
Greater than \$399	18	20	14	19	13	20	21	15	8	19
Amount not determinable	(²)	(²)	1	-	1	(²)	1	(²)	(²)	(²)
Overall deductible does not differ between in and outside of network	65	62	70	64	66	64	67	63	76	63
Not determinable	1	1	2	1	1	1	(²)	2	3	1
Average difference between in and outside of network	\$527	\$523	\$554	\$470	\$489	\$543	\$583	\$483	\$428	\$536
Indemnity in and outside of network with primary care physician³										
Total	100	100	100	-	100	100	100	100	100	100
Difference in deductible amounts between in and outside of network	39	37	45	-	48	35	29	46	59	35
Less than \$200	3	2	5	-	9	(²)	6	(²)	-	3
\$200–\$399	10	9	13	-	9	11	2	16	31	6
Greater than \$399	9	12	4	-	4	11	7	10	3	10
Amount not determinable	18	14	23	-	26	14	13	21	26	16
Overall deductible does not differ between in and outside of network	57	58	51	-	52	59	62	54	41	60
Not determinable	4	5	3	-	-	6	9	-	-	5
Average difference between in and outside of network	\$354	\$391	\$283	-	\$229	\$408	\$296	\$379	\$307	\$369

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 8. Indemnity plans with overall limits: Relationship between individual and family deductible, all private industry workers, National Compensation Survey, 2003

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	69	68	70	72	69	69	72	66	65	70
Family deductible is multiple of individual deductible	64	63	65	69	63	65	66	63	63	64
Average multiple	2.4	2.4	2.5	2.5	2.4	2.4	2.5	2.4	2.4	2.5
Specified number of individual deductibles must be met to satisfy family deductible	5	5	5	3	6	4	7	4	1	6
Average number of individual deductibles	2.8	2.8	2.8	2.8	2.8	2.7	2.8	2.7	3.0	2.8
No deductible or no family deductible ...	30	30	29	27	30	29	26	32	33	29
Not determinable	2	2	2	1	1	2	2	1	2	2

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: Coinsurance rates, all private industry workers, National Compensation Survey, 2003

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	81	79	82	89	80	81	84	78	74	82
80 percent	42	40	44	50	35	45	42	42	44	42
85 percent	2	2	1	3	2	2	1	3	1	2
90 percent	22	21	22	22	28	19	22	22	18	22
Other percentage	5	5	4	5	4	5	7	3	2	5
Percentage not determinable	10	10	10	9	12	9	12	9	9	10
Other	1	1	(²)	-	(²)	1	(²)	1	(²)	1
Without coinsurance ³	19	21	18	11	20	19	16	22	26	18
Traditional Indemnity										
Total	100	100	100	-	100	100	100	100	100	100
With coinsurance ¹	99	98	99	-	99	99	100	98	100	98
80 percent	77	74	83	-	89	72	81	74	88	73
90 percent	6	6	7	-	10	4	6	6	10	5
Other percentage	12	13	9	-	(²)	17	13	11	2	16
Other	4	6	1	-	-	5	-	6	-	5
Without coinsurance ³	1	2	1	-	1	1	-	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	80	79	80	88	77	81	81	79	72	81
80 percent	45	43	45	55	35	49	43	46	44	45
85 percent	2	2	1	3	2	2	1	3	1	2
90 percent	27	26	29	26	35	24	27	27	24	28
Other percentage	4	5	3	4	5	4	7	2	3	5
Percentage not determinable	1	2	(²)	-	(²)	2	3	(²)	(²)	1
Other	(²)	(²)	(²)	-	(²)	(²)	(²)	(²)	(²)	(²)
Without coinsurance ³	20	21	20	12	23	19	19	21	28	19
Indemnity in and outside of network with primary care physician⁴										
Total	100	100	100	-	100	100	100	100	100	100
With coinsurance ¹	78	77	75	-	82	76	87	71	59	81
80 percent	-	-	-	-	-	-	-	-	-	-
85 percent	-	-	-	-	-	-	-	-	-	-
90 percent	-	-	-	-	-	-	-	-	-	-
Other percentage	-	-	-	-	-	-	-	-	-	-
Percentage not determinable	-	-	-	-	-	-	-	-	-	-
Without coinsurance ³	22	23	25	-	18	24	13	29	41	19

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 10. Indemnity plans with overall limits: Coinsurance rate difference between in-network and outside-of-network coverage, all private industry workers, National Compensation Survey, 2003

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										
Less than 10 percent	(²)	-	1	-	1	-	(²)	-	1	-
10 percent	14	14	16	11	16	14	15	14	18	14
11-19 percent	2	1	3	8	3	2	1	3	2	2
20 percent	47	50	46	27	53	44	50	45	43	48
Greater than 20 percent	20	21	13	40	12	23	15	24	14	20
Difference not determinable	2	2	1	-	1	2	3	(²)	(²)	2
Overall coinsurance rates do not differ between in and outside of network	15	12	19	14	14	15	16	14	21	14
Average percent difference between in and out of network	20.8	21.2	19.5	23.4	19.4	21.5	20.1	21.5	19.3	21.0
Indemnity in and outside of network with primary care physician³										
Total	100	100	100	-	100	100	100	100	100	100
Difference in coinsurance rates between in and outside of network ¹										
Less than 10 percent	-	-	-	-	-	-	-	-	-	-
10 percent	-	-	-	-	-	-	-	-	-	-
20 percent	-	-	-	-	-	-	-	-	-	-
Greater than 20 percent	-	-	-	-	-	-	-	-	-	-
Difference not determinable	-	-	-	-	-	-	-	-	-	-
Overall coinsurance rates do not differ between in and outside of network	11	14	5	-	1	15	10	11	(²)	13
Average percent difference between in and outside of network	22.4	23.2	20.2	-	17.9	23.8	20.9	22.9	20.6	22.8

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 11. Indemnity plans with overall limits: Maximum out-of-pocket expense provisions, all private industry workers, National Compensation Survey, 2003

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	80	82	76	82	78	81	83	78	64	83
With an annual dollar maximum on out-of-pocket expense ¹	78	80	74	81	74	79	81	75	60	81
Per individual:										
Less than \$500	3	3	2	3	3	2	2	3	2	3
\$500	7	8	6	2	6	7	8	5	5	7
\$501-\$999	6	5	6	7	9	4	4	7	4	6
\$1,000	15	17	11	17	12	16	16	14	9	16
\$1,001-\$1,499	5	6	5	3	5	5	3	7	5	5
\$1500	11	10	11	10	8	12	13	9	11	11
\$1,501-\$1,999	2	2	1	1	2	2	1	3	1	2
\$2,000	12	12	11	12	11	12	14	10	5	13
Greater than \$2,000	19	17	20	26	18	19	20	18	16	19
Per family:										
Less than \$1,000	2	3	1	2	3	2	2	3	1	3
\$1,000	4	4	4	2	4	4	6	3	5	4
\$1,001-\$1,999	8	7	8	7	10	6	6	9	8	7
\$2,000	8	9	6	16	7	9	9	8	5	9
\$2,001-\$2,999	5	5	5	3	6	4	2	7	4	5
\$3,000	10	12	9	3	7	11	12	9	5	11
Greater than \$3,000	29	27	30	36	27	30	31	27	20	30
No family maximum	9	10	9	11	8	10	10	9	11	9
Family maximum cannot be computed ²	2	2	2	2	3	2	3	1	(³)	3
Annual maximum on out-of-pocket expense based on earnings	(³)	(³)	(³)	(³)	(³)	(³)	(³)	1	(³)	(³)
Annual maximum on out-of-pocket expense varies by coinsurance rate ⁴	1	1	1	-	(³)	1	2	(³)	1	1
Other	1	1	2	1	3	(³)	(³)	2	4	1
No out-of-pocket expense required ⁵	13	14	13	6	13	13	10	15	18	12
No limit on out-of-pocket expenses	4	3	4	10	3	4	3	4	7	3
Not determinable	4	2	7	2	6	2	5	3	11	2
Average annual dollar maximum on individual out-of-pocket expenses	\$1,962	\$1,885	\$2,020	\$2,299	\$1,885	\$1,993	\$2,122	\$1,819	\$2,061	\$1,949
Average annual dollar maximum on family out-of-pocket expenses	3,908	3,536	4,441	4,522	4,103	3,827	3,915	3,903	4,047	3,892

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 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.

³ Less than 0.5 percent.

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 12. Traditional indemnity plans with overall limits: Maximum out-of-pocket expense provisions, all private industry workers, National Compensation Survey, 2003

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	73	77	71	86	68	71	75	60	78
With an annual dollar maximum on out-of-pocket expense ¹	70	74	67	80	65	67	71	53	75
Per individual:									
Less than \$500	3	6	(²)	1	4	-	6	1	4
\$500	1	(²)	(²)	-	1	-	2	2	1
\$501-\$999	9	12	7	17	6	7	11	2	12
\$1,000	13	14	10	6	15	15	11	12	13
\$1,001-\$1,499	4	8	1	4	5	5	4	(²)	6
\$1500	6	3	11	13	3	(²)	11	15	3
\$1,501-\$1,999	1	2	1	3	1	1	2	1	1
\$2,000	13	12	15	11	13	19	7	2	17
Greater than \$2,000	19	17	22	24	17	20	18	18	19
Per family:									
Less than \$1,000	5	9	(²)	1	6	(²)	8	(²)	6
\$1,000	1	(²)	(²)	-	1	-	2	2	1
\$1,001-\$1,999	4	6	3	13	(²)	-	7	2	5
\$2,000	7	7	6	4	8	8	6	7	7
\$2,001-\$2,999	4	8	(²)	4	4	5	4	(²)	6
\$3,000	7	6	8	8	6	8	6	11	5
Greater than \$3,000	27	23	33	28	26	33	21	12	32
No family maximum	12	13	12	18	9	6	16	19	10
Family maximum cannot be computed ³	3	3	4	4	3	7	1	-	4
Annual maximum on out-of-pocket expense based on earnings	(²)	(²)	(²)	-	(²)	-	(²)	-	(²)
Annual maximum on out-of-pocket expense varies by coinsurance rate ⁴	2	3	-	-	2	4	-	-	2
Other	2	(²)	4	6	(²)	-	4	7	(²)
No out-of-pocket expense required ⁵	1	1	1	1	1	-	2	(²)	1
No limit on out-of-pocket expenses	22	19	23	7	29	23	22	33	18
Not determinable	4	2	5	6	2	7	1	7	2
Average annual dollar maximum on individual out-of-pocket expenses	\$1,734	\$1,609	\$1,949	\$1,801	\$1,696	\$1,905	\$1,607	\$1,818	\$1,712
Average annual dollar maximum on family out-of-pocket expenses	3,486	3,171	4,007	3,297	3,579	4,134	2,984	3,054	3,572

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 13. Indemnity plans in and outside of network with overall limits: Maximum out-of-pocket expense provisions, all private industry workers, National Compensation Survey, 2003

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	81	82	77	85	77	82	84	79	66	83
With an annual dollar maximum on out-of-pocket expense ¹	79	81	75	84	74	81	82	77	62	82
Per individual:										
Less than \$500	3	3	2	3	4	2	2	3	3	3
\$500	7	8	7	1	7	7	8	6	6	7
\$501-\$999	5	4	6	7	8	4	4	6	5	5
\$1,000	15	17	11	17	12	16	16	14	9	16
\$1,001-\$1,499	5	6	5	3	5	5	3	8	7	5
\$1500	11	11	11	11	7	13	14	9	10	12
\$1,501-\$1,999	2	3	1	1	2	2	1	3	1	2
\$2,000	12	12	11	12	11	12	14	10	6	13
Greater than \$2,000	19	17	20	27	17	19	20	18	15	19
Per family:										
Less than \$1,000	2	3	1	2	3	2	2	2	1	2
\$1,000	4	4	5	1	5	4	6	3	6	4
\$1,001-\$1,999	8	8	8	7	10	7	6	9	9	8
\$2,000	9	9	6	17	7	9	10	8	5	9
\$2,001-\$2,999	5	5	6	3	6	4	2	7	5	5
\$3,000	11	13	9	2	7	12	12	9	4	12
Greater than \$3,000	29	28	30	38	27	30	31	28	22	30
No family maximum	9	9	8	11	7	10	10	8	10	9
Family maximum cannot be computed ²	2	2	2	2	3	2	3	2	1	2
Annual maximum on out-of-pocket expense based on earnings	(³)	(³)	(³)	(³)	(³)	1	(³)	1	(³)	(³)
Annual maximum on out-of-pocket expense varies by coinsurance rate ⁴	1	1	1	-	(³)	1	1	(³)	1	1
Other	1	1	2	(³)	3	(³)	(³)	1	3	1
No out-of-pocket expense required ⁵	14	14	14	6	14	14	11	16	20	13
No limit on out-of-pocket expenses	2	1	2	7	2	1	1	3	2	2
Not determinable	4	2	7	2	7	2	5	3	12	2
Average annual dollar maximum on individual out-of-pocket expenses	\$1,982	\$1,908	\$2,022	\$2,351	\$1,862	\$2,030	\$2,138	\$1,843	\$2,110	\$1,966
Average annual dollar maximum on family out-of-pocket expenses	3,944	3,561	4,481	4,617	4,109	3,877	3,887	3,993	4,209	3,914

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 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.

³ Less than 0.5 percent.

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. Indemnity plans with overall limits: Maximum benefit provisions, all private industry workers, National Compensation Survey, 2003

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	65	61	71	74	69	64	65	66	69	65
Lifetime maximum only ¹	65	61	71	74	68	64	65	65	68	65
Less than \$1,000,000	3	2	6	2	3	3	4	2	12	2
\$1,000,000	29	25	32	40	28	29	20	36	30	28
\$1,000,001–\$1,999,999	1	1	1	(²)	2	1	(²)	2	1	1
\$2,000,000	21	21	22	14	24	19	23	19	18	21
Greater than \$2,000,000	11	11	10	18	11	11	18	6	7	12
Other maximum	(²)	(²)	(²)	1	(²)	(²)	(²)	(²)	1	(²)
Unlimited maximum	26	31	20	18	23	28	23	29	26	26
Not determinable	8	8	8	7	8	8	12	5	5	9
Average lifetime maximum (in thousands)	\$1,887	\$1,966	\$1,742	\$2,018	\$1,884	\$1,889	\$2,228	\$1,609	\$1,516	\$1,955

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 15. Indemnity plans: Coverage for alternatives to hospital care, all private industry workers, National Compensation Survey, 2003

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	4	5	2	1	3	4	3	4	4	4
Subject to internal limits only ¹	22	20	26	18	23	22	23	22	24	22
Subject to internal and overall limits	57	59	54	60	56	58	57	57	52	58
Subject to overall limits only ²	17	16	18	21	18	17	16	18	20	17
Internal limits										
Limit on days	72	72	70	71	70	72	73	71	70	72
Separate coinsurance	5	6	5	4	6	5	5	6	8	5
Limit to maximum percentage rate of prior hospital confinement	1	1	2	(³)	2	1	1	1	1	1
Other limits	7	6	7	12	8	6	4	9	3	7
Limits not determinable	1	(³)	2	(³)	(³)	1	1	1	2	1
Home health care										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	9	9	10	2	10	9	9	9	14	8
Subject to internal limits only ¹	19	18	21	19	20	19	20	19	20	19
Subject to internal and overall limits	44	46	38	57	35	48	38	48	42	44
Subject to overall limits only ²	28	27	31	22	35	25	33	24	25	29
Internal limits										
Limit on days	46	49	42	49	42	48	42	50	44	47
Separate coinsurance	11	14	6	8	7	12	8	13	7	11
Other limits	16	13	18	25	12	17	16	15	15	16
Limits not determinable	(³)	(³)	1	(³)	(³)	(³)	(³)	1	2	(³)
Hospice care										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	14	13	16	6	14	13	11	16	23	12
Subject to internal limits only ¹	16	16	17	15	21	14	16	17	18	16
Subject to internal and overall limits	29	31	25	25	23	31	26	31	20	30
Subject to overall limits only ²	41	40	41	54	41	41	48	36	39	42
Internal limits										
Limit on dollars	15	13	16	21	17	14	11	18	12	15
Separate coinsurance	13	16	9	9	10	14	12	14	12	13
Other limits	25	27	22	20	22	26	23	26	13	27
Limits not determinable	1	(³)	1	(³)	1	(³)	1	1	2	(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 16. Copayment provisions for hospital room and board by plan type, all private industry workers, National Compensation Survey, 2003

Plan type and copayment provision	All workers	Occupational group		Industry		Establishment size		Nonunion
		White collar	Blue collar	Goods producing	Service producing	1 to 99 workers	100 workers or more	
Indemnity								
Total ¹	100	100	100	100	100	100	100	100
Per confinement	82	85	78	79	84	72	88	82
Less than \$100	7	4	13	8	6	4	8	4
\$100	18	19	18	20	17	23	14	18
\$101-\$199	2	3	2	5	1	2	3	3
\$200	16	13	11	11	18	8	21	17
\$201-\$249	(²)	(²)	-	-	(²)	-	(²)	(²)
\$250	20	23	18	21	20	16	23	20
\$251-\$499	5	5	6	6	5	11	2	5
\$500	7	9	1	-	10	2	9	7
Greater than \$500	5	5	5	5	5	6	4	5
Unspecified amount	3	3	3	3	2	-	4	3
Limited to maximum dollar copayment amount per year ³	5	6	3	3	6	2	7	5
Copayment per year	13	12	15	14	12	23	7	13
Copayment per day	8	5	14	17	4	5	10	8
Copayment limited to a specified number of days	6	3	12	14	3	4	7	6
Prepaid								
Total ¹	100	100	100	100	100	100	100	100
Per confinement	83	88	70	60	91	82	85	84
Less than \$100	1	1	-	1	1	-	2	1
\$100	15	16	11	11	16	5	23	13
\$101-\$199	4	7	(²)	-	6	5	4	5
\$200	3	3	2	4	2	1	4	3
\$201-\$249	5	7	1	2	5	2	7	2
\$250	29	26	25	36	27	27	31	29
\$251-\$499	2	1	4	4	1	2	2	3
\$500	20	20	27	1	27	31	11	23
Greater than \$500	4	7	1	1	5	9	-	5
Unspecified amount	(²)	(²)	(²)	(²)	-	-	(²)	(²)
Limited to maximum dollar copayment amount per year ³	15	9	6	7	18	11	18	15
Copayment per year	6	3	9	11	5	1	11	5
Copayment per day	11	9	21	29	6	17	6	12
Copayment limited to a specified number of days	4	4	4	10	2	5	2	5

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 17. Prepaid plans: Coverage for selected services and alternatives to hospital care, all private industry workers, National Compensation Survey, 2003

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	57	56	57	61	58	56	52	61	62	55
Subject to limits ¹	43	44	43	39	42	44	48	39	38	45
Inpatient surgery	100	100	100	100	100	100	100	100	100	100
Covered in full	79	78	80	87	86	77	79	80	87	78
Subject to limits ¹	21	22	20	13	14	23	21	20	13	22
Outpatient surgery ²	100	100	100	100	100	100	100	100	100	100
Covered in full	50	50	48	56	59	47	49	51	49	50
Subject to limits ¹	50	50	52	44	41	53	51	49	51	50
Office physician visits	100	100	100	100	100	100	100	100	100	100
Covered in full	3	1	4	5	1	3	1	4	7	1
Subject to limits ¹	97	99	96	95	99	97	99	96	93	99
Total subject to copayment per visit ³	97	99	95	95	98	97	99	96	92	99
\$2 per visit	(⁴)	(⁴)	-	2	-	(⁴)	-	(⁴)	1	(⁴)
\$5 per visit	7	10	3	8	5	8	4	10	15	6
\$6-\$9 per visit	4	2	3	16	-	5	6	2	4	4
\$10 per visit	38	40	37	26	44	36	26	48	45	36
\$15 per visit	29	29	25	36	24	30	33	25	17	31
\$20 per visit	14	10	22	6	17	13	21	7	8	15
Greater than \$20 per visit	5	6	4	1	6	4	8	2	2	5
Unspecified copayment	1	1	(⁴)	(⁴)	2	1	1	1	-	1
Total subject to other limits only	(⁴)	-	1	-	1	-	(⁴)	(⁴)	1	(⁴)
Extended care ⁵	100	100	100	-	100	100	100	100	100	100
Covered in full	23	23	22	-	23	23	21	25	36	20
Subject to limits ¹	77	77	78	-	77	77	79	75	64	80
Home health care ⁵	100	100	100	100	100	100	100	100	100	100
Covered in full	62	62	58	72	60	63	63	62	62	62
Subject to limits ¹	38	38	42	28	40	37	37	38	38	38
Hospice care	100	100	100	-	100	100	100	100	100	100
Covered in full	61	67	51	-	50	65	61	62	60	62
Subject to limits ¹	39	33	49	-	50	35	39	38	40	38

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 18. Prepaid plans: Summary of selected features, all private industry workers, National Compensation Survey, 2003

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	15	11	16	29	11	16	17	13	18	14
Individual practice association model ²	43	44	46	31	48	41	47	40	45	43
Mixed model	21	20	23	22	29	18	23	19	20	21
Network model	5	6	5	1	7	5	3	7	9	4
Other	(³)	(³)	(³)	(³)	-	(³)	(³)	-	-	(³)
Not determinable	16	19	10	16	5	19	9	21	8	18
Federally qualified	45	43	44	52	55	41	51	40	42	46

¹ Care is provided at centralized locations.

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

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 19. Prepaid plans: Extent of coverage for extended care facilities, all private industry workers, National Compensation Survey, 2003

Type of coverage	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
Covered in full	23	23	22	23	23	21	25	36	20
Day limit	74	72	77	76	73	74	74	64	76
Per year	61	60	59	58	62	62	59	51	63
30	8	7	10	5	9	12	4	4	9
45	2	3	2	4	2	1	4	3	2
60	14	11	12	9	15	12	15	12	14
90	2	2	2	7	1	2	2	1	3
100	23	25	20	22	24	23	23	21	24
120	5	4	5	7	4	-	9	9	4
Other	7	8	7	4	8	11	3	2	8
Per confinement	7	6	8	9	6	4	9	7	6
Per lifetime	2	(¹)	6	9	-	5	-	1	2
Not determinable	4	5	4	-	6	2	6	5	4
Other limits only	3	5	1	1	4	5	1	(¹)	4
Not determinable	(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 20. Outpatient prescription drug benefits: Summary of coverage, all private industry workers, National Compensation Survey, 2003

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 brand name drugs	98	99	97	99	98	98	98	99	98	98
Higher reimbursement for generic drugs	87	88	82	92	85	87	87	86	74	89
Coverage for mail order drugs	72	73	70	68	70	72	64	78	70	72
Higher reimbursement for formulary drugs	30	31	28	38	33	29	31	30	19	33
Not determinable	3	3	3	2	3	4	3	3	8	2

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

Table 21. Mental health care and substance abuse treatment benefits: Comparison with coverage for other illnesses, all private industry workers, National Compensation Survey, 2003

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	10	10	10	8	11	10	9	10	9	10
Covered differently	90	90	90	92	89	90	91	90	91	90
Outpatient¹										
Total	100	100	100	100	100	100	100	100	100	100
Covered the same	5	5	5	3	7	4	6	4	4	5
Covered differently	95	95	95	97	93	96	94	96	96	95
Alcohol abuse										
Inpatient detoxification²										
Total	100	100	100	100	100	100	100	100	100	100
Covered the same	15	15	14	15	14	15	15	15	15	15
Covered differently	85	85	86	85	86	85	85	85	85	85
Inpatient rehabilitation³										
Total	100	100	100	100	100	100	100	100	100	100
Covered the same	7	8	6	7	6	7	7	7	3	8
Covered differently	93	92	94	93	94	93	93	93	97	92
Outpatient rehabilitation¹										
Total	100	100	100	100	100	100	100	100	100	100
Covered the same	7	7	7	6	6	7	9	5	5	7
Covered differently	93	93	93	94	94	93	91	95	95	93
Drug abuse										
Inpatient detoxification²										
Total	100	100	100	100	100	100	100	100	100	100
Covered the same	15	15	15	16	14	15	15	15	15	15
Covered differently	85	85	85	84	86	85	85	85	85	85
Inpatient rehabilitation³										
Total	100	100	100	100	100	100	100	100	100	100
Covered the same	7	8	5	6	6	7	7	7	3	7
Covered differently	93	92	95	94	94	93	93	93	97	93
Outpatient rehabilitation¹										
Total	100	100	100	100	100	100	100	100	100	100
Covered the same	6	7	6	6	6	6	8	5	5	7
Covered differently	94	93	94	94	94	94	92	95	95	93

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 22. Mental healthcare and substance abuse treatment benefits: Coverage in prepaid plans, all private industry workers, National Compensation Survey, 2003

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	11	13	7	14	7	12	9	13	11	11
Subject to limits ¹	89	87	93	86	93	88	91	87	89	89
Outpatient²										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	1	2	2	(³)	1	1	(³)	2	4	1
Subject to limits ¹	99	98	98	100	99	99	100	98	96	99
Alcohol abuse										
Inpatient detoxification⁴										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	21	23	19	16	23	20	27	16	17	22
Subject to limits ¹	79	77	81	84	77	80	73	84	83	78
Inpatient rehabilitation⁵										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	6	7	5	(³)	5	6	6	6	4	6
Subject to limits ¹	94	93	95	100	95	94	94	94	96	94
Outpatient²										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	1	1	1	-	2	1	2	(³)	1	1
Subject to limits ¹	99	99	99	100	98	99	98	100	99	99
Drug Abuse										
Inpatient detoxification⁴										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	20	22	16	16	22	19	26	14	14	21
Subject to limits ¹	80	78	84	84	78	81	74	86	86	79
Inpatient rehabilitation⁵										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	5	7	5	(³)	3	6	3	7	6	5
Subject to limits ¹	95	93	95	100	97	94	97	93	94	95
Outpatient rehabilitation²										
Total	100	100	100	100	100	100	100	100	100	100
Covered in full	(³)	1	(³)	-	(³)	1	1	(³)	(³)	1
Subject to limits ¹	100	99	100	100	100	99	99	100	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 23. Mental healthcare benefits: Separate limits on coverage in indemnity and prepaid plans, all private industry workers, National Compensation Survey, 2003

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	13	14	11	14	12	13	11	14	14	12
Subject to separate limits ²	87	86	89	86	88	87	89	86	86	88
Days	78	78	79	79	76	80	80	77	72	80
Dollars	9	9	10	10	10	9	13	7	14	9
Coinsurance	10	9	11	8	11	9	12	8	11	10
Copayment	7	8	5	8	6	8	7	7	3	8
Other ³	6	6	5	2	5	6	3	8	7	5
Outpatient⁴										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ¹	9	9	9	5	10	8	10	8	8	9
Subject to separate limits ²	91	91	91	95	90	92	90	92	92	91
Days	71	71	68	76	68	72	66	74	67	71
Dollars	10	9	12	10	11	10	13	9	15	10
Coinsurance	16	14	18	20	16	16	13	18	22	15
Copayment	20	22	18	21	20	20	18	22	13	21
Other ³	16	17	16	11	15	17	17	15	14	17
Prepaid										
Inpatient										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ¹	20	21	20	17	17	21	23	17	12	22
Subject to separate limits ²	80	79	80	83	83	79	77	83	88	78
Days	78	78	78	82	81	77	75	81	85	76
Dollars	3	4	1	6	-	4	4	3	(⁵)	4
Coinsurance	3	4	1	8	(⁵)	4	4	3	1	4
Copayment	16	15	14	23	18	15	17	14	12	17
Other ³	1	1	1	(⁵)	1	1	(⁵)	1	1	1
Outpatient⁴										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ¹	5	6	6	2	10	4	5	6	8	5
Subject to separate limits ²	95	94	94	98	90	96	95	94	92	95
Days	80	81	77	76	74	82	77	82	86	78
Dollars	1	1	1	-	-	1	1	1	(⁵)	1
Coinsurance	4	4	3	7	5	4	3	5	1	5
Copayment	52	51	55	52	62	49	54	51	45	54
Other ³	6	4	8	13	7	6	6	6	12	5

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 healthcare benefits are more restrictive than benefits for other treatments. For example, if a plan limits inpatient mental healthcare 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 healthcare and all other illnesses. For example, outpatient mental healthcare 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 24. Alcohol and drug abuse treatment benefits: Relationship between provisions in indemnity and prepaid plans, all private industry workers, National Compensation Survey, 2003

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 together ¹	63	65	60	66	63	63	59	67	61	64
Covered separately but with the same limits ²	6	5	7	7	6	6	6	6	9	6
Other ³	24	23	27	23	26	24	28	21	24	24
Alcohol and drug abuse treatment not covered	1	1	1	1	2	1	1	2	(⁴)	2
Not determinable	5	5	5	3	4	5	6	4	5	5

¹ 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.

² 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.

³ Includes plans in which alcohol abuse treatment coverage differs from drug abuse treatment coverage.

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 25. Alcohol abuse treatment benefits: Separate limits on coverage in indemnity plans, all private industry workers, National Compensation Survey, 2003

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	15	15	13	28	12	17	16	15	14	16
Subject to separate limits ³	85	85	87	72	88	83	84	85	86	84
Days	67	69	69	48	66	67	68	66	63	68
Dollars	24	23	25	28	26	23	23	25	33	23
Coinsurance	10	10	11	13	11	10	11	9	11	10
Copayment	7	8	5	7	6	8	7	8	3	8
Other ⁴	5	6	5	2	5	6	3	7	6	5
Inpatient rehabilitation⁵										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ²	10	11	8	19	7	12	12	9	6	11
Subject to separate limits ³	90	89	92	81	93	88	88	91	94	89
Days	72	72	73	57	70	72	72	71	71	72
Dollars	26	25	28	31	28	25	24	28	35	25
Coinsurance	11	10	12	11	13	10	12	10	11	10
Copayment	7	8	5	8	6	8	7	8	3	8
Other ⁴	6	6	6	3	5	6	3	8	6	6
Outpatient rehabilitation⁶										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ²	9	10	8	9	6	11	11	7	7	10
Subject to separate limits ³	91	90	92	91	94	89	89	93	93	90
Days	61	63	59	58	59	62	58	64	60	61
Dollars	26	24	28	31	31	24	24	28	31	25
Coinsurance	14	12	15	15	14	13	11	16	17	13
Copayment	19	21	16	22	21	19	18	21	12	21
Other ⁴	16	17	15	11	15	16	17	15	12	17

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 26. Alcohol abuse treatment benefits: Separate limits on coverage in prepaid plans, all private industry workers, National Compensation Survey, 2003

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	34	37	36	21	38	33	44	27	29	36
Subject to separate limits ³	66	63	64	79	62	67	56	73	71	64
Days	57	52	59	73	56	57	52	61	64	55
Dollars	5	5	3	11	3	6	2	8	1	6
Coinsurance	4	4	4	1	4	4	5	3	2	4
Copayment	16	14	14	25	16	15	16	16	13	16
Other ⁴	3	4	2	(⁵)	1	4	1	5	3	3
Inpatient rehabilitation⁶										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ²	12	13	13	5	15	11	14	11	5	14
Subject to separate limits ³	88	87	87	95	85	89	86	89	95	86
Days	79	76	80	88	81	78	81	77	84	77
Dollars	7	7	5	14	4	9	3	11	5	8
Coinsurance	6	6	5	10	5	7	10	3	2	7
Copayment	17	14	17	31	19	17	20	15	17	17
Other ⁴	4	5	3	(⁵)	1	4	(⁵)	6	5	3
Outpatient rehabilitation⁷										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ²	8	8	11	4	14	6	12	5	8	8
Subject to separate limits ³	92	92	89	96	86	94	88	95	92	92
Days	74	74	71	82	65	77	69	78	81	72
Dollars	5	5	4	6	4	5	4	6	1	6
Coinsurance	3	3	2	8	2	4	6	2	1	4
Copayment	45	45	46	40	55	41	43	46	37	46
Other ⁴	6	6	7	2	7	5	4	7	11	4

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 Less than 0.5 percent.

⁶ Rehabilitation is designed to alter the abusive behavior in patients once they are free of acute physical and mental complications.

⁷ 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 27. Drug abuse treatment benefits: Separate limits on coverage in indemnity plans, all private industry workers, National Compensation Survey, 2003

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	15	14	13	29	12	16	16	15	14	15
Subject to separate limits ³	85	86	87	71	88	84	84	85	86	85
Days	68	69	69	49	66	68	68	67	64	68
Dollars	24	22	25	27	26	23	23	24	32	22
Coinsurance	10	10	11	12	11	10	11	9	11	10
Copayment	7	8	5	7	6	8	7	8	3	8
Other ⁴	6	6	5	2	5	6	3	8	6	6
Inpatient rehabilitation⁵										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ²	10	10	7	17	7	11	11	8	6	10
Subject to separate limits ³	90	90	93	83	93	89	89	92	94	90
Days	72	72	74	56	70	73	73	71	71	72
Dollars	26	25	28	33	28	26	24	29	35	25
Coinsurance	11	10	12	14	13	10	11	10	11	11
Copayment	7	8	5	8	6	8	7	8	3	8
Other ⁴	6	7	6	2	5	7	3	8	6	6
Outpatient rehabilitation⁶										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ²	9	10	7	9	6	10	11	7	7	9
Subject to separate limits ³	91	90	93	91	94	90	89	93	93	91
Days	61	63	60	56	59	62	58	64	60	61
Dollars	26	24	29	32	31	24	24	28	31	25
Coinsurance	14	13	15	17	14	14	11	16	17	13
Copayment	19	21	16	21	21	19	18	20	12	21
Other ⁴	16	17	16	10	15	17	17	16	12	17

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 28. Drug abuse treatment benefits: Separate limits on coverage in prepaid plans, all private industry workers, National Compensation Survey, 2003

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	33	36	33	21	37	32	42	26	26	35
Subject to separate limits ³	67	64	67	79	63	68	58	74	74	65
Days	58	53	60	73	58	58	54	61	65	56
Dollars	6	5	4	11	3	7	2	9	4	6
Coinsurance	4	4	4	1	4	4	5	3	2	4
Copayment	16	14	14	25	16	15	16	16	13	16
Other ⁴	3	4	2	(⁵)	1	4	1	5	3	3
Inpatient rehabilitation⁶										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ²	12	13	12	5	13	11	11	12	7	13
Subject to separate limits ³	88	87	88	95	87	89	89	88	93	87
Days	80	77	82	88	82	79	84	77	85	79
Dollars	7	7	4	14	4	8	3	9	2	8
Coinsurance	6	6	5	10	5	7	10	3	2	7
Copayment	17	14	17	31	19	17	20	15	17	17
Other ⁴	4	5	3	(⁵)	1	4	(⁵)	6	5	3
Outpatient rehabilitation⁷										
Total	100	100	100	100	100	100	100	100	100	100
No separate limits ²	8	8	9	4	12	6	11	5	7	8
Subject to separate limits ³	92	92	91	96	88	94	89	95	93	92
Days	74	74	72	82	67	77	70	78	82	72
Dollars	5	5	4	6	4	5	4	6	1	6
Coinsurance	3	3	2	8	2	4	6	2	1	4
Copayment	45	45	46	40	55	41	43	46	37	46
Other ⁴	6	6	7	2	7	5	4	7	11	4

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 Less than 0.5 percent.

⁶ Rehabilitation is designed to alter the abusive behavior in patients once they are free of acute physical and mental complications.

⁷ 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 29. 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, 2003

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	44	47	38	47	39	46	37	50	38	45
Not subject to plan's out-of-pocket limits	51	47	56	51	54	49	57	45	59	49
Not determinable	5	5	6	1	7	5	6	5	3	6
Outpatient¹										
Total	100	100	100	100	100	100	100	100	100	100
Subject to plan's out-of-pocket limits	42	44	34	60	35	46	34	49	36	43
Not subject to plan's out-of-pocket limits	52	50	59	38	58	50	60	46	61	51
Not determinable	5	5	7	1	7	5	6	5	3	6
Alcohol abuse										
Inpatient detoxification²										
Total	100	100	100	100	100	100	100	100	100	100
Subject to plan's out-of-pocket limits	45	49	36	51	38	48	39	51	40	46
Not subject to plan's out-of-pocket limits	50	46	57	48	55	47	55	45	57	49
Not determinable	5	5	6	1	7	4	6	4	3	5
Inpatient rehabilitation³										
Total	100	100	100	100	100	100	100	100	100	100
Subject to plan's out-of-pocket limits	45	49	37	51	38	49	39	51	41	46
Not subject to plan's out-of-pocket limits	49	46	57	43	56	46	55	44	56	48
Not determinable	6	5	6	7	7	5	7	5	3	6
Outpatient rehabilitation¹										
Total	100	100	100	100	100	100	100	100	100	100
Subject to plan's out-of-pocket limits	45	47	36	66	36	48	37	51	38	46
Not subject to plan's out-of-pocket limits	50	49	57	33	57	48	58	44	59	49
Not determinable	5	4	7	1	7	4	5	5	3	5

See footnotes at end of table.

Table 29. 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, 2003 — 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 detoxification²										
Total	100	100	100	100	100	100	100	100	100	100
Subject to plan's out-of-pocket limits	45	49	36	51	38	48	39	51	40	46
Not subject to plan's out-of-pocket limits	50	46	57	48	55	47	55	45	57	49
Not determinable	5	5	6	1	7	4	6	4	3	5
Inpatient rehabilitation³										
Total	100	100	100	100	100	100	100	100	100	100
Subject to plan's out-of-pocket limits	45	49	37	51	38	48	39	51	41	46
Not subject to plan's out-of-pocket limits	49	46	57	43	56	46	55	45	56	48
Not determinable	6	5	6	7	7	5	7	5	3	6
Outpatient rehabilitation¹										
Total	100	100	100	100	100	100	100	100	100	100
Subject to plan's out-of-pocket limits	45	47	36	66	36	48	37	51	38	46
Not subject to plan's out-of-pocket limits	50	49	57	33	57	48	57	44	59	49
Not determinable	5	4	7	1	7	4	5	5	3	5

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 30. Dental care benefits: Coverage for selected procedures and average percentage of usual, customary, and reasonable charge, all private industry workers, National Compensation Survey, 2003

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	31	31	32	35	27	33	32	31	24	33
Scheduled cash allowance	3	1	6	5	7	1	2	3	5	2
Subject to copayment ³	3	3	2	4	2	3	4	2	4	2
Percent of usual, customary, and reasonable charge	63	65	60	55	64	62	62	63	66	62
Other ⁴	(⁵)	(⁵)	1	1	(⁵)	(⁵)	(⁵)	1	(⁵)	(⁵)
Not covered	-	-	-	-	-	-	-	-	-	-
Not determinable	-	-	-	-	-	-	-	-	-	-
Average percent	96	96	96	96	97	96	97	95	95	96
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	31	30	31	34	25	33	31	31	23	33
Scheduled cash allowance	3	1	6	5	6	1	2	3	5	2
Subject to copayment ³	2	3	1	4	1	3	4	2	3	2
Percent of usual, customary, and reasonable charge	63	65	61	56	66	62	63	63	67	62
Other ⁴	1	(⁵)	3	1	3	1	1	1	4	1
Not covered	-	-	-	-	-	-	-	-	-	-
Not determinable	-	-	-	-	-	-	-	-	-	-
Average percent	95	96	95	96	96	95	97	95	94	96
Fillings										
Total	100	100	100	100	100	100	100	100	100	100
Covered ¹	99	99	98	99	98	99	100	99	96	100
In full ²	4	4	4	6	2	5	4	4	4	4
Scheduled cash allowance	6	4	9	8	8	5	8	5	11	5
Subject to copayment ³	3	3	2	5	2	4	4	2	2	3
Percent of usual, customary, and reasonable charge	86	88	84	80	86	86	85	87	79	88
Other ⁴	1	(⁵)	2	1	1	1	(⁵)	1	2	1
Not covered	-	-	-	-	-	-	-	-	-	-
Not determinable	1	1	2	1	2	1	(⁵)	1	4	(⁵)
Average percent	79	79	79	79	79	79	80	79	81	79

See footnotes at end of table.

Table 30. Dental care benefits: Coverage for selected procedures and average percentage of usual, customary, and reasonable charge, all private industry workers, National Compensation Survey, 2003 — 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		
Surgery⁶										
Total	100	100	100	100	100	100	100	100	100	100
Covered ¹	99	99	99	98	99	99	100	99	97	100
In full ²	2	3	2	2	1	3	1	3	2	2
Scheduled cash allowance	6	5	7	8	5	6	8	4	11	4
Subject to copayment ³	5	5	3	8	2	6	6	4	4	5
Percent of usual, customary, and reasonable charge	87	88	87	81	89	86	86	87	80	89
Other ⁴	1	(⁵)	3	2	3	1	(⁵)	2	2	1
Not covered	(⁵)	(⁵)	1	-	1	(⁵)	(⁵)	(⁵)	1	(⁵)
Not determinable	1	1	(⁵)	2	-	1	(⁵)	1	2	(⁵)
Average percent	79	79	79	78	79	79	79	79	80	78
Periodontal care										
Total	100	100	100	100	100	100	100	100	100	100
Covered ¹	98	98	99	100	99	98	98	99	98	98
In full ²	1	2	1	1	1	2	1	2	2	1
Scheduled cash allowance	6	4	8	8	7	5	8	4	10	4
Subject to copayment ³	5	5	3	8	2	6	6	4	3	5
Percent of usual, customary, and reasonable charge	87	88	86	82	89	86	85	88	84	88
Other ⁴	1	(⁵)	2	2	1	1	(⁵)	1	2	1
Not covered	1	(⁵)	1	(⁵)	1	(⁵)	-	1	1	(⁵)
Not determinable	1	1	1	-	-	1	2	1	(⁵)	1
Average percent	76	76	77	75	77	76	77	76	78	76
Endodontics										
Total	100	100	100	100	100	100	100	100	100	100
Covered ¹	99	99	99	99	99	99	99	99	97	99
In full ²	1	1	1	1	1	1	1	2	2	1
Scheduled cash allowance	5	4	8	8	6	5	8	4	10	4
Subject to copayment ³	5	5	3	8	2	6	6	4	3	5
Percent of usual, customary, and reasonable charge	88	89	87	80	89	87	86	89	83	89
Other ⁴	1	(⁵)	2	2	1	1	(⁵)	1	2	1
Not covered	(⁵)	(⁵)	(⁵)	(⁵)	1	(⁵)	-	(⁵)	1	(⁵)
Not determinable	1	1	(⁵)	1	(⁵)	1	1	1	2	1
Average percent	74	75	74	74	74	74	75	74	76	74

See footnotes at end of table.

Table 30. Dental care benefits: Coverage for selected procedures and average percentage of usual, customary, and reasonable charge, all private industry workers, National Compensation Survey, 2003 — 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	96	97	96	96	96	97	99	95	92	97
In full ²	(⁵)	(⁵)	(⁵)	(⁵)	(⁵)	(⁵)	(⁵)	(⁵)	1	(⁵)
Scheduled cash allowance	6	4	10	6	7	6	8	5	11	5
Subject to copayment ³	5	5	3	8	2	6	6	4	3	5
Percent of usual, customary, and reasonable charge	86	88	85	80	86	86	86	86	80	88
Other ⁴	1	(⁵)	1	2	1	1	(⁵)	1	(⁵)	1
Not covered	3	2	3	3	2	3	1	3	3	2
Not determinable	1	1	2	1	2	1	-	2	4	(⁵)
Average percent	56	55	58	57	57	55	55	57	60	55
Prosthetics										
Total	100	100	100	100	100	100	100	100	100	100
Covered ¹	95	95	96	96	97	95	96	95	95	95
In full ²	(⁵)	(⁵)	(⁵)	-	(⁵)	(⁵)	(⁵)	(⁵)	(⁵)	(⁵)
Scheduled cash allowance	6	4	10	6	7	5	8	5	10	5
Subject to copayment ³	5	5	3	8	2	6	6	4	3	5
Percent of usual, customary, and reasonable charge	86	86	86	81	87	85	84	87	85	86
Other ⁴	1	(⁵)	1	2	1	1	(⁵)	1	-	1
Not covered	3	3	4	3	3	3	2	4	5	3
Not determinable	2	2	-	1	1	2	2	1	(⁵)	2
Average percent	55	54	56	54	55	54	54	55	58	54
Orthodontia										
Total	100	100	100	100	100	100	100	100	100	100
Covered ^{1,7}	74	76	70	69	71	75	68	77	78	73
In full ²	(⁵)	(⁵)	-	-	-	(⁵)	-	(⁵)	-	(⁵)
Scheduled cash allowance	11	10	12	7	15	9	9	12	21	8
Subject to copayment ³	6	7	3	8	4	6	5	6	5	6
Percent of usual, customary, and reasonable charge	59	62	56	53	55	61	56	61	55	60
Other ⁴	4	4	4	4	3	4	6	3	6	4
Not covered	23	21	25	29	25	22	27	20	19	24
Not determinable	4	3	5	1	4	4	6	3	4	4
Average percent	52	52	54	51	53	52	53	52	56	52

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 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.

⁵ Less than 0.5 percent.

⁶ Excludes plans that limited coverage to accidental injuries, removal of impacted wisdom teeth, or repair of jaw.

⁷ 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 31. Dental care benefits: Amount of individual deductible,¹ all private industry workers, National Compensation Survey, 2003

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 ..	67	70	59	68	60	69	64	68	44	72
Yearly deductible only	66	70	59	68	60	69	64	67	44	72
\$25	14	13	13	27	14	14	11	16	13	14
\$50	47	51	43	38	43	49	50	46	28	52
Other	4	5	2	2	2	4	1	5	1	4
Unspecified	1	1	2	1	(³)	2	3	(³)	2	1
Lifetime deductible only	(³)	(³)	-	(³)	-	(³)	-	(³)	(³)	(³)
Both yearly and lifetime deductible	-	-	-	-	-	-	-	-	-	-
No deductible	26	24	31	24	33	24	30	24	39	23
Not determinable	7	6	9	8	8	7	6	8	17	5
Average employee yearly deductible	\$47	\$48	\$45	\$41	\$45	\$48	\$46	\$47	\$42	\$47

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 32. Dental care benefits: Relationship of yearly family deductibles to yearly individual deductibles, all private industry workers, National Compensation Survey, 2003

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	50	55	41	53	46	52	47	52	30	55
Family deductible is										
2 times individual deductible	12	13	11	15	14	12	10	14	11	13
3 times individual deductible	37	40	30	37	32	38	36	37	19	41
Other	1	2	(²)	1	(²)	2	(²)	2	(²)	2
No deductible or no family deductible	41	38	47	38	46	39	44	39	51	39
Not determinable	7	6	9	8	8	7	6	8	17	5

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

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 33. Dental care benefits: Maximum benefit provision,¹ all private industry workers, National Compensation Survey, 2003

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	89	90	80	92	87	88	89	88	89
Less than \$1,000	5	4	7	3	6	5	5	5	7	5
\$1,000	38	34	44	44	46	35	42	36	31	40
\$1,001–\$1,499	7	8	6	5	6	8	5	8	12	6
\$1,500	25	28	21	22	22	26	22	27	23	26
Greater than \$1,500	13	15	11	5	11	14	15	12	15	13
Unspecified	-	-	-	-	-	-	-	-	-	-
No yearly maximum	8	8	6	14	6	9	8	8	7	8
Maximum provision not determinable	4	3	4	6	3	4	4	4	5	3
Average yearly maximum	\$1,304	\$1,346	\$1,248	\$1,210	\$1,246	\$1,329	\$1,312	\$1,300	\$1,327	\$1,299

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.

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. Orthodontia care benefits: Maximum benefit provision,¹ all private industry workers, National Compensation Survey, 2003

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	85	86	83	78	89	83	80	87	89	84
Less than \$1,000	5	6	2	6	2	6	7	4	3	6
\$1,000	34	34	33	37	33	34	36	32	24	36
\$1,001–\$1,499	6	6	5	3	4	7	7	5	8	5
\$1,500	27	29	25	25	29	27	20	31	29	27
Greater than \$1,500	13	11	17	7	20	10	10	14	23	10
Dollar amount unspecified	1	(²)	1	-	1	(²)	(²)	1	2	(²)
No lifetime maximum	14	13	16	18	11	16	19	12	11	15
Not determinable	1	1	(²)	4	1	1	1	1	(²)	1
Average lifetime maximum ³	\$1,331	\$1,295	\$1,419	\$1,257	\$1,448	\$1,282	\$1,328	\$1,332	\$1,522	\$1,278

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 35. Orthodontia care benefits: Percent of participants in plans with orthodontic benefits by type of individuals covered, all private industry workers, National Compensation Survey, 2003

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	55	52	61	58	60	53	58	54	55	55
Employee and dependents	40	44	33	40	35	42	35	43	40	40
Not determinable	5	4	6	2	5	5	8	3	4	5

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. Vision care benefits: Coverage for selected procedures, all private industry workers, National Compensation Survey, 2003

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	100	100	100	99	100	99	100	99	99	100
In full	22	20	26	21	24	21	18	24	29	20
Scheduled cash allowance	24	21	28	24	25	23	23	24	33	21
Subject to copayment	54	57	48	50	50	55	59	51	41	58
Retail discount	3	3	3	3	2	4	4	3	1	4
Other ²	5	4	7	5	8	4	5	5	9	3
Not covered	(³)	(³)	(³)	-	-	(³)	-	(³)	(³)	(³)
Not determinable	(³)	(³)	-	1	-	(³)	-	(³)	(³)	(³)
Glasses										
Total	100	100	100	100	100	100	100	100	100	100
Covered ¹	100	99	100	100	100	100	100	99	100	100
In full	11	9	17	5	15	9	14	10	16	10
Scheduled cash allowance	46	46	49	39	48	45	46	46	55	43
Subject to copayment	35	41	25	32	25	39	37	34	24	38
Retail discount	17	16	15	26	15	18	13	19	11	19
Other ²	5	3	10	3	11	3	4	6	10	4
Not covered	(³)	1	-	-	-	(³)	-	1	-	(³)
Not determinable	-	-	-	-	-	-	-	-	-	-
Contacts⁴										
Total	100	100	100	100	100	100	100	100	100	100
Covered ¹	97	96	98	96	97	97	98	96	98	97
In full	6	6	7	3	7	5	6	6	5	6
Scheduled cash allowance	63	66	64	46	63	63	67	62	70	61
Subject to copayment	27	32	20	19	20	29	29	25	19	29
Retail discount	15	14	11	32	12	16	7	19	9	17
Other ²	6	4	10	3	11	4	4	7	10	4
Not covered	2	2	1	4	1	2	1	2	1	2
Not determinable	1	2	1	(³)	2	1	1	2	1	1

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 retirement 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 remaining until they reach 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 (the so-called actuarial reduction).

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 usually will 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 worker retains the accrued

benefit even if he or she 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 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 usually are not required to make any contributions. Employers also may make profit-sharing contributions to these plans at their discretion.

Employee stock ownership plan (ESOP). The employer pays a designated amount, often borrowed, into a fund that 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 account (IRA). 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 SEP and SIMP definitions for more details.)

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

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 either be IRAs established for each employee or be 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.

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.

Hardship withdrawals. Employees usually are not penalized when money is withdrawn as a result of a hardship, often defined as a death or illness of a family member, education 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 often are 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) always are 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 it 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 percentage. 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. 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 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 is invested 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.

Internal Revenue Code (IRC) Section 401(k) 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.

Automatic enrollment. Employees are automatically enrolled in an employer's retirement plan upon eligibility but have the right to opt out at any time. In the case of defined contribution plans, a default contribution is usually set, but employees may choose to contribute a different percentage.

Table 37. Defined benefit plans: Summary of plan provisions, all private industry workers, National Compensation Survey, 2003

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	52	58	43	57	46	55	32	59	37	60
Benefits with integrated formula	23	28	14	33	19	25	12	27	10	30
Benefits subject to a maximum	20	20	16	34	15	21	15	21	13	23
Early retirement benefits available	84	78	91	95	93	80	76	86	93	79
Disability retirement benefits available ..	74	69	80	89	88	67	72	74	85	68

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

Table 38. Defined benefit plans: Eligibility requirements, all private industry workers, National Compensation Survey, 2003

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	94	96	91	98	87	98	95	94	90	97
With minimum age or service requirements	79	83	71	90	61	88	80	79	73	83
Service requirement only	29	26	32	30	35	26	29	28	28	29
Less than 1 year	6	5	7	6	8	5	2	7	8	5
1 year	22	21	24	24	26	20	27	21	20	23
Greater than 1 year	(¹)	(¹)	1	-	1	(¹)	-	(¹)	1	(¹)
Age 21	47	53	37	57	26	58	44	49	43	50
No service requirement	5	6	3	1	3	5	8	3	4	5
Less than 1 year	3	3	3	4	2	4	5	2	4	2
1 year	38	44	28	52	21	47	30	41	31	42
Greater than 1 year	1	(¹)	4	-	-	2	-	2	4	-
Other than age 21	3	4	2	3	(¹)	5	7	2	1	4
No service requirement	(¹)	1	(¹)	-	-	1	1	(¹)	-	1
Less than 1 year	(¹)	(¹)	(¹)	-	-	1	(¹)	(¹)	(¹)	(¹)
1 year	3	3	1	3	(¹)	4	6	1	1	3
No minimum age or service requirement	15	13	20	8	26	10	15	15	17	14
Plan participation not available to new employees	1	1	1	-	2	(¹)	-	1	-	1
Not determinable	5	3	8	2	11	2	5	5	10	2
Average service requirement (in months)	11	11	12	11	11	11	11	11	12	11

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 39. Defined benefit plans: Plan sponsor, all private industry workers, National Compensation Survey, 2003

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	86	96	70	88	75	92	69	92	66	97
Multiemployer group	14	4	30	12	25	8	31	8	34	3

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. Defined benefit plans: Primary formula, all private industry workers, National Compensation Survey, 2003

Characteristics	Traditional				Cash balance	Pension equity	
	Total	Percent of terminal earnings	Percent of career earnings	Dollar amount formula			Percent of contribution formula
All workers	77	43	10	17	8	21	2
Worker characteristics							
White collar	69	47	11	8	2	30	2
Blue collar	89	35	8	30	16	9	2
Service	87	49	8	19	11	12	1
Full time	77	43	9	17	8	21	2
Part time	79	35	22	14	9	21	(¹)
Union	92	25	12	34	21	8	(¹)
Nonunion	69	52	9	8	1	29	3
Average wage less than \$15 per hour ...	79	40	10	19	10	19	2
Average wage \$15 per hour or higher ...	76	44	10	16	7	22	2
Establishment characteristics							
Goods producing	91	40	6	33	12	8	1
Service producing	70	44	11	9	6	28	2
1 to 99 workers	73	27	6	25	15	24	3
100 workers or more	78	48	11	14	5	20	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 41. Defined benefit plans: Integration with Social Security, all private industry workers, National Compensation Survey, 2003

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	23	28	14	33	19	25	12	27	10	30
Step-rate excess ¹	16	19	9	30	9	19	11	18	8	20
Social Security breakpoint	16	19	8	30	7	19	11	17	8	20
Dollar amount breakpoint	(²)	(²)	1	-	1	-	-	1	-	1
Offset by Social Security ³	8	9	6	3	10	7	2	9	2	11
Without integrated formula	77	72	86	67	81	75	88	73	90	70
Not covered under Social Security	(²)	(²)	(²)	-	-	(²)	(²)	(²)	(²)	(²)

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 42. Defined benefit plans: Terminal earnings formulas, all private industry workers, National Compensation Survey, 2003

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	48	47	55	64	41	40	49	54	46
Less than 1.00 percent	7	7	8	9	6	1	8	-	9
1.00–1.24 percent	5	4	7	10	3	6	5	1	6
1.25–1.49 percent	(¹)	(¹)	1	1	(¹)	-	(¹)	(¹)	(¹)
1.50–1.74 percent	21	22	20	26	19	11	23	24	21
1.75–1.99 percent	10	8	17	17	8	10	11	24	7
2.00–2.24 percent	3	3	2	2	3	9	1	3	3
2.25 percent or greater	1	2	-	-	1	3	1	2	1
Percent per year varies	40	42	31	23	48	43	40	31	43
By service	7	7	8	5	8	2	8	8	7
By earnings	20	19	14	8	25	20	20	20	20
By age	1	1	-	3	-	-	1	-	1
By earnings and service	12	15	9	7	15	21	11	3	15
Other	12	11	14	13	12	16	11	14	11
Average flat percent per year of service	1.53	1.55	1.49	1.46	1.57	1.77	1.49	1.79	1.45

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: Definitions of terminal earnings, all private industry workers, National Compensation Survey, 2003

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
One year	1	1	(¹)	-	1	-	1	1	1
Three years	6	5	9	15	3	(¹)	8	2	8
Last 3	1	1	-	-	1	-	1	(¹)	1
High 3	2	(¹)	4	5	(¹)	(¹)	2	(¹)	2
Of career	2	(¹)	4	5	(¹)	(¹)	2	(¹)	2
High consecutive 3	4	4	5	11	1	-	5	1	5
Of last 10	2	1	3	3	1	-	2	1	2
Of career	2	3	1	7	-	-	3	(¹)	3
Five years	85	89	76	73	90	75	86	74	87
Last 5	1	1	2	3	1	2	1	-	2
High 5	24	26	19	19	26	16	25	10	27
Of last 10	19	21	14	17	19	10	20	10	21
Of career	5	5	5	1	6	6	4	-	6
Of other time period	(¹)	(¹)	(¹)	-	(¹)	-	(¹)	-	(¹)
High consecutive 5	60	62	55	52	63	58	60	64	58
Of last 10	46	48	44	45	47	42	47	53	45
Of career	13	14	11	7	16	15	13	11	14
Of other time period	(¹)	(¹)	-	-	(¹)	1	(¹)	-	(¹)
Other period	5	3	9	6	5	10	5	14	3
Not determinable	3	1	6	5	2	15	1	10	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 44. Defined benefit plans: Dollar amount formulas, all private industry workers, National Compensation Survey, 2003

Dollar amount formula	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 monthly amount per year of service	78	83	78	79	74	62	87	79	73
Less than \$20.00	10	3	14	16	1	3	15	8	16
\$20.00–\$24.99	6	5	8	10	-	-	10	9	(¹)
\$25.00–\$29.99	7	7	7	7	8	8	7	10	-
\$30.00–\$34.99	3	1	4	4	-	-	4	3	1
\$35.00–\$39.99	9	15	5	2	22	17	5	4	21
\$40.00–\$44.99	11	21	8	10	12	11	11	9	15
\$45.00–\$49.99	13	14	14	21	-	(¹)	21	17	5
\$50.00–\$54.99	10	11	10	(¹)	27	9	11	14	1
\$55.00–\$59.99	5	7	5	5	5	9	2	2	12
\$60.00 or more	2	(¹)	3	3	(¹)	5	(¹)	2	1
Dollar amount varies	22	17	22	21	26	38	13	21	27
By service	20	12	20	17	26	38	9	21	18
By earnings	3	5	2	4	-	-	4	(¹)	8
Average flat dollar amount per year of service	\$38.47	\$40.47	\$37.63	\$36.23	\$42.53	\$46.38	\$35.18	\$38.60	\$38.13

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: Maximum benefit provisions, all private industry workers, National Compensation Survey, 2003

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	20	16	34	15	21	15	21	13	23
Less than 30	6	7	4	8	3	7	6	6	4	7
30	3	4	2	10	3	4	4	3	3	3
31-34	(¹)	1	(¹)	-	-	1	-	1	(¹)	1
35	8	7	7	13	7	8	4	9	4	10
36-39	-	-	-	-	-	-	-	-	-	-
40	2	2	1	3	1	2	1	2	1	2
Greater than 40	1	(¹)	1	-	1	(¹)	(¹)	1	1	1
Not subject to maximum	69	67	76	54	76	66	77	67	77	66
Not determinable	11	13	8	12	8	13	8	12	11	11
Average credited service maximum	31.2	30.8	32.1	30.9	32.1	30.9	28.6	31.8	30.2	31.5

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 46. Defined benefit plans: Selected age and service requirements for normal retirement,¹ all private industry workers, National Compensation Survey, 2003

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	6	9	3	1	2	8	10	5	4	7
Less than 30 years of service	5	8	1	1	1	7	8	4	(²)	7
30 years of service	1	1	2	-	1	2	2	1	4	(²)
Age 55	1	1	1	2	1	1	1	1	1	1
Less than 30 years of service	(²)	1	(²)	1	(²)	1	(²)	(²)	(²)	1
30 years of service	1	1	1	1	1	1	1	(²)	1	(²)
Age 60 ³	7	7	5	7	3	8	5	7	9	5
No service requirement	1	1	2	-	2	1	2	1	1	1
5 years of service	3	4	2	-	1	5	3	3	6	2
10 years of service	2	1	2	6	-	2	(²)	2	3	1
Age 62 ³	9	6	13	20	11	8	23	5	15	6
No service requirement	2	2	3	7	4	2	2	2	3	2
5 years of service	3	2	4	3	3	3	8	1	3	3
10 years of service	2	1	4	-	4	1	5	1	4	1
Age 65 ³	73	76	68	71	75	71	61	77	59	80
No service requirement	28	33	19	37	18	32	25	29	13	35
5 years of service	35	36	35	34	39	34	33	36	32	37
10 years of service	2	1	3	-	1	2	3	2	2	1
Sum of age plus service ⁴	5	4	8	-	9	4	-	7	8	4
Equals less than 80	2	3	-	-	-	2	-	2	(²)	2
Equals 80	3	1	6	-	8	(²)	-	3	8	(²)
Equals more than 80	1	1	2	-	1	1	-	1	1	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 47. Defined benefit plans: Availability of lump-sum benefits at retirement, all private industry workers, National Compensation Survey, 2003

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	48	59	31	43	29	57	48	48	31	57
Full lump sum available	40	49	26	35	24	48	41	40	23	49
Partial lump sum with reduced annuity	7	9	5	7	5	8	8	7	7	7
Other	1	1	1	1	1	1	-	1	1	1
No lump sum available	41	32	55	54	51	37	49	39	53	35
Not determinable	10	9	14	3	20	6	3	13	16	8

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: Selected age and service requirements for early retirement,¹ all private industry workers, National Compensation Survey, 2003

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	84	78	91	95	93	80	76	86	93	79
No age requirement	1	1	(²)	-	1	1	-	1	(²)	1
Less than 30 years of service	(²)	1	-	-	-	1	-	1	-	1
30 years of service	(²)	(²)	(²)	-	1	-	-	(²)	(²)	(²)
Less than age 55	8	7	10	7	11	6	12	7	14	5
5 years of service	(²)	(²)	-	-	-	(²)	1	-	-	(²)
10 years of service	3	1	5	-	6	1	5	2	5	1
15 years of service	1	2	(²)	-	2	1	-	2	(²)	2
20 years of service	1	1	2	6	2	1	3	1	3	1
25 years of service	2	2	2	2	-	3	3	1	4	1
Age 55	68	68	66	86	67	69	53	73	65	70
No service requirement ³	3	3	2	14	1	4	6	2	1	4
5 years of service	23	26	16	36	15	27	13	26	20	25
10 years of service	35	31	42	23	45	29	32	35	38	33
15 years of service	5	5	5	12	5	6	(²)	7	5	6
20 years of service	2	2	2	(²)	1	3	2	2	1	3
25 years of service	(²)	(²)	(²)	-	-	(²)	(²)	-	-	(²)
Age 60	2	1	4	(²)	4	2	3	2	4	1
5 years of service	1	1	2	-	3	(²)	-	1	2	1
10 years of service	1	(²)	2	-	-	1	3	-	2	(²)
15 years of service	(²)	(²)	(²)	-	1	(²)	1	(²)	1	(²)
Age 62	1	-	2	-	2	-	1	1	1	1
Sum of age plus service ⁴	3	2	7	1	6	2	3	4	7	2
Equals less than 80	1	1	1	1	3	(²)	-	1	(²)	2
Equals 80	2	(²)	4	-	1	2	-	2	5	-
Equals more than 80	1	(²)	2	-	2	-	3	-	2	(²)
Early retirement not available	14	19	7	3	4	18	23	10	6	18
Not determinable	3	3	2	2	3	2	1	3	1	3

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 49. Traditional defined benefit plans: Selected age and service requirements for early retirement,¹ all private industry workers, National Compensation Survey, 2003

Age or service requirement	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 early retirement available	98	99	98	97	99	96	99	98	98
No age requirement	(²)	(²)	(²)	(²)	-	-	(²)	(²)	-
Less than 30 years of service	-	-	-	-	-	-	-	-	-
30 years of service	(²)	(²)	(²)	(²)	-	-	(²)	(²)	-
Less than age 55	10	9	11	13	9	16	9	16	7
5 years of service	(²)	1	-	-	(²)	1	-	-	(²)
10 years of service	3	2	6	6	2	6	3	6	2
15 years of service	1	3	(²)	2	1	-	2	(²)	2
20 years of service	2	1	2	3	1	4	1	3	1
25 years of service	2	3	2	-	4	4	2	4	1
Age 55	79	85	70	70	84	65	83	68	87
No service requirement ³	3	3	1	1	4	8	1	1	4
5 years of service	27	35	17	16	34	17	30	20	32
10 years of service	39	37	45	47	35	37	40	40	39
15 years of service	7	7	5	5	7	(²)	9	5	8
20 years of service	3	3	2	1	4	2	3	1	4
25 years of service	(²)	(²)	(²)	-	(²)	1	-	-	(²)
Age 60	3	2	3	3	2	5	2	4	2
5 years of service	1	1	1	3	(²)	-	1	1	1
10 years of service	1	(²)	2	-	1	4	-	2	(²)
15 years of service	1	1	1	1	1	1	(²)	1	(²)
Age 62	1	-	2	2	-	1	1	1	1
Sum of age plus service ⁴	4	2	8	7	3	4	5	7	3
Equals less than 80	1	2	1	3	(²)	-	2	(²)	2
Equals 80	2	(²)	5	1	3	-	3	5	-
Equals more than 80	1	(²)	2	2	-	4	-	2	(²)
Early retirement not available	1	1	1	2	(²)	3	1	1	1
Not determinable	1	(²)	1	(²)	1	2	(²)	1	(²)

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 50. Defined benefit plans: Early retirement reductions,¹ all private industry workers, National Compensation Survey, 2003

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	40	35	48	28	53	33	54	36	46	37
Reduction varies by age ³ or service	34	35	33	31	30	36	19	38	35	33
Actuarial reduction	18	22	13	18	12	21	13	19	13	21
Other reduction ⁴	1	2	-	-	-	1	(⁵)	1	-	2
Not determinable	7	6	6	23	5	8	14	5	7	7

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 51. Traditional defined benefit plans: Early retirement reductions,¹ all private industry workers, National Compensation Survey, 2003

Early retirement reduction	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
Uniform percentage of reduction ²	42	38	48	52	35	58	37	46	39
Reduction varies by age ³ or service	37	39	35	32	40	21	41	35	38
Actuarial reduction	15	18	12	12	17	7	18	12	17
Other reduction ⁴	1	2	-	-	2	(⁵)	1	-	2
Not determinable	5	3	5	4	6	14	3	7	4

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 52. Defined benefit plans: Initiation of disability retirement benefits, all private industry workers, National Compensation Survey, 2003

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	74	69	80	89	88	67	72	74	85	68
Benefits begin:										
Immediately ¹	47	40	59	49	65	39	55	45	64	38
Deferred	23	25	18	27	19	24	14	26	16	26
Not determinable	4	4	3	12	4	4	3	4	5	3
Disability coverage not available	15	17	13	4	5	20	20	13	10	18
Not determinable	11	14	8	7	7	13	8	12	5	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 53. Defined benefit plans: Postretirement survivor benefits, all private industry workers, National Compensation Survey, 2003

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	99	99	100	93	99	99	100	99	99	99
Joint-and-survivor annuity ¹	95	97	93	92	90	98	100	94	92	97
50 percent only	26	20	33	30	20	28	34	23	35	20
51–99 percent only	4	3	6	1	7	2	-	5	6	2
100 percent only	1	2	1	-	1	2	3	1	(²)	2
Retiree choice of percentages	63	71	52	57	62	64	61	64	49	71
Not determinable	2	2	1	3	(²)	2	2	1	2	2
Percent of accrued benefit	4	2	7	1	9	1	-	5	6	2
No postretirement survivor benefits	1	1	(²)	7	1	1	(²)	1	1	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 54. Defined benefit plans: Preretirement survivor benefits, all private industry workers, National Compensation Survey, 2003

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	96	95	97	97	97	96	96	96	98	95
Equivalent to joint-and-survivor annuity ²	82	79	88	85	89	79	76	84	91	77
50 percent of employee's pension	59	56	63	69	62	58	54	61	72	53
Other percent of employee's pension ³	3	2	3	2	3	2	2	3	1	3
Employee choice of percent	19	19	19	14	20	18	20	18	16	20
Percent of accrued benefit	12	15	8	5	7	15	19	10	5	16
Other ⁴	1	1	1	7	1	2	1	2	2	1
No preretirement survivor benefits	2	3	1	(⁵)	2	2	2	2	1	3
Not determinable	2	2	2	3	1	2	2	2	1	2

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 55. Defined benefit plans: Vesting requirements, all private industry workers, National Compensation Survey, 2003

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	5	4	6	2	9	3	(¹)	6	8	3
Cliff vesting ²	81	85	74	89	67	88	82	81	75	85
With full vesting:										
At any age ³	81	84	74	89	65	88	82	80	75	84
Less than 5 years	1	1	1	4	1	1	(¹)	1	1	1
5 years	77	81	70	83	65	83	76	77	66	83
10 years	1	1	2	(¹)	-	2	5	(¹)	3	(¹)
Other	1	1	(¹)	-	1	(¹)	-	1	-	1
Graded vesting ⁴	9	6	14	3	16	5	14	7	13	6
Not determinable	5	5	6	7	9	4	4	6	4	6

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 Includes other service requirements not shown separately.

⁴ 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 56. Defined benefit plans: Provisions for early receipt of deferred vested benefits, all private industry workers, National Compensation Survey, 2003

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	17	24	8	13	8	22	23	16	8	23
Early retirement	66	60	75	76	71	64	59	69	72	63
Reduction same as early retirement ..	52	46	61	65	59	49	41	56	58	49
Reduction not the same as early retirement	7	7	8	2	6	7	10	6	9	6
Not determinable	7	7	6	9	6	8	8	7	5	8
Normal retirement	12	12	13	9	16	11	13	12	17	10
Not determinable	4	4	4	2	5	3	6	3	3	4

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. Traditional defined benefit plans: Provisions for early receipt of deferred vested benefits, all private industry workers, National Compensation Survey, 2003

Early retirement 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
Immediate	3	3	2	3	3	6	2	3	2
Early retirement	79	77	81	76	81	74	81	76	81
Reduction same as early retirement ..	65	62	67	63	66	55	67	61	67
Reduction not the same as early retirement	9	10	9	7	10	13	8	10	8
Not determinable	6	5	5	7	5	5	6	5	6
Normal retirement	14	15	14	17	12	12	14	17	12
Not determinable	4	6	3	4	4	8	3	3	5

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. Cash balance plans: Percentage basis of employer and interest rate contributions, all private industry workers, National Compensation Survey, 2003

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	13	12	10	-	17	13
Percent based on ¹	87	87	89	100	81	87
Social Security wage base	8	7	7	-	11	8
Age	62	65	64	71	59	63
Service	58	61	59	52	61	62
Earnings	24	23	23	5	31	25
Not determinable	1	1	1	-	1	1
Interest rate contribution						
Total	100	100	100	100	100	100
U.S. Government securities	61	62	58	42	68	66
Flat percent	21	18	23	45	12	15
Schedule of percents	2	3	3	-	3	3
Other	4	3	4	4	3	3
Not determinable	12	13	13	9	14	13
Average flat percent	4.6	5.0	5.2	-	4.6	4.9

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 59. Defined contribution plans: Participation in types of plans with employer contributions, all private industry workers, National Compensation Survey, 2003

Characteristics	Savings and thrift	Deferred profit sharing	Employee stock ownership	Money purchase pension	Stock bonus	Simplified employee pension	Savings incentive match plan	Other	Salary reduction with employer contributions
All workers	70	21	5	11	(¹)	2	4	1	86
Worker characteristics									
White collar	69	21	6	12	(¹)	3	4	1	86
Blue collar	69	26	3	8	(¹)	2	3	2	86
Service	74	15	3	11	-	1	4	1	82
Full time	70	22	5	11	(¹)	2	4	1	87
Part time	65	17	6	12	(¹)	3	6	(¹)	78
Union	70	12	2	21	-	-	(¹)	1	78
Nonunion	70	23	5	10	(¹)	3	5	1	87
Average wage less than \$15 per hour ...	70	22	6	9	(¹)	1	5	1	85
Average wage \$15 per hour or higher ...	70	21	4	12	(¹)	3	3	1	86
Establishment characteristics									
Goods producing	71	25	3	9	(¹)	1	2	2	90
Service producing	69	20	6	12	(¹)	3	5	1	84
1 to 99 workers	60	25	3	8	-	5	10	1	78
100 workers or more	76	19	6	13	(¹)	(¹)	(¹)	2	91

¹ Less than 0.5 percent.

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

Table 60. Savings and thrift plans: Summary of provisions, all private industry workers, National Compensation Survey, 2003

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	5	5	6	1	7	3	2	6	3	5
Pretax contributions allowed	97	98	96	98	97	98	97	98	95	98
Transfer/rollover contributions allowed ..	79	80	76	77	74	81	83	77	71	80
Employee choice of investments for employee contributions	86	88	81	80	80	88	81	88	79	86
Employee choice of investments for employer contributions	72	75	69	68	65	75	69	74	65	73
Immediate full vesting	21	21	22	12	20	21	19	22	18	21

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

Table 61. Savings and thrift plans: Plan sponsor, all private industry workers, National Compensation Survey, 2003

Characteristics	Total	Single employer	Multiemployer group	Employer association
All workers	100	99	1	(¹)
Worker characteristics				
White collar	100	99	(¹)	(¹)
Blue collar	100	96	4	-
Service	100	100	(¹)	-
Union	100	92	8	-
Nonunion	100	99	(¹)	(¹)
Establishment characteristics				
Goods producing	100	96	4	-
Service producing	100	99	(¹)	(¹)
1 to 99 workers	100	99	(¹)	1
100 workers or more	100	98	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 62. Savings and thrift plans: Transfer and rollover provisions,¹ all private industry workers, National Compensation Survey, 2003

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	79	80	76	77	74	81	83	77	71	80
Transfers/rollovers not allowed	3	2	4	5	4	3	4	3	2	3
Not determinable	18	18	20	17	22	17	14	21	27	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 63. Savings and thrift plans: Maximum employee contributions,¹ all private industry workers, National Compensation Survey, 2003

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	59	57	63	66	60	59	52	63	70	58	60	59
Less than 10 percent	1	1	1	4	1	1	-	2	(²)	1	1	1
10 percent	2	2	2	(²)	2	2	2	2	2	2	2	2
11 percent	(²)	(²)	-	-	-	(²)	1	-	-	(²)	(²)	(²)
12 percent	1	1	2	1	2	1	1	1	(²)	2	2	1
13-14 percent	1	1	(²)	-	1	(²)	(²)	1	(²)	1	1	1
15 percent	25	24	25	32	23	26	28	24	20	26	25	25
16 percent	6	6	7	1	8	5	4	7	13	5	3	8
17 percent	2	1	3	3	4	1	1	2	(²)	2	2	2
18 percent	2	3	2	1	3	2	(²)	3	3	2	3	2
19 percent	(²)	(²)	1	-	-	1	1	(²)	3	(²)	(²)	1
20 percent	7	6	9	10	9	6	2	10	12	6	9	6
Greater than 20 percent	11	11	11	14	6	13	11	12	17	11	13	11
Specified dollar amount	1	1	1	(²)	2	(²)	(²)	1	2	1	1	1
Up to Internal Revenue Code limit	39	41	37	31	38	39	47	34	26	40	39	39
Not determinable	1	1	(²)	2	1	1	(²)	1	2	1	1	1
Average ³ maximum contribution (percent of earnings)	17.2	17.2	17.4	16.9	16.8	17.3	17.1	17.3	18.7	17.0	17.4	17.0

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 64. Savings and thrift plans: Method of determining employee pretax contribution, all private industry workers, National Compensation Survey, 2003

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	97	98	96	98	97	98	97	98	95	98
All contributions must be pretax	58	57	58	61	62	56	67	53	48	59
At option of employee, all contributions	37	39	34	30	31	39	27	42	45	36
At option of employee, up to specified amount	2	1	4	(¹)	3	1	1	2	2	2
Initial contributions must be pretax; additional contributions cannot be pretax	(¹)	1	(¹)	-	(¹)	(¹)	(¹)	(¹)	-	(¹)
Pretax allowed, options unknown ..	1	(¹)	(¹)	6	(¹)	1	2	(¹)	-	1
No pretax contributions allowed	(¹)	(¹)	(¹)	-	-	(¹)	1	(¹)	-	(¹)
Not determinable	2	2	4	2	3	2	3	2	5	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 65. Savings and thrift plans: Maximum pretax employee contributions,¹ all private industry workers, National Compensation Survey, 2003

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	61	59	63	66	60	61	52	65	73	59
Less than 10 percent	2	1	1	4	1	2	(²)	2	1	2
10 percent	2	3	2	1	2	2	2	2	2	2
12 percent	1	1	2	1	3	1	1	1	(²)	1
13-14 percent	1	1	(²)	-	1	(²)	(²)	1	(²)	1
15 percent	25	25	26	29	24	26	28	24	18	26
16 percent	6	6	7	1	8	5	4	7	13	5
17 percent	1	1	1	2	3	1	1	2	-	1
18 percent	2	2	2	1	2	2	(²)	3	3	2
Greater than 18 percent	19	17	21	24	16	20	14	21	34	17
Amount not determinable	1	1	(²)	2	1	1	(²)	1	2	1
Specified dollar amount	1	1	1	(²)	2	(²)	(²)	1	2	1
Up to Internal Revenue Code limit	38	40	36	27	38	38	45	34	25	39
Option unknown	1	(²)	(²)	6	(²)	1	2	(²)	-	1
Average ³ maximum pretax contribution (percent of earnings)	17.0	17.0	17.1	16.9	16.6	17.2	17.1	17.0	18.7	16.8

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 66. Savings and thrift plans: Method of employer matching contributions, all private industry workers, National Compensation Survey, 2003

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	11	2	13	4
Worker characteristics							
White collar	100	69	3	10	1	13	4
Blue collar	100	67	3	13	2	12	4
Service	100	57	3	11	7	21	(²)
Union	100	64	5	5	1	14	11
Nonunion	100	68	3	11	2	13	3
Establishment characteristics							
Goods producing	100	62	3	11	3	14	7
Service producing	100	69	3	10	2	13	3
1 to 99 workers	100	63	3	14	3	15	2
100 workers or more	100	70	3	9	1	12	5

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 67. Savings and thrift plans: Employee contributions by employer specified matching percentage, all private industry workers, National Compensation Survey, 2003

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)	2	(¹)	1	1	1	(¹)	-	1
2 percent	5	4	8	12	8	5	5	6	7	5
3 percent	11	10	13	23	9	12	15	9	8	12
4 percent	18	18	19	14	15	19	19	17	14	18
5 percent	14	17	8	7	9	15	7	17	3	15
6 percent	41	42	40	36	42	41	39	42	62	39
Greater than 6 percent	9	8	11	4	17	6	11	7	6	9
1-49 percent employer match										
Total employee contribution ...	18	16	25	6	27	15	23	15	16	18
Less than 2 percent	(¹)	(¹)	-	(¹)	-	(¹)	-	(¹)	-	(¹)
2 percent	(¹)	(¹)	1	(¹)	1	(¹)	-	1	-	1
3 percent	1	1	(¹)	1	1	(¹)	1	(¹)	(¹)	1
4 percent	3	3	5	1	2	3	5	2	2	3
5 percent	2	2	3	1	5	2	2	2	-	3
6 percent	9	8	14	3	18	6	10	9	12	9
Greater than 6 percent	2	2	3	(¹)	1	3	5	1	2	2
50 percent employer match										
Total employee contribution ...	35	35	31	39	43	32	37	34	33	35
2 percent	2	1	5	4	6	1	2	2	7	2
3 percent	3	3	3	2	5	2	5	2	1	3
4 percent	7	8	6	7	5	8	9	6	2	8
5 percent	2	2	2	4	(¹)	3	2	3	(¹)	3
6 percent	16	18	11	19	17	16	13	18	22	16
Greater than 6 percent	4	4	4	3	10	2	6	3	1	4
51-99 percent employer match										
Total employee contribution ...	11	10	16	(¹)	7	12	11	10	32	8
3 percent	1	(¹)	2	(¹)	-	1	2	(¹)	(¹)	1
4 percent	1	(¹)	1	(¹)	2	(¹)	-	1	3	(¹)
5 percent	2	2	1	-	-	2	(¹)	3	2	2
6 percent	6	5	10	-	2	7	9	5	25	4
Greater than 6 percent	1	1	2	-	2	1	-	2	2	1
100 percent employer match										
Total employee contribution ...	36	37	27	51	23	40	27	40	19	38
Less than 2 percent	1	(¹)	2	-	1	1	1	(¹)	-	1
2 percent	3	2	2	8	1	3	3	3	1	3
3 percent	7	6	7	20	3	9	8	7	6	7
4 percent	7	7	8	6	6	7	5	8	8	7
5 percent	7	10	1	2	4	8	3	9	(¹)	8
6 percent	9	10	5	14	4	11	7	10	3	10
Greater than 6 percent	1	1	1	1	3	(¹)	-	2	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 68. Savings and thrift plans: Investment choices, all private industry workers, National Compensation Survey, 2003

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 ..	86	88	81	80	80	88	81	88	79	86
Company stock	29	32	24	20	20	32	17	35	38	27
Other common stock fund	46	49	43	31	37	49	32	54	54	45
Fixed interest securities or investments	44	46	42	38	37	47	31	52	57	43
Diversified investments	48	49	46	46	40	51	37	54	51	48
Other ²	15	16	14	9	8	17	13	16	17	14
Not determinable	3	3	2	-	5	2	3	2	4	2
No choice of investment	2	2	2	4	2	2	4	1	-	2
Not determinable	13	10	17	16	19	10	15	11	21	11
Employer contributions										
Total	100	100	100	100	100	100	100	100	100	100
Total with investment choice allowed ¹ ..	72	75	69	68	65	75	69	74	65	73
Company stock	21	23	19	19	17	23	12	27	25	21
Other common stock fund	37	39	34	31	30	40	25	44	40	37
Fixed interest securities or investments	36	38	35	30	31	38	24	43	43	35
Diversified investments	40	40	37	42	34	42	31	45	37	40
Other ²	9	9	10	3	7	9	6	10	8	9
Not determinable	2	2	2	-	2	2	(³)	2	4	1
No choice of investment	11	12	10	9	9	12	10	11	13	11
Not determinable	17	14	21	23	26	13	20	15	22	16

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 69. Savings and thrift plans: Eligibility requirements, all private industry workers, National Compensation Survey, 2003

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	80	79	80	93	70	84	88	76	72	81
Service requirement only	31	34	28	17	25	33	31	31	35	30
3 months or less	10	10	12	2	12	9	10	10	6	10
6 months	4	5	2	5	1	5	6	3	2	4
1 year	16	18	13	10	12	18	16	17	26	15
Greater than 1 year	1	1	(¹)	(¹)	-	1	-	1	(¹)	1
Age 21	39	36	36	68	28	43	46	35	28	40
No service requirement	2	3	1	2	(¹)	3	3	2	(¹)	2
1-11 months	9	7	10	20	10	9	10	9	13	9
1 year	28	26	25	46	18	31	34	24	15	29
Greater than 1 year	(¹)	(¹)	-	(¹)	-	(¹)	-	(¹)	(¹)	(¹)
Other than age 21	10	8	17	8	18	8	11	10	8	11
No service requirement	1	1	(¹)	(¹)	(¹)	1	1	1	(¹)	1
1-11 months	4	3	6	(¹)	6	3	4	4	4	4
1 year	5	3	10	7	11	3	6	5	4	6
No minimum age or service requirement	15	17	14	5	20	13	9	18	16	15
Not determinable	5	4	7	2	9	3	2	6	12	4
Average service requirement (in months)	9.1	9.1	8.7	9.6	8.3	9.3	9.1	9.0	9.1	9.1

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 70. Savings and thrift plans: Automatic enrollment requirements, all private industry workers, National Compensation Survey, 2003

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
Default method based on percentage	4	4	5	1	7	3	1	5	3	4
0.01–1.99	(¹)	(¹)	(¹)	(¹)	-	(¹)	-	(¹)	1	(¹)
2.00–2.99	1	1	2	(¹)	3	(¹)	(¹)	1	-	1
3.00–3.99	2	2	2	(¹)	3	2	1	3	2	2
4.00 or greater	(¹)	1	(¹)	(¹)	1	(¹)	(¹)	1	-	(¹)
Method not determinable	1	1	1	-	1	1	1	1	(¹)	1
Not required	91	92	87	91	85	93	94	89	85	91
Not determinable	5	3	7	8	8	4	4	5	12	4
Average percentage	2.8	3.0	2.6	1.9	2.9	2.7	3.0	2.8	2.6	2.9

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 71. Savings and thrift plans: Vesting provisions, all private industry workers, National Compensation Survey, 2003

Characteristics	Total	Immediate full vesting	Cliff vesting ¹	Graded vesting ²	Not determinable
All workers	100	21	18	54	8
Worker characteristics					
White collar	100	21	20	51	8
Blue collar	100	22	15	55	9
Service	100	12	8	76	4
Union	100	18	27	48	7
Nonunion	100	21	17	55	8
Establishment characteristics					
Goods producing	100	20	15	55	11
Service producing	100	21	19	54	7
1 to 99 workers	100	19	16	55	11
100 workers or more	100	22	19	53	6

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 72. Deferred profit-sharing plans: Employer contribution, all private industry workers, National Compensation Survey, 2003

Characteristics	Total	Based on stated formula	No stated formula	Not determinable
All workers	100	65	30	5
Worker characteristics				
White collar	100	63	33	5
Blue collar	100	67	26	7
Nonunion	100	64	31	6
Establishment characteristics				
Goods producing	100	60	30	10
Service producing	100	66	30	3
1 to 99 workers	100	57	35	8
100 workers or more	100	71	26	2

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. Deferred profit-sharing plans: Allocation of employer contributions to individual employee accounts, all private industry workers, National Compensation Survey, 2003

Characteristics	Total	Proportional to earnings	Other allocation formula ¹	Not determinable
All workers	100	60	28	12
Worker characteristics				
White collar	100	57	29	14
Blue collar	100	66	25	9
Nonunion	100	62	26	12
Establishment characteristics				
Goods producing	100	63	29	8
Service producing	100	59	27	14
1 to 99 workers	100	63	24	13
100 workers or more	100	58	31	11

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 74. Deferred profit-sharing plans: Eligibility requirements, all private industry workers, National Compensation Survey, 2003

Eligibility requirement	All workers	Occupational group		Industry		Establishment size		Nonunion
		White collar	Blue collar	Goods producing	Service producing	1-99 workers	100 workers or more	
Total	100	100	100	100	100	100	100	100
With minimum age or service requirement	85	85	83	77	89	96	75	87
Service requirement only	22	28	11	15	25	23	21	24
3 months or less	4	6	(¹)	3	4	5	3	4
6 months	1	2	(¹)	-	2	1	2	1
1 year	17	20	10	12	19	17	17	18
Greater than 1 year	(¹)	(¹)	(¹)	(¹)	-	-	(¹)	(¹)
Age 21	50	49	50	31	58	55	44	50
1-11 months	9	8	11	13	7	12	6	8
1 year	40	40	40	18	49	43	37	41
Greater than 1 year	1	1	-	-	1	1	1	1
Other than age 21	13	8	22	31	6	17	10	14
1-11 months	3	2	3	7	1	1	4	3
1 year	11	6	19	24	5	16	6	11
No minimum age or service requirement	7	4	14	19	2	4	11	5
Not determinable	8	10	3	4	9	(¹)	14	8
Average service requirement (in months)	10.7	10.7	10.8	9.7	11.1	10.7	10.8	10.8

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 75. Money purchase pension plans: Employer contributions, all private industry workers, National Compensation Survey, 2003

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	67	68	70	66	68	71
Less than 3 percent	8	5	6	8	8	7
3.00–5.99	35	41	37	46	31	39
6.00–8.99	14	12	15	5	18	13
9.00–11.99	7	9	9	4	8	9
12.00 percent or greater	4	1	3	4	3	3
Percentage varies by earnings	4	5	5	-	6	4
Dollar amount per hour worked	8	5	5	20	2	5
Other ¹	18	21	20	4	24	19
Not determinable	3	(²)	(²)	10	(²)	2

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

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.

Appendix A. Technical Note

The National Compensation Survey (NCS) health 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 2003 NCS data on provisions of healthcare and retirement plans were obtained from 3,030 private industry establishments representing approximately 103 million workers; of this number, over 79 million were full-time workers, and the remainder—nearly 24 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 usually is at a single physical location.

Industry groups

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 services.

Occupational groups

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, and 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, partners in unincorporated firms, and U.S. citizens working overseas.

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 non-union worker.

Calculation details

Averages for occupations within an establishment were used to produce estimates for worker groups with average hourly pay 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 5 single employees and 5 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 5 single employees have single coverage or that the 5 married employees have family coverage. Rather, the deductible calcu-

lations 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, childcare, 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.

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 three-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 in 1994) 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. 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 based on 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 four-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 visited sampled establishments or contacted them by telephone to collect data for the survey. To reduce the reporting burden, field economists asked 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, tabulations indicate the percentage of employees in indemnity plans with overall limits 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. Three weight-adjustment factors are applied to the data. The first factor accounts for establishment nonresponse and the second factor for occupational nonresponse. The third, poststratification, factor 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

$$Y = \sum_{i=1}^n \frac{f_2 f_1}{P_i} \sum_{j=1}^{o_i} \frac{Y_{ij} f_{ij}}{P_{ij}}$$

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;

$f1_i$ = 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;

$f2_i$ = 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 re-

sponding 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 nonsampling errors in recording, coding, and processing the data. However, to the extent that the characteristics of nonrespondents are not the same as those of respondents, nonsampling 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, 2003

Characteristics	Number of establishments studied	Number of occupational observations	Estimated number of workers ¹
Total	3,030	17,273	103,121,548
Worker characteristics			
White-collar occupations	–	10,356	53,418,512
Blue-collar occupations	–	4,771	30,188,280
Service occupations	–	2,146	19,514,756
Full time	–	14,430	79,285,662
Part time	–	2,843	23,835,885
Union	–	2,349	11,026,514
Nonion	–	14,924	92,095,034
Average wage less than \$15 per hour ...	–	8,637	60,125,210
Average wage \$15 per hour or more	–	8,636	42,996,338
Establishment characteristics			
Goods-producing industries	713	4,127	22,720,659
Service-producing industries	2,317	13,146	80,400,888
1 to 99 workers	1,333	5,453	55,759,131
100 workers or more	1,697	11,820	47,362,416
Geographic areas			
Metropolitan areas	2,425	14,085	85,884,975
Nonmetropolitan areas	605	3,188	17,236,572
New England	175	1,033	5,449,205
Middle Atlantic	387	2,209	13,752,857
East North Central	561	3,260	17,489,356
West North Central	276	1,486	9,272,359
South Atlantic	534	3,054	17,949,486
East South Central	171	953	5,617,726
West South Central	344	2,005	11,068,657
Mountain	210	1,210	6,120,857
Pacific	372	2,063	16,401,045

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 2003 National Compensation Survey benefits series were collected from December 2002 to April 2004, reflecting an average reference period of 2003. 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:

<i>Establishments</i>	<i>Number</i>
In sample	4,468
Out of business or out of scope	446
Unable or unwilling to respond	992
Responding fully or partially	3,030

The responding establishments yielded 17,273 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).

Four procedures were used to adjust for missing data from partial and full refusals. Each of these participant values is imputed by selecting a similar plan from another establishment.

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 then were used to represent the missing data. The following tabulation gives the participation imputation percentages for the various benefit areas:

<i>Benefit area</i>	<i>Imputation percentage</i>
Defined benefit	53
Defined contribution	56
Medical care	59
Dental benefits	60
Vision benefits	60
Prescription drugs	59

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.