

# Concurrent Receipt of Public Assistance and Old-Age and Survivors Insurance

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*The increasing attention focused in recent years on both our aged population and our children has brought with it recognition of the importance of the relationship between the income-maintenance programs established under the Social Security Act for these two groups. Accordingly, the Bureau of Public Assistance summarizes in the Bulletin each year State reports on concurrent receipt of old-age and survivors insurance benefits and public assistance payments. The article that follows is based on reports for early 1956.*

THE rapidly growing importance of old-age and survivors insurance as a source of income for aged persons has contributed to the gradual decline in the number of persons receiving old-age assistance. The Social Security Act amendments of 1950, 1952, and 1954 have made it possible for the insurance program increasingly to assume the major role in providing basic economic security to retired men and women and their dependents, as well as to the survivors of deceased wage earners.

In 1948 the Advisory Council to the Senate Finance Committee found that about 75 percent more aged persons were receiving old-age assistance than were receiving benefits under the insurance program. Today there are more than two and one-half times as many aged beneficiaries as recipients of old-age assistance—6.5 million compared with 2.5 million. This shift has had several significant effects on the old-age assistance program. It has (1) reduced the number of recipients by removing from the rolls some who have become eligible for insurance benefits through the extended coverage of the 1950 and 1954 amendments, (2) reduced substantially the number of aged individuals who otherwise would be applying for assistance, and (3) gradually increased the number of recipients who are also insurance beneficiaries.

Since both old-age and survivors insurance and public assistance are income-maintenance programs for the aged and for paternal orphans,

the relationship between them is of continuing interest. To measure the extent to which aged persons and families with dependent children are receiving payments under the two programs, once each year all the States submit reports based on a sample of assistance recipients. These reports show the number of aged and child beneficiaries of old-age and survivors insurance who also receive public assistance and the amounts of the benefit and the assistance payment received. The following article is based on this year's reports. Data concerning aged recipients were collected for the month of February, and most of the States chose either February or March for the information on recipients of aid to dependent children.<sup>1</sup>

## Aged Persons Receiving OASI and OAA

During the period from September 1950 to February 1956 the proportion of the aged population receiving old-age and survivors insurance benefits rose 156 percent—from 177 per 1,000 persons aged 65 and over to 453 per 1,000 (chart 1). This increase has brought the insurance program to a position where, as a source of income for the aged, it overshadows in importance the old-age assistance program; in that program, over the same period, the recipient rates receded from 226 per 1,000 aged persons to 178 per 1,000.

<sup>1</sup> For aid to dependent children, February 1956 data for 29 States, March data for New York (except New York City, which reported January data) and 19 other States, November 1955 for 1 State, and May 1956 for 1 State.

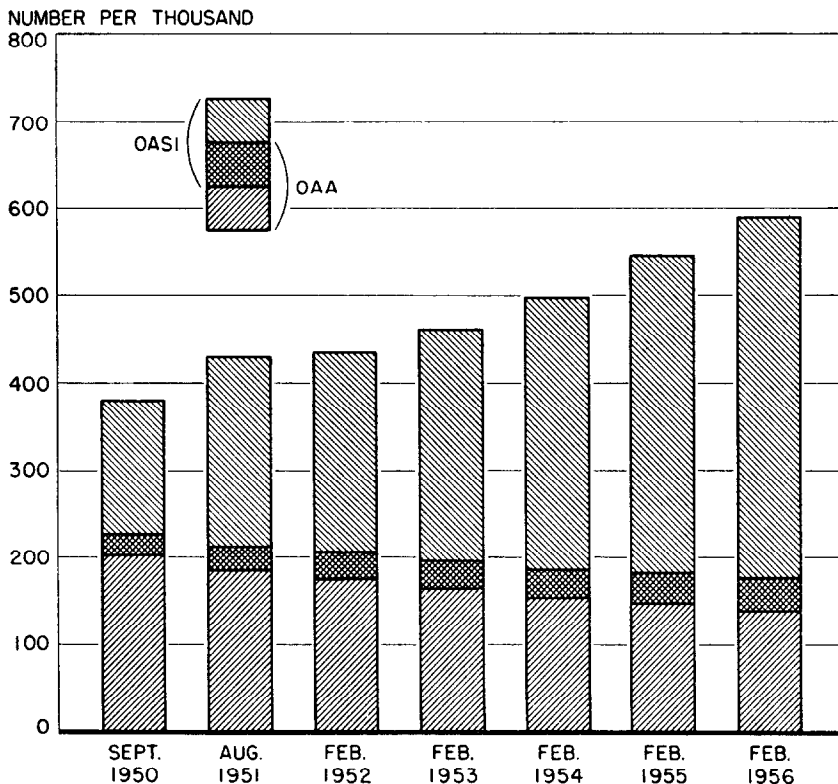
For several reasons, the recipient rate for old-age assistance has not dropped as sharply as the beneficiary rate for old-age and survivors insurance has risen. Many persons currently receiving old-age assistance do not have and are likely never to have an opportunity to obtain insured status under the insurance program. Many of them are widows who have not worked in recent years and whose husbands died before having had the opportunity to be covered by old-age and survivors insurance. They may therefore be in need of assistance for the remainder of their lives. Another group is made up of individuals who, when they reach retirement age, have not had sufficient insurance coverage to provide them with benefits that are large enough to meet their basic needs. They may have to apply for supplementary assistance, and many of them, too, may need such help for the rest of their lives. Finally, the old-age and survivors insurance program was not designed to provide complete protection for persons who have special needs, especially medical care needs. Public assistance will continue to be a necessary supplement for such persons.

Although the old-age assistance recipient rate is declining, the number of aged recipients who also get benefits under the insurance program has risen gradually. Almost twice as many persons were getting both types of payment in February 1956 as in September 1950—516,300 compared with 276,200 (table 1). With the extension in insurance coverage provided by the amendments to the Social Security Act the group potentially eligible for old-age assistance may be expected to include more insurance beneficiaries.

After the 1950 amendments there was a sharp rise in the number of aged recipients who also received insurance benefits. The minimum benefit then payable to retired workers was \$20; with many of the newly eligible beneficiaries receiving benefits near

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Chart 1.—Number of aged persons receiving OAA, OASI, or both per 1,000 persons aged 65 and over, selected months, September 1950–February 1956



the minimum, a considerable number of old-age assistance recipients who were getting benefits for the first time continued to need public aid. In addition, applicants for old-age assistance during the 12 months after September 1950 included a number of beneficiaries who needed assistance to supplement their benefits. As a result the number of persons receiving both types of payments was more than 100,000 greater in August 1951 than in September 1950. Except in one year, the annual increases since August 1951 have been somewhat more gradual, amounting to between 20,000 and 30,000.

Although the number of aged beneficiaries who also receive assistance has risen, the proportion that such beneficiaries comprise of all aged beneficiaries has declined. Of the 6.5 million persons aged 65 and over getting old-age and survivors insurance benefits in February 1956, only 8 percent received supplementary assistance. In September 1950, August

1951, and February 1952 the proportion had been approximately 12 percent.

As the number of aged assistance recipients with insurance benefits has increased and the total number of recipients of old-age assistance has declined, the proportion of recipients

with benefits has gradually gone up. By February 1956, 1 out of every 5 recipients of old-age assistance was also receiving benefits, compared with 1 out of every 10 on the rolls in September 1950.

### State Changes, February 1955–February 1956

The proportion of recipients who also had insurance benefits was larger in February 1956 than it had been a year earlier in all but four of the 51 States that reported.<sup>2</sup> In two States, Virginia and West Virginia, the proportion was the same as in the preceding year.

New Mexico and Hawaii were the only States reporting decreases. In New Mexico the percentage of recipients also getting insurance benefits dropped from 11.6 in February 1955 to 8.1 in February 1956. This decline was attributed by the State to several factors—reduction from 100 percent to 65 percent in the amount of need met by the agency in early 1955, tighter eligibility requirements relating to property ownership, and several other restrictive changes in agency policy. As a consequence, many of the “less needy” cases that were closed included recipients who had also received benefits a year earlier. Although the cut in assistance payments was restored by the end of the year, it is believed that

<sup>2</sup> Puerto Rico and the Virgin Islands, which reported no cases receiving both assistance payments and insurance benefits, are excluded from the analysis.

Table 1.—Aged persons and families with children receiving both OASI benefits and assistance payments, 1948–56

Month and year	Aged persons receiving both OASI and OAA			Families with children receiving both OASI and ADC		
	Number	Percent of—		Number	Percent of—	
		Aged OASI beneficiaries	OAA recipients		OASI beneficiary families with children	ADC families
June 1948.....	146,000	10.0	6.1	21,600	6.7	4.8
September 1950.....	276,200	12.6	9.8	32,300	8.3	4.9
August 1951.....	376,500	11.9	13.8	30,700	6.7	5.0
February 1952.....	406,000	12.0	15.1	30,000	6.1	5.0
February 1953.....	426,500	10.7	16.3	30,600	5.7	5.3
February 1954 <sup>1</sup> .....	463,000	9.7	18.0	31,900	5.4	5.9
February 1955.....	488,800	8.7	19.2	32,100	4.9	5.2
February 1956 <sup>2</sup> .....	516,300	8.0	20.4	32,600	4.6	5.3

<sup>1</sup> November 1953 data for ADC families.

<sup>2</sup> Data for ADC families for month other than February for 22 States. See table 4, footnote 1.

relatively few of these less needy cases had been reinstated by February 1956.

In Hawaii, also, the proportion of recipients with insurance benefits was smaller in February of this year—14.9 percent compared with 15.7 percent in February 1955. Here the reduction was largely the result of removing from the list of basic requirements five items previously recognized by the agency. This change had the effect of disqualifying for assistance a number of recipients who were getting small assistance payments.

The largest increase in the number of aged recipients with both types of payments (577 percent) occurred in Alabama, where the number rose from 1,500 in February 1955 to more than 10,000 in February 1956. Under a policy adopted in Alabama in early 1955, minimum payments were reduced from \$10 to \$1 and individuals with budget deficits of less than \$10 thus became eligible for assistance. This policy tends to increase the number of insurance beneficiaries on the assistance rolls, since many of them need relatively small payments

to supplement their benefits. Other liberalizations, such as the repeal of the relatives' responsibility law, increases in amounts provided under the State's assistance standards, and increases in the amounts of property recipients may own, also contributed to the large increase in Alabama.

### State Differences

In February 1956 the proportion of aged assistance recipients with insurance benefits ranged from 4.9 percent in West Virginia to 43.2 percent in Nevada (table 2). Small State percentages reflect one or both of two circumstances: (1) a relatively small proportion of aged persons receiving benefits, and (2) assistance payments that are low because State funds are small in relation to the number of needy persons and relatively few aged beneficiaries are eligible for assistance. These conditions are most likely to be found in States whose economies are largely agricultural.<sup>3</sup>

In nine States fewer than 10 percent of the aged assistance recipients also received benefits. The aged beneficiary rate in eight of these nine States was substantially less than the national rate of 453 per 1,000 persons aged 65 and over. West Virginia's beneficiary rate was somewhat higher than the national average, but limited assistance funds permitted payments to only the neediest aged persons. Average assistance payments for February 1956 in these nine States ranged from \$27.85 to \$47.17, considerably less than the national average of \$54.08.

States with relatively more old-age and survivors insurance beneficiaries among their aged populations were more likely to have also a larger proportion of beneficiaries in their old-age assistance caseloads. In 13 of the 25 States with 450 or more beneficiaries per 1,000 aged persons, beneficiaries made up at least one-fourth of the old-age assistance caseloads, with the proportions ranging from 25.1 percent to 43.2 percent. Three of the

<sup>3</sup> It is expected that the 1954 amendments, which extended old-age and survivors insurance coverage to farmers and additional agricultural workers, will increase the number of beneficiaries in these States after sufficient time has elapsed for those covered to be eligible for benefits.

Table 2.—Number of aged OASI beneficiaries per 1,000 population aged 65 and over and percent of OAA recipients with OASI benefits, February 1956

State <sup>1</sup> and beneficiary-rate group	OASI beneficiaries per 1,000 population aged 65 and over	Percent of OAA recipients with OASI benefits				
		Less than 10	10-14	15-19	20-24	25 or more
Total, 53 States.....	453	20.4				
Less than 300:						
North Dakota.....	227		12.6			
Mississippi.....	252	6.9				
South Dakota.....	291		14.0			
South Carolina.....	299	5.9				
300-349:						
Georgia.....	312	9.1				
New Mexico.....	317	8.1				
Oklahoma.....	320			16.4		
Texas.....	322		13.3			
Louisiana.....	322				20.3	
Arkansas.....	323	6.5				
Tennessee.....	324	7.6				
North Carolina.....	329	8.1				
Nebraska.....	336			17.1		
Alabama.....	349		10.4			
350-399:						
Kansas.....	356			17.2		
Iowa.....	359			18.4		
Kentucky.....	360		10.3			
Montana.....	367				23.5	
District of Columbia.....	370				22.1	
Wyoming.....	386					27.1
Minnesota.....	388			19.1		
Virginia.....	397	5.3				
Missouri.....	397				23.7	
400-449:						
Colorado.....	407					29.5
Idaho.....	423				24.1	
Utah.....	434			19.5		
450-499:						
Nevada.....	450					43.2
Illinois.....	459				20.5	
Wisconsin.....	466				23.2	
Indiana.....	473			18.8		
Maryland.....	475			18.9		
Ohio.....	481				22.2	
Alaska.....	481					34.3
Arizona.....	482				23.8	
West Virginia.....	483	4.9				
Hawaii.....	485		14.9			
Vermont.....	486					28.2
California.....	499					39.3
500 or more:						
Michigan.....	502				24.6	
Washington.....	505					31.9
Delaware.....	507			16.0		
New York.....	525					26.7
Pennsylvania.....	535			17.4		
Oregon.....	541					30.9
Massachusetts.....	554					37.3
New Hampshire.....	564					26.3
New Jersey.....	567				23.7	
Connecticut.....	571					34.7
Maine.....	575					28.0
Florida.....	579					25.1
Rhode Island.....	606					34.7

<sup>1</sup> Puerto Rico and the Virgin Islands are not shown because they did not report any cases receiving both assistance payments and insurance benefits.

13 States—Florida, Maine, and Vermont—had average assistance payments less than the national average. Colorado and Wyoming (with beneficiary rates of less than 450 per 1,000 aged persons) also had as many as one-fourth of their recipients getting both types of payments, but these two States had an average assistance payment higher than that for the country as a whole. Most of the States with at least one-fourth of their recipients getting both assistance payments and benefits under the insurance program have a relatively high degree of industrialization and are located either in the North-east or the West.

In 27 States, 10-24 percent of the assistance recipients also had insurance benefits. Most of these States had beneficiary rates that were less than the national average, although in four—Delaware, Michigan, New Jersey, and Pennsylvania—the beneficiary rate was more than 500 per 1,000 aged in the population. Average assistance payments in these four States varied widely, but none was among the groups of States with the highest or the lowest average payment per recipient.

As the number of aged insurance beneficiaries increases the proportion receiving old-age assistance usually declines. Only Alabama, Alaska, Rhode Island, and Vermont were exceptions to the general rule and showed a higher percentage of beneficiaries on the assistance rolls in February 1956 than in the preceding February. The proportion of beneficiaries receiving assistance to supplement their other income varied widely from State to State. In 14 States less than 5 percent of the aged beneficiaries received supplementary assistance; the proportion was lowest—0.9 percent—in Virginia (table 3). On the other hand, four States reported that more than one-fifth of the beneficiaries were receiving assistance, and in Louisiana the proportion was almost two-fifths.

The proportion of insurance beneficiaries receiving assistance was low in States with relatively low recipient rates and was generally high in States where the old-age assistance recipient rate was relatively high. For example, in the 11 States where

the number of recipients per 1,000 persons aged 65 and over was less than 100, fewer than 5 percent of the aged beneficiaries received supplementary assistance. Many of these States with low recipient rates are highly industrialized, with greater old-age and survivors insurance coverage and relatively more insurance beneficiaries than the States with high recipient rates. In addition, benefit payments are generally higher in these States because wage levels are usually higher in industrial than in nonindustrial employment.

In the 12 States with old-age assistance recipient rates of 100-149 per 1,000 aged persons, less than 10 percent of the insurance beneficiaries received assistance. In two of these States, fewer than 5 percent of the beneficiaries received assistance.

Of the seven other States with recipient rates less than the national average of 178 per 1,000 aged, two reported that more than 10 percent of their beneficiaries were receiving supplementary assistance.

The 21 States with recipient rates exceeding the national average, how-

Table 3.—Number of OAA recipients per 1,000 population aged 65 and over and percent of aged OASI beneficiaries receiving OAA, February 1956

State <sup>1</sup> and recipient-rate group	OAA recipients per 1,000 population aged 65 and over	Percent of aged OASI beneficiaries receiving OAA			
		Less than 5	5-9	10-19	20 or more
Total, 53 States.....	178	3.0			
Less than 100:					
New Jersey.....	43	1.8			
District of Columbia.....	47	2.8			
Delaware.....	54	1.7			
Pennsylvania.....	54	1.7			
Maryland.....	56	2.2			
New York.....	67	3.4			
Hawaii.....	67	2.1			
Virginia.....	69	.9			
Connecticut.....	80	4.9			
Indiana.....	88	3.5			
New Hampshire.....	99	4.6			
100-149:					
Rhode Island.....	100		5.8		
Illinois.....	104	4.7			
Wisconsin.....	118		5.9		
Nebraska.....	119		6.0		
Oregon.....	119		6.8		
Ohio.....	123		5.7		
Maine.....	128		6.2		
Michigan.....	130		6.4		
Iowa.....	134		6.9		
Montana.....	143		9.2		
North Dakota.....	144		8.0		
West Virginia.....	149	1.5			
150-199:					
Kansas.....	158		7.6		
South Dakota.....	161		7.8		
Minnesota.....	164		8.1		
Massachusetts.....	167			11.2	
Vermont.....	169		9.8		
Wyoming.....	171			12.0	
Idaho.....	171		9.7		
Utah.....	184		8.3		
Nevada.....	185			18.3	
North Carolina.....	197	4.8			
200-299:					
Kentucky.....	214		6.1		
Florida.....	221		9.6		
New Mexico.....	226		5.7		
Washington.....	232			14.6	
Tennessee.....	241		5.7		
California.....	247			19.5	
Arizona.....	255			12.6	
Missouri.....	295			17.6	
300-399:					
South Carolina.....	319		6.3		
Alaska.....	325				23.3
Arkansas.....	327		6.6		
Texas.....	364			15.1	
Colorado.....	367				26.6
Georgia.....	394			11.5	
400 or more:					
Mississippi.....	440			12.1	
Oklahoma.....	446				22.9
Alabama.....	447			13.2	
Louisiana.....	612				38.6

<sup>1</sup> Puerto Rico and the Virgin Islands are not shown because they did not report any cases receiving both assistance payments and insurance benefits.

ever, presented a mixed situation. In North Carolina less than 5 percent of the aged insurance beneficiaries received assistance, while four States had more than 20 percent on the rolls. The proportion of beneficiaries getting assistance payments fell in the 5-9 percent range in seven States and in the 10-19 percent range in the other nine.

### Families With Children Receiving OASI and ADC

As a result of the growth of old-age and survivors insurance and the sharp decline in recent years in the total number of orphans, only a small part of the program of aid to dependent children today is concerned with meeting need because of the death of a parent—the major risk for which old-age and survivors insurance makes provision in relation to children. Of the families receiving aid to dependent children, the proportion currently on the rolls because of the death of a father is about 13 percent, or only half as large as it was in 1948. With 9 out of every 10 families in the country protected by old-age and survivors insurance, few of the paternal orphans in the future will be without an insurance benefit. Aid to dependent children is thus becoming more and more a program meeting need created by the absence of a parent from the home or by a parent's disability.

In February 1956, 32,600 families received payments under both the program of aid to dependent children and the insurance program. About 80 percent of these families were receiving insurance benefits based on the wage record of a father who had died, and for 17 percent eligibility for benefits was on the basis of an aged retired father's wage record. Three percent were receiving benefits on the basis of the wage record of a deceased mother.

As the insurance program has expanded, the proportion of beneficiary families receiving aid to dependent children has declined. About 8.3 percent of the beneficiary families received aid to dependent children in September 1950; in early 1956 the proportion was down to 4.6 percent. The proportion of assistance families who were receiving insurance bene-

Table 4.—Concurrent receipt of OASI benefits and assistance payments by OAA recipients and ADC cases, February 1956<sup>1</sup>

State <sup>2</sup>	Persons receiving OAA and OASI as percent of—		Cases receiving ADC and OASI—	
	OAA recipients	OASI beneficiaries	Families as percent of ADC families	Children as percent of OASI child beneficiaries <sup>3</sup>
Total, 53 States.....	20.4	8.0	5.3	7.0
Alabama.....	10.4	13.2	4.4	7.7
Alaska.....	34.3	23.3	9.2	27.1
Arizona.....	23.8	12.6	5.5	6.7
Arkansas.....	6.5	6.6	5.1	7.3
California.....	39.3	19.5	5.5	7.8
Colorado.....	29.5	26.6	4.0	6.0
Connecticut.....	34.7	4.9	6.5	5.8
Delaware.....	16.0	1.7	3.5	4.9
District of Columbia.....	22.1	2.8	4.2	6.7
Florida.....	25.1	9.6	6.9	12.6
Georgia.....	9.1	11.5	7.8	9.2
Hawaii.....	14.9	2.1	3.0	6.9
Idaho.....	24.1	9.7	6.3	6.3
Illinois.....	20.5	4.7	4.6	5.0
Indiana.....	18.8	3.5	9.1	6.9
Iowa.....	18.4	6.9	8.6	9.7
Kansas.....	17.2	7.6	7.1	6.1
Kentucky.....	10.3	6.1	9.9	17.2
Louisiana.....	20.3	38.6	4.3	9.1
Maine.....	28.0	6.2	12.5	14.8
Maryland.....	18.9	2.2	3.0	3.2
Massachusetts.....	37.3	11.2	7.2	6.9
Michigan.....	24.6	6.4	7.7	7.6
Minnesota.....	19.1	8.1	9.1	10.4
Mississippi.....	6.9	12.1	4.8	10.0
Missouri.....	23.7	17.6	6.6	10.3
Montana.....	23.5	9.2	7.2	5.9
Nebraska.....	17.1	6.0	5.9	5.3
Nevada.....	43.2	18.3	6.5	4.6
New Hampshire.....	26.3	4.6	10.3	5.3
New Jersey.....	23.7	1.8	6.5	3.1
New Mexico.....	8.1	5.7	4.4	11.7
New York.....	26.7	3.4	2.7	4.1
North Carolina.....	8.1	4.8	4.8	7.0
North Dakota.....	12.6	8.0	7.3	12.5
Ohio.....	22.2	5.7	9.0	6.3
Oklahoma.....	16.4	22.9	5.7	12.4
Oregon.....	30.9	6.8	7.5	5.0
Pennsylvania.....	17.4	1.7	3.8	4.0
Rhode Island.....	34.7	5.8	3.1	5.4
South Carolina.....	5.9	6.3	3.1	3.4
South Dakota.....	14.0	7.8	6.3	13.0
Tennessee.....	7.6	5.7	6.1	10.5
Texas.....	13.3	15.1	6.4	6.2
Utah.....	19.5	8.3	9.4	8.0
Vermont.....	28.2	9.8	12.9	11.7
Virginia.....	5.3	.9	4.1	3.9
Washington.....	31.9	14.6	6.9	6.5
West Virginia.....	4.9	1.5	2.5	5.2
Wisconsin.....	23.2	5.9	9.6	8.0
Wyoming.....	27.1	12.0	7.5	5.2

<sup>1</sup> March data for ADC for Arizona, California, Delaware, the District of Columbia, Maine, Massachusetts, Michigan, Minnesota, Montana, New Hampshire, New Jersey, New Mexico, New York (except for New York City, which reported January data), North Carolina, Pennsylvania, Rhode Island, South Dakota, Utah, Virginia, and Wisconsin;

May data for Illinois; November 1955 data for Ohio. <sup>2</sup> Puerto Rico and the Virgin Islands are not shown because they did not report any cases receiving both assistance payments and insurance benefits.

<sup>3</sup> Data given in terms of children because OASI data on beneficiary families are not available by State.

fits rose slightly from September 1950 to February 1954, from 4.9 percent to 5.9 percent. After dropping to 5.2 percent in February 1955, there was again a slight increase, to 5.3 percent, in February 1956.

The families receiving both types of payments were generally larger than other families receiving only survivor benefits or only assistance payments. Although fewer than 5 percent of the beneficiary families

with children were receiving assistance in February 1956, the children in these families represented 7 percent of all child beneficiaries (table 4). Because of the overall maximum on family benefits written into the Social Security Act, large families are more likely to need supplementation of the old-age and survivors insurance benefits than are those with fewer children.

The causes that underlie State var-

iations in the proportion of old-age assistance recipients getting old-age and survivors insurance benefits—the extent of insurance coverage and differences in assistance policies—operate also in the program of aid to dependent children. Variations among the States in the proportion of families receiving this type of aid because the father is dead also affect the proportion of beneficiary families receiving assistance.

### Effect of OASI on Assistance Costs

The old-age and survivors insurance program has reduced caseloads and costs in assistance by providing income to large numbers of aged persons and to a substantial proportion of the Nation's paternal orphans.

In February 1956, 25 percent of all aged persons in the population who were not insurance beneficiaries received old-age assistance payments but only 8 percent of the aged beneficiaries of old-age and survivors insurance received old-age assistance to supplement their incomes. These percentages clearly indicate that a significantly larger number of aged persons would be in need of public assistance if they were not receiving insurance benefits.

Because all income and resources of the recipient are taken into account in determining the amount of his need, assistance payments to persons receiving old-age and survivors insurance benefits are, on the average, 20 percent lower than payments to recipients of old-age assistance

alone. In February 1956 the average old-age assistance payment for recipients with both types of payments was \$44.74, compared with \$56.39 for those not getting insurance benefits. These amounts represented an average increase from the preceding February of \$3.82 for beneficiary-recipients and \$2.19 for other recipients. Approximately one-sixth of all old-age assistance payments, or somewhat more than \$23 million, was paid to aged beneficiaries as a supplement to their insurance payment.

In February 1956 the average insurance benefit received by aged persons getting both assistance payments and insurance benefits was \$38.70 or about 70 percent of the average benefit to all aged beneficiaries. This amount was virtually the same as that a year earlier.

Payments of aid to dependent children for February 1956 to families including one or more insurance beneficiaries amounted to \$2.2 million or 4.1 percent of the total amount paid to families under the assistance program. Because the number of families with insurance benefits is increasing, relatively fewer families in which the father has died need assistance, and relatively less assistance goes to families receiving benefits than to other families. The average assistance payment to families receiving both types of payments was \$68.98, compared with \$90.75 for families not receiving insurance benefits. The average increase in assistance payments from the preceding February was smaller for bene-

ficiary families than for nonbeneficiary families—\$2.27 compared with \$3.58.

The average benefit paid to beneficiary families receiving assistance was \$63.43 in February 1956 or \$1.00 less than it had been a year earlier. For all survivor families consisting of widows and children the average old-age and survivors insurance benefit was \$121.60, or almost twice that received by those who were also receiving aid to dependent children.

### Future Trends

The full impact on public assistance of the old-age and survivors insurance program will become more apparent in the future. With the insurance program extended to practically all gainfully employed persons, including farmers and farm workers, the old-age assistance program will become predominantly a program supplying necessary supplementary cash payments to old-age and survivors insurance beneficiaries whose benefits do not meet all their needs and financial aid to persons who have high medical care costs or other special needs. The growth of the old-age and survivors insurance program, accelerated by the 1954 and 1956 amendments, will, however, decrease the need for public assistance for many persons. It may be said that in the not too distant future, aid to dependent children will be almost wholly confined to meeting need arising from causes other than death—from the disability or absence of the father from the home.

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## Notes and Brief Reports

### Age and Sex of Persons Concurrently Receiving OASI and OAA \*

Once a year the States make a sample study of public assistance recipients to determine the effect of the old-age and survivors insurance program on public assistance. Data are obtained on the number of old-age assistance recipients who are also

receiving old-age and survivors insurance benefits, and similar data are collected for the program of aid to dependent children.<sup>1</sup>

Among the population aged 65 and over, the latest available data—for February 1956—indicate that the number receiving both old-age and survivors insurance benefits and old-age assistance payments represents

20.4 percent of all old-age assistance recipients and, conversely, 8.1 percent<sup>2</sup> of all aged beneficiaries of old-age and survivors insurance. Study of these ratios for recent years indicates a slightly downward trend for the proportion of aged insurance beneficiaries receiving old-age assistance and a marked upward trend in the ratio of assistance recipients receiving old-age and survivors insurance. It is likely that these trends

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<sup>2</sup> Because certain adjustments were possible only in the national data, used here, the percentage is slightly higher than that shown in the article cited.

\* Prepared by Robert J. Myers, Chief Actuary, Social Security Administration.

<sup>1</sup> See Sue Ossman, "Concurrent Receipt of Public Assistance and Old-Age and Survivors Insurance," pages 11-16 of this issue.