



# Changes in the Composition of Disability Insurance Applicants and Recipients in the Wake of the Coronavirus Epidemic

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The COVID-19 pandemic represents a major health and economic shock to Americans' well-being that may have profound implications for Social Security program participation. The pandemic disrupted the economy through early job loss, generous unemployment and stimulus benefits, and an unprecedented ability to work from home. More than 600,000 Americans have died from COVID-19, and many others have had necessary medical care delayed.

The implications of COVID-19 for the long-term demand for Social Security disability benefit programs are unclear. In the first nine months following the pandemic, applications for Disability Insurance and Supplemental Security Income dropped, with claiming rates averaging 3.8 fewer applications per 100,000 eligible Americans. It is unknown whether this is due to improvements in work capacity due to tele-

work, crowd out from stimulus payments and unemployment benefits, or difficulties applying for benefits when local Social Security offices were closed. This project looks at changes in the composition of Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) applicants and recipient death rates during the first nine months of the COVID-19 pandemic.

Administrative data from the Social Security Administration spanning 2015 to 2020 are analyzed to assess breaks in trends relative to what would be expected if COVID-19 had not occurred. During the pandemic's first nine months, disability insurance applicants became younger on average by 0.51 years for SSI, 0.73 for SSDI, and 0.44 for concurrent, all representing drops of more than 10%. There were no consistent patterns in underlying impairments for the

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major disease categories, but modest increases in the share of applicants falling into the “all other impairments” category for all types of disability benefit applications. Disability recipients experienced higher than average mortality rates during the pandemic’s first nine months. The increase in mortality was smallest for concurrent recipients in relative terms (0.26 deaths per 1,000; 15%) and largest for SSI recipients (0.13 per 1,000; 24%). There was little evidence

that differences in telework or pandemic severity across regions contributed to differences in applicant characteristics or beneficiary death rates.

It will be important to continue monitoring trends in the composition of applicant and recipient characteristics through the delta and omicron variants and concurrent removal of state and federal income support programs. ❖

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