### Persons Insured Under Medicare, July 1, 1967

by HARRY L. SAVITT\*

AS MEDICARE (health insurance for the aged under the Social Security Act) went into effect on July 1, 1966, approximately 18.9 million persons were entitled to hospital insurance (HI) benefits and 17.6 million persons had voluntarily enrolled for supplementary medical insurance (SMI) benefits. One year later, the number of insured persons had risen to 19.4 million for HI and 17.9 million for SMI.

This article presents data for each State on the number of persons insured under HI and under SMI, by type of entitlement to retirement benefits. It also describes the magnitude of the changes that occurred during the program's first year.

The data reflect information on persons entitled to benefits on July 1, 1967, according to social security records summarized December 29, 1967. Figures derived from later summaries of the records will undoubtedly show some changes in the data for July 1, 1967, because of the lags in adding eligible persons to the records and in deleting those who died or whose benefits were terminated before the first of July. An explanation of the major terms used here is given in the concluding section of the article.

#### NUMBER INSURED, JULY 1, 1967

In all, persons voluntarily enrolled for SMI benefits, as of the beginning of Medicare's second year, totaled 17.9 million or 92 percent of the 19.4 million entitled to HI benefits. Included among those on the SMI rolls were about 29,000 persons not entitled to receive HI benefits—mainly Federal Government employees who are covered under the Federal Employees Health Benefit Act of 1959.

#### **Geographic Variations**

For each of the 50 States, the District of Columbia, and various jurisdictions outside the

United States, the number insured under HI and under SMI is shown in table 1, by geographic region and by status with respect to entitlement to retirement benefits under the Social Security Act or the Railroad Retirement Act.

The SMI-enrolled residents of the 50 States and the District of Columbia (excluding any classified as persons of unknown residence) numbered 17.8 million or 93 percent of the number entitled to HI benefits. As a percent of those on the HI rolls, the SMI enrollees varied according to geographic area, ranging from 91 percent in the East South Central States to 96 percent in the New England States. The State-to-State variation was much greater; the proportion went from 77 percent in Alaska and 82 percent in Mississippi to about 96 percent in five States (Connecticut, Maine, Massachusetts, New Jersey, Vermont). In six other States besides Alaska and Mississippi, the SMI ratios were below 90 percent (Georgia, Kansas, Louisiana, Maryland, Missouri, and New Mexico).

State variations in enrollment in the SMI program depend, to a large extent, on the voluntary decisions of aged persons. Data from special surveys conducted by the Social Security Administration indicate that significant proportions of the aged may decide not to enroll for SMI benefits for one of several reasons: their medical bills are being paid by public assistance; they are receiving free medical care from the Veterans Administration or some other Federal agency; or they cannot afford the SMI monthly enrollment premium (\$3 on July 1, 1967).

When the Medicare program was formulated, it was recognized that aged persons receiving cash payments under public assistance would be unable to afford the monthly premiums. Provision was made, therefore, for each State to enroll its aged public assistance recipients and pay the premiums for them.<sup>2</sup> The extent to which the States exercised this option is another

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<sup>&</sup>lt;sup>1</sup> See "Enrollment in the Health Insurance Program for the Aged," *Social Security Bulletin*, March 1967, pages 21-24.

<sup>&</sup>lt;sup>2</sup> See Arne Anderson, Enrollment of Aged Public Assistance Recipients in the Medical Insurance Program Under Social Security (Health Insurance Statistics Note No. 5), Office of Research and Statistics, 1968.

Table 1.—Number of persons insured under hospital and medical insurance, by type of entitlement and State, as of July 1, 19671 [In thousands, except percent]

		All perso	ns enrolled		social s	led to ecurity fits 3	Entit railroad re bene	led to etirement fits <sup>3</sup>	Other	enrolled p	ersons
Area of residence	Medical ins		insurance	1							
	Hospital insurance	Number	Percent of hospital <sup>2</sup>	Hospital and medical	Hospital insurance	Medical insurance	Hospital insurance	Medical insurance	Hospital insurance		Hospital and medical
Total	19,358	17,879	92.4	17,850	17,281	16,102	846	772	1,503	1,265	1,236
United States	19,048	17,762	93.2	17,734	17,022	15,999	836	770	1,461	1,254	1,225
New England. Maine. New Hampshire Vermont. Massachusetts Rhode Island Connecticut	1,243 117 78 48 624 101 276	1,190 112 73 46 598 95 266	95.7 95.8 93.1 95.8 96.0 94.3 96.4	1,187 111 73 46 597 95 266	1,149 106 73 44 570 95 262	1,103 101 68 42 549 90 253	30 5 2 2 14 1 6	28 4 2 2 13 1 5	75 8 4 3 45 5	70 8 4 3 42 4 10	68 7 3 3 40 4 10
Middle Atlantic New York New Jersey Pennsylvania	3,827 1,927 662 1,239	3,622 1,829 635 1,157	94.6 94.9 96.0 93.4	3,618 1,827 634 1,156	3,565 1,813 623 1,129	3,387 1,728 600 1,059	155 57 23 76	144 52 21 70	154 77 23 55	137 68 21 47	133 66 20 46
East North Central Ohio Indiana Illinois Michigan Wisconsin	3,723 972 481 1,075 736 458	3,472 901 445 999 694 433	93.3 92.6 92.4 93.0 94.2 94.5	3,469 900 445 998 693 433	3,418 873 447 980 690 429	3.210 816 415 919 653 407	175 49 27 62 20 17	162 46 24 57 19 16	187 65 18 53 33 18	155 53 15 42 28 16	152 52 15 41 28 15
West North Central Minnesota Lowa Missouri North Dakota South Dakota Nebraska Kansas	400 349 545 65 79 179	1,725 379 330 490 60 74 165 228	91.8 94.7 94.5 89.9 91.1 92.9 91.9 87.3	1,723 379 330 489 59 74 165 228	1,686 359 320 476 59 74 165 233	1,564 341 303 435 55 68 152 210	106 24 17 30 3 2 11	98 23 16 27 3 2 10	122 25 18 49 4 4 7	97 23 17 37 3 4 7 6	95 23 17 36 3 4 6 6
South Atlantic Delaware Maryland District of Columbia Virginia West Virginia North Carolina South Carolina Georgia Florida	68 339 193 384 179 343	2,376 40 242 61 308 180 348 163 295 738	91.6 94.2 89.9 90.2 91.0 93.2 90.5 91.0 86.2 95.0	2,368 40 240 59 307 180 347 163 295 737	2,266 39 241 56 301 168 341 151 270 698	2,100 37 218 49 274 158 315 138 245 665	119 3 14 2 22 14 11 5 14 34	109 3 13 2 20 13 10 5 13	245 2 18 10 22 14 36 24 63 58	201 1 15 10 20 12 26 22 42 53	193 1 13 8 18 12 26 21 41 52
East South Central Kentucky Tennessee Alabama Mississippi	1,212 328 363 306 214	1,096 304 337 280 175	90.5 92.5 92.8 91.5 82.0	1,095 303 337 280 175	994 277 309 241 167	917 258 287 224 147	58 20 19 12 7	53 18 17 11 7	177 37 42 57 42	143 32 38 49 24	141 32 38 48 23
West South Central Arkansas Louisiana Oklahoma Texas	282	1,580 208 251 264 858	92.7 92.4 87.7 93.6 94.1	1,578 207 251 263 857	1,373 181 212 229 751	1,280 167 193 213 707	66 10 10 8 38	60 9 9 8 8 34	285 37 67 47 134	260 35 52 46 128	257 34 51 45 126
Mountain Montana Idaho Wyoming Colorado New Mexico Arizona Utah Nevada	635 68 65 30 180 65 131 71 26	592 64 60 28 171 57 122 66 24	93.1 94.0 91.9 93.4 95.2 87.7 93.0 93.4 92.5	590 64 60 28 171 57 121 66 24	559 61 60 26 154 53 117 63 23	523 58 56 25 147 48 109 60 21	43 6 4 3 11 4 7 6 2	40 5 3 3 10 4 7 5 2	49 3 3 1 18 9 10 4 1	43 3 2 1 17 6 9 3	41 3 2 1 17 6 9 3
Pacific	307 212 1,665 6	2,110 288 195 1,585 5 37	94.6 93.6 92.2 95.2 76.7 95.1	2,106 287 195 1,582 4 37	2,012 282 198 1,490 5	1,915 266 185 1,425 4 35	82 13 10 59 (4) (4)	76 12 9 54 (4)	167 18 8 138 1 2	149 15 5 127 (4)	145 14 5 124 (4)
Other areas American Samoa Guam Puerto Rico. Virgin Islands Other territories Foreign countries Unknown	(*) 147 2 (*) 141	(4) 92 1 90 2 (4) 15 9	(5) 11.0	(4) 92 90 2 (4) 15 9	(*) 140	(4) (4) (82 1 (4) 15 4	(4) 0 (4) (4) (4) (4) (4) 9	(4) (4) (4) (4) (4) (4) (4) 2	38 (4) 1 36 1 (4) (4) 4	(4) (5) (6) (7) (8) (4) (6) (7) (8)	(4) (4) (4) (4) (4) (4) (5)

ment benefits on the basis of earnings under both programs.  $^4$  Less than 500.  $^5$  Not shown where base is less than 500.

Based on data recorded as of December 29, 1967.
 Computed on unrounded figures.
 Includes 272,000 people entitled to both social security and railroad retire-

reason for State variations in the SMI enrollment ratio. None of the States with SMI enrollment ratios below 90 percent had paid the monthly SMI premiums for their public assistance recipients during the period covered by this report.

#### Type of Entitlement

Persons receiving or entitled to receive retirement benefits under the social security program accounted for 89 percent of the 19.4 million persons entitled to HI benefits; those receiving or entitled to receive railroad retirement benefits represented 4 percent; the remaining 1.5 million persons were about 8 percent of the total. The distribution of the SMI enrollees is similar.

The numbers shown in table 1 for the three types of enrollees are not additive. The 272,000 persons entitled to both social security retirement benefits and railroad retirement benefits, on the basis of earnings under both programs, are reported as entitled both to social security cash benefits and to railroad retirement benefits. They are, however, represented only once in the count of all persons enrolled. In addition, both under HI and under SMI the number reported as entitled to social security benefits includes about 875,000 uninsured persons aged 72 or over to whom special benefits were being paid. (Legislation in 1966 authorized these payments to persons reaching age 72 before 1968 without sufficient coverage to qualify for regular monthly cash benefits.)

#### YEAR-TO-YEAR COMPARISON

Between July 1, 1966, when the program began, and July 1, 1967, the most striking change in the composition of the Medicare rolls is the decline in the number of "other" enrolled persons—those not entitled to monthly cash retirement benefits either under the Social Security Act or the Railroad Retirement Act. That category was about 943,000 smaller for HI and about 957,000 smaller for SMI—a drop of about 39 percent and 43 percent, respectively (table 2).

Most of this change resulted from the 1966 provision for "special age-72" benefits (effective October 1, 1966). Uninsured persons aged 72 and over who had been classified in the "other en-

Table 2.—Comparison of the number of persons insured under hospital insurance and medical insurance, by type of entitlement, on July 1, 1966, and on July 1, 1967

	Hosp	ital insu	rance	Medical insurance				
Type of entitlement	Nur enro on J	lled	Per- centage change	Nur enro on J	Per- centage			
	1966	1967		1966	1967	change		
Total	1 18,859	19,358	2.6	1 17,612	17,879	1.5		
Entitled to social security benefits Entitled to railroad	15,856	17,281	9.0	14,882	16,102	8.2		
retirement benefits Other enrolled persons_	821 2,446	846 1,503	3.0 -38.5	761 2,222	772 1,265	-43.1		

<sup>&</sup>lt;sup>1</sup> Persons entitled to both social security and railroad retirement benefits are counted in each category separately but only once in the total.

rolled persons" category because they did not qualify for a social security benefit as of July 1, 1966, were transferred to the category of those entitled to social security benefits when they qualified for the new special benefit. On July 1, 1967, according to Social Security Administration records, about 875,000 were entitled to the special social security payments because of the 1966 provision.

The net change between July 1, 1966, and July 1, 1967, in the number of persons insured under Medicare is shown in table 3, by geographic division and by State, for both parts of the program. Additions to the rolls occur as persons reach age 65 and apply for and become entitled to monthly retirement benefits under the Social Security Act or Railroad Retirement Act. Such persons automatically are entitled to HI benefits. Additions to the HI rolls also occur when a determination of eligibility is made for persons who have applied for HI benefits though they do not qualify for social security or railroad retirement benefits.

Persons applying for monthly cash retirement benefits or for health insurance benefits under the Social Security Act are asked whether they also wish to participate in the voluntary supplementary medical insurance program and pay the required monthly premium.

Deletions from both the HI and SMI rolls occur when an insured person dies or, in relatively few instances, when the person's entitlement to cash retirement benefits is affected for technical reasons—divorce, for example. In SMI, the number of insured persons is also reduced because of nonpayment of premiums.

Table 3.—Changes in number of persons insured under hospital and medical insurance, by State, July 1, 1966-July 1, 19671 [In thousands, except percents]

		Hospital in	surance		Medical insurance			
Area of residence	Number enrolled as of July 1		Net change, 1966 to 1967		Number enrolled as of July 1		Net change, . 1966 to 1967	
-	1966	1967	Number	Percent <sup>2</sup>	1966	1967	Number	Percent 2
Total	18,859	19,358	500	2.6	17,612	17,879	267	1.5
United States	18,569	19,048	479	2.6	17,500	17,762	262	1.5
New England	1,224 116 76 47 615 99 271	1,243 117 78 48 624 101 276	19 1 2 1 9 2 6	1.6 .9 2.1 1.1 1.4 1.6 2.0	1,176 111 70 45 593 94 262	1,190 112 73 46 598 95 266	14 1 3 1 6 1	1.2 .7 3.9 1.4 .9 .8
Middle Atlantic New York New Jersey Pennsylvania	3,766 1,896 648 1,221	3,827 1,927 662 1,239	61 30 14 18	1.6 1.6 2.1 1.5	3,594 1,816 625 1,153	3,622 1,829 635 1,157	28 13 10 5	.8 .7 1.6 .4
East North Central Ohio Indiana Illinois Mtchigan Wisconsin	3,672 959 475 1,061 726 451	3,723 972 481 1,075 736 458	52 14 6 14 11 7	1.4 1.4 1.3 1.5 1.6	3,462 901 442 1,000 691 427	3,472 901 445 999 694 433	10 -1 3 -1 2 6	.3 1 .8 1 .3
West North Central Minnesota. Iowa. Missouri. North Dakota South Dakota Nebraska Kansas.	1,848 393 346 534 64 78 176 257	1,880 400 349 545 65 79 179 261	32 7 4 10 1 2 3 5	1.7 1.8 1.0 2.0 1.7 1.9 2.0 1.8	1,709 371 328 490 59 73 163 225	1,725 379 330 490 60 74 165 228	$ \begin{array}{c}     16 \\     8 \\     2 \\     -1 \\     \hline     1 \\     2 \\     3 \end{array} $	.9 2.2 .6 1 .3 .8 1.5
South Atlantic Delaware Maryland District of Columbia Virginia West Virginia North Carolina South Carolina Georgia Florida	2,469 42 258 67 327 190 371 173 330 712	2,594 43 269 68 339 193 384 179 343 777	125 1 11 11 12 3 13 6 12 65	5.1 2.6 4.3 1.3 3.8 1.5 3.5 3.4 3.8 9.1	2,307 40 236 62 303 180 346 159 302 680	2,376 40 242 61 308 180 348 163 295 738	$ \begin{array}{ccc}  & 69 \\  & 6 \\  & -1 \\  & 6 \\  & 6 \end{array} $ $ \begin{array}{cccc}  & (3) & 2 \\  & 4 \\  & -6 \\  & 58 \end{array} $	3.0 1.0 2.5 -1.2 1.9 (4) .5 2.3 -2.1 8.6
East South Central. Kentucky. Tennessee. Alabama. Mississippi.	1,178 321 352 296 208	1,212 328 363 306 214	33 7 11 10 6	2.8 2.2 3.1 3.3 2.8	1,098 303 331 280 184	1,096 304 337 280 175	$ \begin{array}{r} -1 \\ 1 \\ 6 \\ -9 \end{array} $	$ \begin{array}{r}1\\ .3\\ 1.9\\ .1\\ -4.8 \end{array} $
West South Central Arkansas Louisiana Oklahoma Texas	1,642 217 276 273 877	1,704 225 286 282 912	62 8 10 9 35	3.8 3.7 3.7 3.3 3.9	1,549 201 256 255 837	1 580 208 251 264 858	31 6 -5 9 21	2.0 3.2 -2.0 3.5 2.5
Mountain Montana Idaho Wyoming Colorado New Mexico Arizona Utah Nevada	611 67 64 29 175 62 121 69 24	635 68 65 30 180 65 131 71 26	24 1 2 (*) 5 3 10 2 2	4.0 1.2 2.5 1.4 2.6 4.3 8.4 3.2 7.3	576 64 59 27 167 57 113 65 23	592 64 60 28 171 57 122 66 24	(3) 1 (3) 4 (3) 9 1 1 1	2.8 .2 1.3 1.3 2.6 5 7.6 1.2 5.6
Pacific. Washington Oregon. California. Alaska. Hawati	2,159 302 206 1,608 6 37	2,230 307 212 1,665 6 39	70 6 6 57 (*)	3.3 1.8 2.7 3.5 5.1 5.4	2,030 284 192 1,514 5 36	2,110 288 195 1,585 5 37	80 4 3 71 (3)	3.9 1.3 1.8 4.7 (4)
Other areas	(3) 1 138 2 (3)	(3) (147 (3) (47) (3)	(3) (3) (3) (3) (3)	(5) 5.0 6.5 8.5 (8)	(3) 95 (3) 1 92 2 (3)	(3) 92 (4) 1 90 2 (3)	-2 (3) (3) (3) (2) (3)	-2.6 (5) -14.1 -2.5 1.6 (8)
Foreign countriesUnknown	133 14	141 19	7 4	5.6 29.0	10 7	15 9	5 2	49.3 31.7

Figures for 1966 based on data recorded as of December 3, 1966; figures for 1967 based on data recorded as of December 29, 1967.
 Computed on unrounded figures.

<sup>Less than 500.
Less than 0.05 percent.
Not shown where base is less than 500.</sup> 

#### **Geographic Variations**

Hospital insurance.—The number of persons insured for HI benefits during Medicare's first year increased by half a million, or about 2.6 percent. During this period, approximately 1.6 million persons were added to the rolls and 1.1 million removed. One-fourth of the increase occurred in the South Atlantic States where the number of persons protected by HI rose by 125,000, or 5 percent. The number was 4 percent higher in the Mountain States and the West South Central States. The number enrolled increased less than 2 percent in four geographic divisions (West North Central, Middle Atlantic, New England, and East North Central).

Changes in the number insured for HI benefits showed a much greater variation among the individual States. The figure for Iowa, for example, was only 1.0 percent higher than it was a year earlier and that for Maine only 0.9 percent higher. In contrast, large gains occurred in Florida, where the increase was 9.1 percent, and in Arizona and Nevada, which registered increases of 8.4 percent and 7.3 percent, respectively.

For some years, census figures have placed Arizona, Florida, and Nevada among the States with the largest percentage increases in total population and in the aged population as well.<sup>3</sup> This growth, which is probably the result of steady in-migration of newly retired persons, is reflected in the relatively large increases in the number entitled to HI benefits in these States during Medicare's first year.

Supplementary medical insurance.—Similar but smaller increases in the number of enrollees occurred under the SMI program. From July 1, 1966, to July 1, 1967, the number of enrollees increased by 267,000, or 1.5 percent. During this 12-month period, about one and a quarter million persons were added to the SMI rolls and nearly 1 million persons were removed for non-payment of premiums or because of death.

Geographical differences in the change in the number of enrollees varied more widely for SMI than for the HI program. More than half (56 percent) the total increase of more than one-

fourth of a million persons occurred in two regions—the Pacific States and the South Atlantic States. These regions also had the largest relative increases in SMI enrollment—3.9 percent and 3.0 percent, respectively. In contrast, gains in the East North Central States were extremely small (about 10,000 or 0.3 percent) and the number of enrollees in the East South Central States actually decreased 0.1 percent.

Declines in the number of SMI enrollees, ranging from 4.8 percent to 0.1 percent, occurred in seven States and the District of Columbia. Increases of more than 4 percent were reported by five States (Arizona, California, Florida, Hawaii, and Nevada).

HI and SMI differences in State variation.— Available information does not provide an explanation of the wider State-to-State variations in the changes for SMI than for the HI program. Part of the difference may stem from the provisions of the Social Security Act on SMI enrollment, which set up two enrollment periods: (1) an initial period, based on the time the individual is first eligible to enroll—usually when he attains age 65, and (2) a general enrollment period, during which an individual may enroll if he failed to do so in his initial enrollment period. No enrollment is necessary for HI benefits, since those entitled to social security or railroad retirement benefits are automatically on the HI rolls.

Another factor that accounts for differences in the increased numbers insured for HI benefits and for SMI benefits is termination for non-payment of the SMI premiums. Only SMI enrollees not receiving or not entitled to receive social security or railroad retirement benefits can have their enrollment terminated for this reason, since social security and railroad retirement beneficiaries have their SMI premiums deducted from their monthly cash benefit checks.

As of the end of June 1967, enrollment in the SMI program was terminated for about 150,000 persons because of failure to pay the premiums; the number had risen to 161,000 by the end of December 1967. The frequency of terminations varies significantly among the States, and these State differences may account for the decline in SMI enrollment from July 1, 1966, to July 1, 1967 in those States with large drops in enroll-

<sup>&</sup>lt;sup>3</sup> Bureau of the Census, "Estimates of the Population of States, by Age, 1960 to 1966, With Provisional Estimates for July 1, 1967," Current Population Reports, Series P-25, No. 384, February 13, 1968.

ment—Georgia, Louisiana, Mississippi, and Puerto Rico, for example. Terminations for nonpayment of premium at the end of 1967 were 3.7 percent of SMI enrollment in Georgia and 6.5 percent in Puerto Rico; the proportion for the Nation was less than 1 percent.

#### PROGRAM DEFINITIONS

The definitions that follow relate only to the Medicare provisions as they were enacted in the Social Security Amendments of 1965 and do not reflect changes made later.<sup>4</sup>

Hospital insurance.—That portion of the Medicare program that pays for a large part of the cost of inpatient hospital care, post-hospital extended care, home health service visits, and outpatient hospital diagnostic services. Up to 90 days of hospitalization per benefit period are paid for. (Previously called a "spell of illness," the benefit period begins with the first day of hospitalization and ends 60 days after discharge from the hospital or extended-care facility.) Payment is subject to the hospital's participation in the Medicare program and to a deductible of \$40 and a coinsurance payment of \$10 per day for the 61st to 90th day of hospitalization per benefit period. Inpatient services in a tuberculosis or psychiatric hospital are included, with a lifetime limit of 190 days of covered services in psychiatric hospitals.

Hospital insurance also pays for all covered services in participating extended-care facilities for the first 20 days of such care per benefit period, following discharge from a hospital after a stay of 3 days or more, and within 14 days of the time of discharge. Up to an additional 80 days in the extended-care facility in the same benefit period are paid for, subject to a coinsurance payment of \$5 a day. Up to 100 home health service visits provided by participating home health agencies are covered in the 12-month period following discharge from a participating hospital or extended-care facility. Home health services must follow a stay in a hospital of at least 3 consecutive days, and a home health plan must be established by the attending physician within 14 days after discharge from the participating hospital or extended-care facility.

Supplementary medical insurance.—The portion of the Medicare program that provides payment for the following: physicians' services, including home and office visits; up to 100 home health service visits without previous hospitalization in the calendar year; outpatient hospital therapeutic services; outpatient physicial therapy services; diagnostic X-rays and laboratory tests; radiation therapy; prosthetic devices; rental or purchase of durable medical equipment; ambulance services; and

surgical dressings, splints, casts, and similar devices. After the beneficiary has paid the first \$50, the program pays for 80 percent of the reasonable charges for covered services during the calendar year. Expenses incurred in the last quarter of the calendar year, which are applied to that year's deductible, can also be applied to the deductible in the following calendar year.

Entitlement to HI.-Nearly all persons aged 65 and over on July 1, 1966, were eligible for HI benefits. Automatically covered were all persons aged 65 and over who filed applications and established eligibility for monthly social security benefits and those qualified for monthly railroad retirement benefits who were certified to the Social Security Administration by the Railroad Retirement Board. Other persons could establish entitlement if they were aged 65 or over, were United States citizens or aliens lawfully admitted for permanent residence in the United States, had resided in the United States continuously for the preceding 5-year period, had filed an application under the transitional provision for Medicare protection, had met certain other requirements relating to the Internal Security Act of 1950 as amended, and had not been convicted of certain specified crimes against the security of the United States. Federal employees, active or retired, who are covered or could have been covered under the provisions of the Federal Employees Health Benefit Act of 1959, are not entitled to enroll in the HI program but may voluntarily participate in the SMI program.

An eligible person is entitled to hospital insurance benefits beginning with the first day of the month he attains age 65. HI protection may be retroactive for up to 12 months before the month an individual files an application, provided all other conditions for entitlement were met during that period.

Enrollment for SMI.—All persons entitled to benefits under the HI program and retired Federal employees who are not entitled to those benefits may voluntarily participate in the SMI program. A person who chooses to participate must pay a monthly premium that is matched by an amount paid to the supplementary medical insurance trust fund by the Federal Government from general revenues. The law permits the Secretary of Health, Education, and Welfare to adjust the premium if medical costs rise. Up to April 1968, this monthly premium was \$3.

Individuals may enroll in the SMI program only during two periods—the initial and general enrollment periods. The initial period is a 7-month span beginning 3 months before and ending 3 months after the month in which the individual reaches age 65. The general enrollment period is for the enrollment of those who failed to do so during their initial enrollment period. Individuals who had attained age 65 before the Medicare program went into effect in March 1966 were enrolled during the general enrollment period from September 1, 1965, to May 31, 1966. The next general enrollment period was October 1, 1967, through March 31, 1968.

The premium for persons receiving cash retirement payments from social security or railroad retirement is deducted from their monthly checks, and they may terminate their coverage only during a general enrollment period. Other enrollees make premium payments directly to the Social Security Administration. In this instance a 90-day grace period is provided for the payment of overdue premiums, after which coverage is automatically terminated.

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<sup>&</sup>lt;sup>4</sup> For later changes in the law see Wilbur J. Cohen and Robert M. Ball, "Social Security Amendments of 1967: Summary and Legislative History," Social Security Bulletin, February 1968, pp. 3-19.

Entitlement to old-age retirement benefits.— Figures are shown for three types of beneficiaries:

- (1) Persons entitled to receive social security retirement benefits—persons aged 65 and over receiving or entitled to receive monthly cash retirement benefits under the Social Security Act.
- (2) Persons entitled to receive railroad retirement benefits—persons aged 65 and over receiving or entitled to receive monthly retirement cash benefits under the Railroad Retirement.
- (3) Other enrolled persons—persons aged 65 and over not receiving nor entitled to receive monthly cash benefits under either social security or railroad retirement.

Area of residence.-The address to which the individ-

ual's monthly cash benefit check is being mailed; for persons not receiving such benefits, the mailing address given at the time they applied for health insurance benefits. Temporary or permanent changes of residence are reflected in the data to the extent that such changes are reported to the Social Security Administration by enrollees.

The areas of residence include the 50 States, the District of Columbia, American Samoa, Guam, Puerto Rico, and the Virgin Islands. Also included are several foreign countries, although Medicare benefits ordinarily may not be paid for items or services furnished outside the named jurisdictions of the United States. Individuals with a foreign address, for whom reimbursements are recorded, may represent persons for whom the current United States address has not yet been entered into the file.

## Notes and Brief Reports

# OASDHI Covered Employment of Foreign Subsidiaries, January-March 1967\*

Under the 1954 amendments of the Social Security Act, American corporations can obtain coverage under the old-age, survivors, disability, and health insurance program for United States citizens employed in their foreign subsidiaries. Domestic corporations obtain such coverage by entering into an agreement with the District Director of Internal Revenue to pay contributions on the wages of these employees on the same basis as if their services were performed in the United States. This provision became effective January 1, 1955.

All of the first-quarter foreign subsidiary reports of the signatory corporations that could be identified are represented in the accompanying table. First-quarter data are shown because they are most representative of overall coverage. Many employees earn up to the taxable limit (\$4,200 from 1955 to 1958, \$4,800 from 1959 to 1965, \$6,600 in 1966 and 1967) before the end of the second calendar quarter and are thus not repre-

sented in the later part of the year. Data were not compiled for the first quarters of 1960 or 1965.

Foreign subsidiary wage report data, January-March, selected years, 1955-67

Number of domestic corporations	Worker items reported	Taxable wages (thousands)	Average wage per worker item reported	
81 219	1,838 3,173	\$4,021 7,471	\$2,187 2,354	
276   328   377	5,885	15,468	2,431 2,628 2,672	
447 498 524	8,268 8,772	22,795 24,956	2,757 2,845 2,967	
537 546	9,121 10,207	27,443 33,860	3,009 3,317 3,527	
	domestic corporations 81 219 276 328 377 447 498 524 537 546	domestic reported    1,838   219   3,173   276   4,340   328   5,885   377   7,243   447   8,268   498   8,772   524   9,376   537   9,121	domestic corporations   items reported   wages (thousands)	

The number of corporations reporting for January-March 1967 was 547—only one more than the number reported for the same period of 1966. The number of worker items increased by 482 to 10,689, however, and aggregate taxable wages rose to \$37.7 million—\$3.8 million more than the total paid in January-March 1966.

Average taxable wages paid to United States citizens whose employment is covered under this provision amounted to \$3,527 during the first quarter of 1967. For all wage and salary workers in employment covered by old-age, survivors, disability, and health insurance the average amount of taxable wages in that period was \$1,290.

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<sup>\*</sup> Prepared in the Division of Statistics, Office of Research and Statistics.