

Module 1 – Supporting Increased Employment and Financial Independence Outcomes for Social Security Disability Beneficiaries

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Module 1 – Supporting Increased Employment and Financial Independence Outcomes for Social Security Disability Beneficiaries

Introduction

The primary objective of WIPA services is to assist Social Security beneficiaries with the transition from dependence on public benefits to paid employment and greater financial independence. To actively promote employment outcomes, CWICs must have a solid understanding of Social Security's Ticket to Work program and various other work incentives, as well as the full array of vocational services available to individuals with disabilities. While you must be able to help beneficiaries understand the potential effect of certain employment outcomes on their benefits, you must also be proficient at connecting beneficiaries with the specific services and supports they need to obtain and maintain paid employment.

The content in this module begins by discussing the CWIC's role in promoting employment and increased financial stability for Social Security beneficiaries with disabilities and in establishing functional collaborative partnerships with the community. In the second unit, we provide an overview of Social Security's efforts to promote employment and increase financial independence for disability beneficiaries. The content in Unit 3 focuses on services available from various entities such as:

- State Vocational Rehabilitation Agencies (SVRA);
- Employment Networks (ENs) under the Ticket to Work program;
- State of local Workforce Investment Boards (WIB) and American Job Centers (AJCs);
- State local Intellectual/Developmental Disability (ID/DD) agencies;
- State local mental health, chemical dependency, or substance abuse agencies;

- Centers for Independent Living (CILs);
- State Protection and Advocacy (P&A) agencies;
- Public school systems;
- U.S. Department of Veteran’s Affairs (VA); and
- Agencies administering Individual Development Accounts (IDAs) or Asset Development Services.

CWIC Core Competencies

- Describes recent governmental efforts to increase community-based paid employment outcomes for people with even the most significant disabilities and current best practices in employment services and supports for persons with disabilities.
- Demonstrates knowledge of current Social Security efforts to promote employment and increase financial independence for disability beneficiaries, including the Ticket to Work and Self-Sufficiency Program, Social Security/Vocational Rehabilitation Reimbursement program, Work Incentives Planning and Assistance (WIPA) program, Protection and Advocacy for Beneficiaries of Social Security (PABSS) program, and demonstration projects sponsored by Social Security or other federal agencies operating in the service area.
- Describes to beneficiaries their rights and opportunities under Sections 503 and 504 of the Rehabilitation Act, the Americans with Disabilities Act (ADA), federal Schedule A employment, and other programs that provide protections to job seekers and employees with disabilities.
- Demonstrates knowledge of state VR agencies, American Job Centers, and other public or private programs that fund or provide employment services for Social Security disability beneficiaries, including the local employment services and supports available to assist Social Security beneficiaries in choosing, planning, securing, and maintaining employment over time.

Competency Unit 1 – WIPA is all about WORK! Understanding the CWIC’s Role in Promoting Employment and Enhancing Financial Stability

Understanding the Problem – The Relationship between Poverty and Disability

Unfortunately, in the United States, poverty and disability go hand in hand. A number of recent studies have uncovered the following disturbing statistics:

- In the United States in 2017, the **poverty rate of working-age people with disabilities was 26.1 percent** (<http://www.disabilitystatistics.org/reports/acs.cfm?statistic=7>).
- Almost half of working-age adults who experience income poverty for at least a 12-month period have one or more disabilities.
- Nearly two-thirds of working-age adults who experience consistent income poverty — more than 36 months of income poverty during a 48-month period — have one or more disabilities.
- People with disabilities are also much more likely to experience material hardships — such as food insecurity; inability to pay rent, mortgage, and utilities; or not being able to get needed medical care — than people without disabilities at the same income levels. The same goes for families caring for a child with a disability.
- In addition to income poverty, individuals with disabilities are also nearly twice as likely to lack even modest precautionary savings in case of an unexpected expense or other financial shock. Seventy percent of individuals with disabilities responded

that they “certainly” or “probably” could not come up with \$2,000 to meet an unexpected expense, compared to 37 percent of individuals without disabilities. More than 50 percent of individuals with disabilities are “unbanked” with no access to financial services such as checking, savings, credit, and other opportunities. (See **Disability Is a Cause and Consequence of Poverty** at <http://talkpoverty.org/2014/09/19/disability-cause-consequence-poverty/>)

When we restrict our analysis to beneficiaries of the Social Security disability programs, the relationship of poverty and disability becomes even more distressing. Consider these facts:

- Approximately six million beneficiaries, more than 70 percent of Supplemental Security Income (SSI) beneficiaries, and 30 percent of Social Security Disability (SSDI) beneficiaries, are currently living below the federal poverty level.
- The average SSI benefit of \$577 per month (September 2020) is only 54.3 percent of the 2020 federal poverty level for a family of one. The maximum federal SSI payment of \$783 (in 2020) is 73.6 percent of the 2020 federal poverty limit for a family of one.
- The average SSDI monthly benefit of \$1,396 (September 2020) is only 131 percent of the 2020 federal poverty level for a family of one.

Social Security’s Monthly Statistical Snapshot for September 2020 found online
(https://www.ssa.gov/policy/docs/quickfacts/stat_snapshot/).

Social Security’s SSI Monthly Statistics for September 2020 found online
(https://www.ssa.gov/policy/docs/statcomps/ssi_monthly/index.html).

A major cause of poverty and material hardship among Social Security disability beneficiaries continues to be the low rates of employment within the population. A study conducted by Social Security in 2015 using 2011 data found that a relatively low percentage of disability program beneficiaries in current-pay status in December 2010 worked in calendar year 2011: 11.4 percent of SSDI-only beneficiaries, 5.4 percent of SSI-only recipients, and 6.9 percent of concurrent beneficiaries (individuals

who receive both SSDI and SSI) were employed (defined as earning \$1,000 or more in the year). In addition, the study found that among beneficiaries who were employed in 2011, about three-quarters of SSDI-only and SSI-only beneficiaries and about eight-in-nine concurrent beneficiaries earned less than \$10,000 in the year. Only a small fraction of beneficiaries earned more than the annualized Substantial Gainful Activity (SGA) level for that year (\$12,000 in 2011). Only 2.2 percent of the SSDI-only beneficiaries had earnings above that level in 2011, as did 0.8 percent of SSI-only recipients and 0.5 percent of concurrent beneficiaries. This level of earnings remains below the federal poverty guidelines and does little to move beneficiaries toward financial stability. ([Employment, Earnings, and Primary Impairments among Beneficiaries of Social Security Disability Programs](https://www.ssa.gov/policy/docs/ssb/v75n2/v75n2p19.html), 2015 found online at <https://www.ssa.gov/policy/docs/ssb/v75n2/v75n2p19.html>).

Breaking the Connection between Poverty and Disability – Work Incentives Planning and Assistance as Part of the Solution

Given the dismal statistics cited above, we still have a great deal of work to do to help Americans with disabilities avoid lives of poverty and hardship. The Work Incentives Planning and Assistance (WIPA) program is an important part of our national effort to break the connection between poverty and disability as it seeks to promote employment among Social Security disability beneficiaries. However, it's important to understand that the WIPA program has a more comprehensive mission than simply helping disability beneficiaries get jobs. The larger goal of this national initiative is to enhance the long-term financial stability and independence of those the program serves. The program can only achieve this when beneficiaries work at their highest employment potential and reap the greatest financial rewards possible from working. Employment is an important means to this end — not the end in and of itself.

IMPORTANT: Social Security describes the mission of the national WIPA program as promoting employment and increasing financial stability among Social Security disability beneficiaries. The specific goals of the service are to:

- Increase the number of Social Security disability beneficiaries who engage in paid employment or self-employment;
- Support beneficiaries in successfully maintaining employment (or self-employment) over time;
- Provide accurate and timely work incentives planning and assistance services that enable beneficiaries to increase their earnings capacity over time and maximize the financial benefit of working;
- Reduce beneficiary dependence on Social Security disability benefits and other income support programs; and
- Increase the financial independence and stability of beneficiaries through self-sustaining employment, asset development, and improved management of fiscal resources.

The Financial Stability Paradigm for Delivering WIPA Services

Achieving financial stability is the ultimate goal of WIPA services and drives all of the work that WIPA project personnel perform. In the context of WIPA services, financial stability means:

- Having earnings sufficient to avoid lifelong poverty, and reduce or eliminate dependence on Social Security disability benefits and other income support programs;
- Being able to meet basic expenses, including paying rent or mortgage, paying utility bills, obtaining food and nutrition, and meeting health care needs;
- Earning income sufficient to live independently and pursue a chosen lifestyle, including social, recreational, educational, or other activities;
- Obtaining and maintaining employment that meets the individual's economic and personal goals, provides employer-sponsored fringe benefits, and offers opportunities for long-term security or advancement;

- Having the ability to manage one's own finances, access bank and credit services, reduce or eliminate debt, save for the future, and access the information and support necessary to make sound financial decisions and long-term financial plans; and
- Managing one's own Social Security benefits or other federal and state benefits, including monitoring the use of work incentives and reporting earnings to benefit programs.

A beneficiary seeking WIPA services may have never had the opportunity to explore what financial stability means, given his or her unique life circumstances and family situation. For some beneficiaries, the concept of financial stability may seem completely unrealistic, unattainable, or overwhelming. By engaging in discussions about financial independence, WIPA personnel (known as Community Work Incentives Coordinators or CWICs) provide beneficiaries with new knowledge and choices they never knew they had. WIPA counseling can present beneficiaries with an entirely new vision of economic independence with employment as the primary vehicle for achieving that vision.

What are WIPA Services?

While the mission of the WIPA program is to promote employment and enhance financial stability, the primary function of WIPA services is to provide beneficiaries with accurate and complete information about work incentives programs designed to support their efforts to obtain, retain, or enhance employment. WIPA services involve the following distinct components:

Outreach:

Outreach is the process of marketing WIPA services to beneficiaries, local agencies, and other stakeholders. Outreach activity includes, but isn't limited to, describing WIPA services prominently on the organization's website; engaging in dialogue with local and state service providers to increase WIPA referrals; and meeting with diverse audiences to describe WIPA services. Social Security directs WIPA projects to target outreach efforts to reach underserved populations such as transition-aged youth, veterans, Native Americans, and other racial, ethnic, disability, and socioeconomically disadvantaged or minority populations. Social Security requires WIPA projects to limit time spent on outreach activity to no more

than 10 percent of their total funding or work effort on outreach
Detailed information about outreach in the WIPA program is contained in
Module 2, Unit 1.

Screening Requests for Services to Establish Eligibility and Priority for WIPA Services:

Social Security expects WIPA projects to provide the bulk of services to eligible, high-priority beneficiaries. This includes individuals who are employed (or engaged in self-employment), actively seeking employment, or otherwise preparing for employment. Not everyone who contacts a WIPA provider will meet the program eligibility criteria, nor will the WIPA provider consider him or her a high priority for individualized services. Because of this, WIPA projects need to establish methods for screening initial contacts and conducting triage.

Providing Information and Referral (I&R) Services:

CWICs work with each beneficiary to determine his or her need and then provide the specific information and/or necessary service referrals to meet those needs. I&R services involve explaining how various complex systems work and providing support to successfully navigate those systems. This applies to the Social Security disability benefits, public and private health care, and the employment services system, as well as a large number of other income support and community service programs (housing, transportation, advocacy, financial services, etc.). In the WIPA program, some beneficiary's situations do not meet the definition of high priority for individualized work incentives counseling. These beneficiaries will usually receive short term I&R services; typically delivered in one or two phone or email contacts. Beneficiaries requiring individualized WIPA services receive ongoing I&R services as part of their customized work incentives analysis and advisement. Unit 2 of Module 6 provides detailed information about providing I&R within the WIPA program.

Information Gathering and Benefits Verification:

All Community Work Incentives Coordinators (CWIC) providing individualized WIPA services must gather a comprehensive set of information from the beneficiary before analysis and counseling begin. This information includes contact information, basic demographics, benefits received, future plans or goals with regard to employment, past work since entitlement, and a variety of other data based on the unique

needs and circumstances of the individual. WIPA projects must complete a thorough benefits verification process to ensure that all information is correct, complete, and current. CWICs use this information to provide customized benefits analysis and work incentives counseling. Detailed information about this function is available in Module 6, Unit 3.

Providing Individualized Work Incentives Planning and Assistance:

This is the cornerstone of WIPA services and includes the following services:

- In-depth personalized benefits analysis covering all federal, state, and local benefits;
- Customized counseling about the effect of work on all federal, state, and local benefits and development of a comprehensive Benefits Summary & Analysis (BS&A) report;
- Assistance with identifying, developing, utilizing, and managing work incentives;
- Assistance with resolving problems related to benefits;
- Assistance with identifying and resolving barriers to obtaining or maintaining employment;
- Making referrals for needed services or supports with particular emphasis on meeting employment needs;
- Coordination with members of the beneficiary's employment support team; and
- Training and support on effective reporting procedures and benefits management techniques;

We provide detailed information about individualized WIPA services in Module 6, Units 4 and 5.

Ongoing Proactive Follow-Up Services:

Many beneficiaries require ongoing contact from WIPA personnel to avoid or resolve benefits problems over time. In the WIPA program, ongoing follow-up is the act of implementing, or facilitating the implementation of, the Work Incentives Plan (WIP). The action steps included in the WIP determine the type, intensity, and duration of follow-up services. Each

beneficiary's plan is unique and details the exact supports WIPA personnel will provide and the timeline for contacts. Action steps detailed in the WIP may involve intense assistance for a short period of time or lower levels of support spread out over months or years. Some beneficiaries may require long-term work incentives management on a scheduled, continuous basis, allowing for the planning and providing supports at regular checkpoints, as well as critical transition points. Unit 5 of Module 6 provides a detailed discussion of WIPA follow-up services.

Important Themes within the WIPA Program

Social Security designed the WIPA program on a set of three core concepts or themes. These three concepts undergird the entire WIPA initiative and drive the services provided to Social Security disability beneficiaries.

1. WIPA is all about WORK!

The clear purpose of the WIPA program is to provide the specific work incentives planning and assistance services that will directly assist Social Security disability beneficiaries to succeed in their return-to-work efforts. This program requires CWICs to provide a base level of informational support to all eligible beneficiaries contacting the program and to take significant steps to make sure that individuals with all types of disabilities, from every type of diverse ethnic background, and from varying age groups and geographic locations are able to access and benefit from the WIPA program. The goal is to ensure that beneficiaries who desire to seek, secure, or maintain employment have access to accurate and complete information that will allow them to benefit from all the current work incentives available in the Social Security disability programs, as well as other federal, state, or local programs that may assist them in their employment efforts. Being a passive dispenser of work incentives information isn't sufficient to get the job done. CWICs must put information into action by providing direct assistance with applying work incentives and resolving issues related to benefits that create a barrier to employment.

The WIPA program places great emphasis on the analysis of available work incentives. Assisting beneficiaries in accessing these work incentives will aid in the overall employment plan and support him or her

in reaching their work goal. CWICs emphasize employment through the use of work incentives, and play a direct and active role in assisting beneficiaries to develop, monitor, and manage their work incentives effectively over time.

For CWICs, there is more to actively promoting employment outcomes than merely assisting beneficiaries with work incentives. To truly be effective in supporting beneficiaries in their efforts to attain paid work, CWICs must expand their counseling skills into areas not directly related to public benefits. These areas include the following:

- Helping beneficiaries determine what specific services and supports they may need to identify, select, or clarify their career goals;
- Helping beneficiaries determine what specific services, supports, or accommodations they may need to achieve the desired career goal;
- Explaining Social Security's Ticket to Work program and the full array of vocational services and supports available to individuals with disabilities in the local service area;
- Connecting beneficiaries with the specific services and supports they need to obtain and maintain paid employment; and
- Assisting beneficiaries with disabilities to resolve problems related to work efforts, higher education, occupational skills training, and work attainment or continuation of work.

We provide detailed information about how WIPA personnel work with beneficiaries to promote employment in Unit 3 of Module 6.

2. WIPA Services are Based on Collaborative Partnerships

Social Security has designed WIPA services as a critical component of the agency's comprehensive approach to assisting beneficiaries to achieve their employment and financial independence goals. In the WIPA service paradigm, CWICs are an essential partner on the employment service team. They play an active and direct role in supporting the long-term employment process. This includes providing information, guidance, and direct assistance in the vocational planning process and job development

effort as well as in planning for and leveraging resources to meet the employment support needs of beneficiaries.

In particular, the WIPA program requires CWICs to be directly involved in the implementation of Social Security's Ticket to Work program. Social Security requires CWICs to screen and refer beneficiaries with disabilities to appropriate Employment Networks (ENs) based on the beneficiary's expressed needs and types of impairments. As a result of this requirement, CWICs must have a comprehensive knowledge of the current employment service system for youth and adults with disabilities, and knowledge of the vocational assessment and planning process local employment agencies use, and be fully aware of the referral, eligibility, program planning, and service delivery approaches employment service agencies in their local community use.

CWICs must also understand that Social Security is an essential partner in the providing WIPA services. It's impossible for CWICs to provide effective work incentives planning and assistance services without interacting with local Social Security offices and personnel. For WIPA projects to work collaboratively with Social Security, WIPA personnel need a general understanding of how this agency functions and what the various players do. The most effective CWICs maintain close relationships with their local Social Security offices, regional PASS (Plan to Achieve Self- Support) Cadres, and the Area Work Incentive Coordinator (AWIC). Locally, CWICs can establish important working relationships for reporting protocols with Claims Specialists and Work Incentive Liaisons (WILs). We provide specific information on how CWICs should work with these Social Security employees to help support beneficiaries in achieving their employment goals in Unit 2 of Module 2.

Social Security also requires WIPA projects to develop collaborative working relationships with other community agencies and make referrals to community agencies for employment services. The program recognizes that to truly support the work efforts of beneficiaries, these services must integrate with other employment services and support services available to the beneficiary in the local community. Developing, managing, and maintaining effective collaborations with multiple organizations providing employment and employment support services are essential to the success of the national WIPA initiative. Critical employment support partner agencies for the WIPA projects include state VR agencies, American Job Centers (AJCs), ENs, state education agencies

and local public school systems, mental health providers, and other community rehabilitation service agencies.

CWICs assume an important role in helping beneficiaries plan for employment and access the services and supports needed to make employment possible. This emphasis on return to work and employment outcomes requires that CWICs not only understand in great detail the array of employment services and resources in the community but that they effectively partner and maintain strong working relationships with these agencies over time to support the work goals of beneficiaries.

To build strong working partnerships with local agencies providing services and supports, CWICs should focus on:

- Communicating directly with multiple agencies or organizations to build a more comprehensive understanding of their missions, eligibility rules, policies and procedures, and the services or supports they provide;
- Educating the employment service or support community on the purpose and role of WIPA in directly supporting the return-to-work and employment efforts of beneficiaries;
- Identifying, developing, and implementing formalized strategies and processes for joint employment and work incentive or support planning for beneficiaries;
- Implementing strategies to build general knowledge of the use of available work incentives to provide access to an array of employment services and supports, and incorporate these incentives into existing vocational planning, job development, and employment support efforts; and
- Maintaining and enhancing collaborative work with agencies or organizations by continuously assessing the effectiveness and quality of outcomes for beneficiaries.

3. WIPA Services are Ongoing

Social Security intends WIPA services to be proactive and expects CWICs to follow up with high priority beneficiaries as needed throughout the entire process of preparing for employment, obtaining employment, and maintaining employment. CWICs not only provide initial planning and counseling services, but monitor and actively work with beneficiaries at

key employment and work incentives transition points to ensure that they update information, analyses, employment, and work incentive plans to meet the changing needs and goals of each beneficiary.

The long-term nature of WIPA services creates many expectations for CWICs. This “case management” approach to service delivery anticipates that they will develop a defined caseload of beneficiaries for whom they will provide individualized, intensive, on-going services that will include:

- Individualized benefits analysis and counseling;
- Identification of relevant work incentives that will promote employment goals;
- Assistance in the development of a comprehensive Work Incentives Plan;
- Identification of employment supports or resources;
- Referral to appropriate employment support services; and
- Continuous updating of the Work Incentives Plan as an individual’s benefits, health care, and financial status change over time.

Because WIPA services target beneficiaries who are employed or progressing toward employment, CWICs need to proactively monitor the beneficiaries’ use of work incentives over time. This includes developing “contact systems” that will help beneficiaries detect potential problems before they occur. In addition, CWICs assist beneficiaries to obtain work supports from other agencies including preparing documentation or making phone calls in conjunction with the beneficiary to agencies such as the Public Housing Authority, Medicaid, or Vocational Rehabilitation.

Conclusion

The most important thing for CWICs to remember as they perform their jobs is that WIPA is all about WORK! When counseling beneficiaries, promoting employment and enhancing financial stability must stay solidly front and center. Supporting employment is the guiding principle that directs all their actions.

The determination, knowledge, experience, and focus of CWICs will be a deciding factor in the battle to enhance employment outcomes for persons with disabilities.

Conducting Independent Research

2015 WIPA Request for Application and other supporting materials

(<https://www.socialsecurity.gov/oag/grants/wipa-15-001/index.html>)

Information about WIPA services on Social Security's website

(<https://www.ssa.gov/work/WIPA.html>)

PowerPoint presentation describing the WIPA program

(<https://vcu-ntdc.org/resources/viewContent.cfm?contentID=194>)

Competency Unit 2 – Past and Current Social Security Efforts to Promote Employment for Disability Beneficiaries

Statement of the Problem – Growth of the Social Security Disability Programs

Supplemental Security Income (SSI) and the Social Security Disability programs authorized under Title II of the Social Security Act (SSDI, CDB, and DWB) are currently the largest federal programs providing cash payments to people with disabilities. In August 2020, more than 9.7 million people received Social Security benefits based on disability, and more than 4.6 million adults ages 18-64 received SSI due to blindness or disability. An additional 1.5 million people received both Social Security and SSI due to disability. This represents more than 15 million people across all programs ([Social Security Annual Statistical Supplement 2019](https://www.ssa.gov/policy/docs/statcomps/supplement/index.html) found online

<https://www.ssa.gov/policy/docs/statcomps/supplement/index.html>).

The steady growth pattern of the DI and SSI rolls seen over the past decade isn't a new phenomenon. As early as 1994, the General Accountability Office (GAO) was investigating the growth in Social Security's disability programs. In a study released in February 1994, the GAO reported that in the three years between 1989 and 1992, DI applications rose by a third, and almost half the applicants in 1992 succeeded in obtaining benefits. The GAO also found that once on the rolls, beneficiaries were staying longer. Between 1985 and 1992, the number of beneficiaries who had been on the rolls more than 15 years grew by an alarming 93 percent. In addition, while the total number of DI terminations continues to increase as the rolls swell, termination rates as a percentage of those on the rolls have steadily declined.

Terminations from the DI program averaged approximately 12 percent during the 1988-89 time period, but stood at only 9.5 percent by 1994. Social Security research concluded that termination rates were declining for three main reasons: First, the younger average age of beneficiaries

over the last 10 to 15 years has led to a lower number of conversions to retirement and terminations due to death. Secondly, the decline in the number and rate of medical continuing disability reviews (CDRs) has been a significant problem (Social Security Bulletin, 1996). Finally, terminations from the disability programs due to employment are almost non-existent. Social Security statistics cited in a 2003 GAO report estimate that less than one of every 500 DI beneficiaries has left the rolls by returning to work.

Social Security and disability policy makers across the country are concerned about the expansion of the disability programs and the poor employment rates of adults with disabilities. Too often, society has perceived this alarming growth of the Social Security disability rolls as Social Security's problem to solve in isolation, when in fact it's a larger societal problem with myriad complex causes. Many people with disabilities receive Social Security disability benefits as merely the last stop on a long journey from the point of disability onset to the point at which their disability is so severe that self-sustaining work is no longer possible. All along this journey, beneficiaries encounter the policies and practices of the other systems involved in disability and employment issues. When these systems fail to stem a person's movement onto the disability rolls, or work at cross purposes with one another to prevent successful employment retention or return to work, the Social Security disability system bears the eventual brunt of this failure. Ultimately, however, all U.S. citizens bear the costs associated with having so many Americans leaving the productive workforce to lead lives of dependency on federal disability benefits.

Any meaningful effort to slow down or reverse this long-term increase in federal disability benefits will require significant and sustained collaboration and coordination between the Social Security Administration and the other federal agencies with a stake in developing disability and employment policy. Over the past two decades, Social Security has made a concerted effort to promote employment for disability beneficiaries by improving its own internal policies and practices as well as by partnering with other federal agencies. This unit will provide an overview of these efforts within the following areas:

- Public Healthcare Systems
- Vocational Rehabilitation System

- National Employment and Training System
- Public Education Systems
- Internal Changes Social Security has Made to Promote Employment

Collaborative Efforts Involving Public Health Care Systems

One of the most commonly cited reasons Social Security disability beneficiaries offer for not engaging in work activity is the perceived risk of losing health care benefits. For individuals with disabilities who may have significant health care needs or high costs, the thought of losing health care coverage can be particularly frightening. Health insurance considerations are also of paramount importance when beneficiaries make decisions about continuing to work versus applying for disability benefits. The desperate search for affordable health insurance fuels the increased SSI/DI application rates as it simultaneously diminishes the rates of termination due to employment. Social Security is well aware that health care concerns may represent the single most salient factor contributing to increasing rates of dependency on federal disability benefits and depressed rates of competitive employment for individuals with disabilities. For Social Security to make progress in promoting employment for beneficiaries with disabilities, it must partner with the public health care systems of Medicaid and Medicare to decrease employment disincentives. Some of the collaborative efforts Social Security has been involved with to date in this regard are described in the following sections.

Medicaid Initiatives

Over the past 25 years, Social Security has made a significant effort to reduce the employment disincentives related to loss of Medicaid coverage. In 1987, Social Security, in collaboration with the Centers for Medicare and Medicaid Services (CMS), implemented the 1619(b) extended Medicaid coverage for SSI recipients who work. This provision provides continued Medicaid coverage for individuals whose incomes are too high to qualify for an SSI cash payment, but aren't high enough to offset the loss of Medicaid or publicly funded attendant care. It allows Social Security to disregard earned income when determining Medicaid

eligibility up to the state's designated threshold amount. This one provision is arguably the most powerful work incentive in the SSI program.

Social Security has also worked in close partnership with CMS to expand Medicaid Buy-in programs for individuals with disabilities who work. The Ticket to Work and Work Incentives Improvement Act of 1999 (legislation.L.106-170) included two key provisions designed to expand authority originally granted to states under the 1997 Balanced Budget Act (BBA) to provide Medicaid coverage to working people with disabilities. The first of these is the Medicaid Buy-in program. Both the BBA and the Ticket legislation authorized states to require beneficiaries to pay small premiums for this coverage. The various programs target individuals who otherwise wouldn't qualify for Medicaid coverage because their earnings or personal assets exceed established thresholds. Under the Ticket legislation, states have considerable flexibility in terms of establishing resource and income limits for working individuals with disabilities between the ages of 16-64. In addition, states can make the Medicaid Buy-in program available to individuals who may no longer meet Social Security medical criteria for disability.

In addition to the Medicaid Buy-in program, Section 203 of the Ticket legislation created a grant program through the Department of Health and Human Services (DHHS) that would encourage and support states in the development of a buy-in program. These grants, termed Medicaid Infrastructure Grants (MIG), permitted states considerable freedom to address a variety of work incentive issues in their state systems. State eligibility for MIG grants was based to a large extent on the state's willingness to provide personal assistance services to employed individuals with disabilities. Funding for the Medicaid Infrastructure Grants ended in 2012.

Medicare Initiatives

Once again, Social Security has actively engaged CMS in developing solutions to the problem of beneficiaries fearing the loss of Medicare coverage due to paid employment. With the passage of the Ticket legislation in 1999, Congress expanded the Extended Period of Medicare Coverage (EPMC). This covers beneficiaries who still have a disability and lose cash benefits due to work. For these beneficiaries, free Medicare Part A continues for a minimum of 93 months after the end of the Trial

Work Period (TWP). In many instances, Medicare coverage may extend well beyond 93 months.

In addition, Social Security and CMS worked to create help for beneficiaries who buy into Medicare called Qualified Disabled and Working Individuals (QDWI). This provision allows eligible individuals to get help with purchasing Medicare Part A if they lost premium free Medicare benefits due to return to work at a substantial level. To be eligible for QDWI, an individual must have countable income below 200% of the Federal Poverty Level (FPL) and countable resources that do not exceed twice the current SSI resource limit. Eligibility for Medicaid benefits under the QDWI program is limited to payment of Medicare Part A premiums. Unit 2 of Module 4 provides more information about all of these important Medicare provisions.

Collaborative Efforts Involving the Vocational Rehabilitation System

The Social Security Administration has a long history of collaboration with the State Vocational Rehabilitation Agencies (SVRAs). Since 1981, Social Security has reimbursed SVRAs for services they provide to Social Security beneficiaries that result in specified employment outcomes. Social Security designed the Social Security VR Reimbursement Program to replace an earlier block grant program and improve outcomes and accountability. Under the VR Reimbursement program (prior to implementation of the Ticket to Work program), the State Disability Determination Service (DDS) applied a set of criteria to individuals awarded SSI or Title II disability benefits. DDS agencies subsequently referred individuals who appeared to be possible candidates for vocational rehabilitation (VR) to the state rehabilitation agency (SVRA). Social Security required beneficiaries selected for referral to the SVRA to participate in the VR program or risk benefit suspension. The program also allowed beneficiaries to apply for VR services on their own. The Ticket legislation repealed Social Security's authority to refer disability beneficiaries to SVRAs or alternate providers for VR services in Ticket states. This legislation also removed all sanctions for beneficiaries who refused VR services.

The Ticket to Work and the VR System

The passage of the Ticket to Work and Work Incentives Improvement Act of 1999 significantly changed the relationship between Social Security and the SVRAs. The purpose of the Ticket to Work program is to provide eligible beneficiaries with greater choice and control of the employment support services they need to assist them in obtaining employment or returning to work. Under the Ticket program, eligible beneficiaries may receive services from either an approved Employment Network (EN) or from the Vocational Rehabilitation (VR) agency. When a beneficiary assigns a Ticket, he or she works with the EN to develop an Individual Work Plan (IWP) or an Individualized Plan for Employment (IPE) with the SVRA. The IWP/IPE identifies the beneficiary's employment goals as well as the employment services and supports that the beneficiary will receive to achieve his or her employment goal. The SVRA may choose payment under the traditional cost reimbursement payment method or be paid by Social Security as an EN. For detailed information about the Ticket to Work Program, refer to Unit 10 of Module 3 in this manual.

The Substantial Gainful Activity (SGA) Project

The Substantial Gainful Activity (SGA) Project was a national project that attempted to build the capacity of the public Vocational Rehabilitation (VR) program to improve employment outcomes for individuals with disabilities receiving SSDI benefits. In 2014, the Institute for Community Inclusion (ICI) at the University of Massachusetts Boston, and its partner Mathematica Policy Research, Inc. received a five-year grant from the U.S. Department of Education, Rehabilitation Service Administration to study, test, and disseminate effective state VR agency practices for assisting VR customers collecting Social Security Disability Insurance (SSDI) to return to work at or above Substantial Gainful Activity (SGA) levels. The SGA Project generated a rigorously tested employment service-delivery model, manuals and processes for implementation, and adoption strategies, as well as cost analyses. The SGA project operated in Kentucky and Minnesota and ended in September 2017.

The project included four phases:

1. The identification of high-performing state VR agencies, leading to in-depth case studies of their practices;
2. The use of a Delphi Panel to review candidate practices and to design a VR employment services model that

enables SSDI recipients to return to employment at or above SGA;

3. Implementation, testing, and evaluation of the model in selected state VR agencies that will receive substantive training and technical assistance; and
4. Dissemination and replication, including the development of training materials, curricula, procedures, and on-demand technical assistance initiatives.

While Social Security didn't provide funds for the SGA Project, the agency is highly supportive of the U.S. Department of Education, Rehabilitation Service Administration in this important research effort. **Evaluation reports for the SGA Projects in Kentucky and Minnesota** are available at Mathematica's website (<https://www.mathematica-mpr.com/our-publications-and-findings/projects/substantial-gainful-activity-sga-project-demonstration>).

Collaborative Efforts Involving the State Protection and Advocacy Agencies – PABSS

In addition to the national WIPA program, the Ticket legislation also created a program called Protection & Advocacy for Beneficiaries of Social Security (PABSS). Beginning in 2000, Social Security awarded 57 grants to the designated Protection and Advocacy (P&A) systems in each of the 50 states, the District of Columbia, the U.S. Territories of American Samoa, Guam, Northern Mariana Islands, Puerto Rico, the Virgin Islands, and the P&A system for Native Americans. Social Security's P&A Program serves Title II disability beneficiaries and Supplemental Security Income (SSI) beneficiaries who want to work despite their continuing disabilities. The purpose of the PABSS program is to assist beneficiaries with disabilities in obtaining information and advice about vocational rehabilitation and employment services and to provide advocacy or related services that beneficiaries with disabilities may need to secure, maintain, or regain gainful employment.

Services offered by the PABSS include but aren't limited to:

- Securing services from community agencies, including employment networks providing services under the Ticket to Work program;
- Helping people who are entitled to benefits understand work incentives and issues with their disability benefits;
- Protecting beneficiaries' rights regarding conditions of employment;
- Helping beneficiaries understand and protect their employment rights, responsibilities, and reasonable accommodations under the Americans with Disabilities Act (ADA) and other applicable laws;
- Protecting rights to transportation;
- Protecting access to housing assistance; and
- Obtaining vocational rehabilitation and employment related services and supports.

For **more information and to locate state PABSS projects**, visit choosework.ssa.gov (<https://choosework.ssa.gov/findhelp/>).

Collaborative Efforts Involving the National Employment and Training System

Social Security has made a monumental effort to coordinate and collaborate with the U.S. Department of Labor's Employment and Training Administration (DOL ETA). The Workforce Investment Act (WIA) of 1998 initiated a major reorganization of the nation's employment programs intended to consolidate preparation and employment services into a unified system of support. Key to this reorganization, the Department of Labor created a national network of American Job Centers (formerly known as One-Stop Career Centers) throughout the United States and its territories to be a single place where job seekers can receive the services that they need to become employed or re-employed. Prior to the passage of WIA, formal interaction between Social Security and DOL was virtually non-existent.

The Workforce Investment Act significantly changed in July 2014 when President Barack Obama signed the Workforce Innovation and

Opportunity Act (WIOA) into law. WIOA is designed to help job seekers access employment, education, training, and support services to succeed in the labor market and to match employers with the skilled workers they need to compete in the global economy. Congress passed the Act by a wide bipartisan majority, and it's the first legislative reform of the public workforce system in the last 15 years.

Workforce Innovation and Opportunity Act (WIOA)

The enactment of WIOA made some significant reforms to the former WIA legislation as described below:

Requires States to Strategically Align Workforce Development Programs:

WIOA ensures that the core programs coordinate and complement employment and training so that job seekers acquire skills and credentials that meet employers' needs.

- Every state will develop and submit a four-year strategy — in the form of a single unified strategic plan for core programs — for preparing an educated and skilled workforce and meeting the workforce needs of employers.
- States can include other key partners in their plans such as Temporary Assistance for Needy Families (TANF) and Perkins career and technical education programs.

Promotes Accountability and Transparency:

WIOA ensures that federal investments in employment and training programs are evidence-based and data-driven, and accountable to participants and taxpayers.

- Core programs must report on common performance indicators that provide key employment information, such as how many workers entered and retained employment, their median wages, whether they attained a credentials, and their measurable skill gains.
- Core programs must measure the effectiveness of services to employers for the first time.

- DOL and DoE, with input from stakeholders, will establish a common performance accountability system for the core programs.
- Negotiated levels of performance for the common indicators will be adjusted based on a statistical model that takes into account economic conditions and participant characteristics.
- Performance reports for states, local areas, and eligible training providers will be publicly available.
- Independent third parties will evaluate programs at least every four years.

Fosters Regional Collaboration:

WIOA promotes alignment of workforce development programs with regional economic development strategies to meet the needs of local and regional employers.

- States will identify regions within their state.
- Local areas in regions will coordinate planning and service delivery strategies.

Improves the American Job Center (AJC) System:

WIOA increases the quality and accessibility of services that job seekers and employers receive at their local AJCs.

- States will establish criteria to certify AJCs at least every three years to ensure continuous improvement, access to services (including virtual access), and integrated service delivery for job seekers and employers.
- Key partners and services will be available at AJCs through the co-location of the Wagner-Peyser Employment Service and the addition of the TANF program as a mandatory partner.
- The workforce system will have a common identifier so workers that need employment or training services and employers that need qualified workers can easily find their local AJC.
- The Secretary of Labor, with input from a new advisory council, other Federal agencies, and states will develop and implement plans to improve the national workforce and labor market

information system and help job seekers make informed career choices.

- States and local areas are encouraged to improve customer service and program management by integrating intake, case management, and reporting systems.
- AJC partner programs will dedicate funding for infrastructure and other shared costs.

Improves Services to Employers and Promotes Work-Based Training:

WIOA contributes to economic growth and business expansion by ensuring the workforce system is job-driven, matching employers with skilled individuals.

- State and local boards will promote the use of industry and sector partnerships to address the workforce needs of multiple employers within an industry.
- State and local boards are responsible for activities to meet the workforce needs of local and regional employers.
- Local areas can use funds for demonstrated effective strategies that meet employers' workforce needs, including incumbent worker training, Registered Apprenticeship, transitional jobs, on-the-job training, and customized training.
- Employers are incentivized to meet their workforce needs and offer opportunities for workers to learn with increased reimbursement rates for on-the-job and customized training.

Provides Access to High Quality Training:

WIOA helps job seekers acquire industry-recognized credentials for in-demand jobs.

- WIOA emphasizes training that leads to industry-recognized post-secondary credentials.
- States and local areas will use career pathways to provide education and employment and training assistance to accelerate job seekers' educational and career advancement.
- Local areas have additional procurement vehicles for training to increase customer choice and quality, including individual

training accounts, pay for performance contracts, and direct contracts with higher education.

Enhances Workforce Services for the Unemployed and Other Job Seekers:

WIOA ensures that unemployed and other job seekers have access to high-quality workforce services.

- WIA service categories of core and intensive services are collapsed into “career services,” and there is no required sequence of services, enabling job seekers to access training immediately.
- Local areas have flexibility to serve job seekers with the greatest need by transferring up to 100 percent of funds between the Adult and Dislocated Worker programs.
- Job seekers who lack basic skills, in addition to those who are low- income, have a priority for services from the Adult program.
- Unemployment insurance claimants can receive eligibility assessments and referrals to an array of training and education resources through the Wagner-Peyser Employment Service program.

Improves Services for Individuals with Disabilities:

WIOA increases individuals with disabilities’ access to high-quality workforce services and prepares them for competitive integrated employment.

- AJCs will provide physical and programmatic accessibility to employment and training services for individuals with disabilities.
- Youth with disabilities will receive extensive pre- employment transition services so they can successfully obtain competitive integrated employment.
- State vocational rehabilitation agencies will set aside at least 15 percent of their funding to provide transition services to youth with disabilities.
- A committee will advise the Secretary of Labor on strategies to increase competitive integrated employment for individuals with disabilities.

- VR state grant programs will engage employers to improve participant employment outcomes.

Makes Key Investments in Serving Disconnected Youth and Other Vulnerable Populations:

WIOA prepares vulnerable youth and other job seekers for successful employment through increasing the use of proven service models services.

- Local areas must increase the percentage of youth formula funds used to serve out-of-school youth to 75 percent from 30 percent under current law.
- Local areas must spend at least 20 percent of youth formula funds on work experience activities such as summer jobs, pre-apprenticeship, on-the-job training, and internships so that youth are ready for employment.
- YouthBuild participants can get training in growing fields in addition to construction, expanding career opportunities for these youth.
- Key programs serving Native Americans and migrant and seasonal farmworkers remain AJC partners, ensuring that these program participants can access and receive employment and training services from AJCs.

Enhances the Job Corps Program:

WIOA increases the performance outcomes and quality of Job Corps.

- Job Corps will report on the Youth program's common performance measures to increase alignment between the programs.
- Job Corps will establish community networks with employers, labor organizations, and state and local boards to improve services to and outcomes for participants.
- DOL will use competition to increase performance and quality so Job Corps is serving students well.

Streamlines and Strengthens the Strategic Roles of Workforce Development Boards:

WIOA makes state and local boards more agile and well positioned to meet local and regional employers' workforce needs.

- State and local boards must coordinate and align workforce programs to provide coordinated, complementary, and consistent services to job seekers and employers.
- Business continues to contribute to strategic development and other activities by maintaining a leadership role on the boards and forming the majority of workforce board members.
- State and local boards are more strategic and flexible as board membership streamlines.

For more information, refer to **the Department of Labor's Web pages about WIOA** (www.doleta.gov/wioa/about/overview/).

Section 503 of the Rehabilitation Act of 1973

Social Security is working closely with the U.S. Department of Labor's Office of Federal Contract Compliance Programs (OFCCP) to implement important changes in the federal regulations governing Section 503 of the Rehabilitation Act of 1973. Section 503 prohibits employment discrimination against individuals based on disability by federal contractors and subcontractors. Section 503 also requires that federal contractors and subcontractors take affirmative action to recruit, employ, train, and promote qualified individuals with disabilities.

The framework articulating contractors' Section 503 responsibilities has been in place since the 1970's. However, both the unemployment rate of working-age individuals with disabilities and the percentage of working-age individuals with disabilities who aren't in the labor force remain significantly higher than for those without disabilities. A substantial disparity in the unemployment rate of individuals with disabilities continues to persist despite years of technological advances that have made it possible for people with disabilities, sometimes severe, to apply for and successfully perform a broad array of jobs.

The new Section 503 regulations are an important tool for reducing barriers to equal employment opportunity for individuals with disabilities and addressing income inequality and poverty. In addition, the Final Rule

implements changes necessitated by the passage of the ADA Amendments Act (ADAAA) of 2008. The ADAAA amends the definition of disability in Section 503 to the same extent that it amends the ADA, and became effective on January 1, 2009.

Highlights of the Final Rule

The Final Rule introduces a variety of changes to the Section 503 regulations. Some of these changes revise the nondiscrimination provisions to incorporate the requirements of the ADAAA. Others are designed to strengthen the affirmative action provisions. The Final Rule:

- Establishes, for the first time, a 7 percent utilization goal for individuals with disabilities. This utilization goal, applied at the job group level, isn't to be used by contractors as a quota or a ceiling that limits or restricts the employment of individuals with disabilities. Instead, the goal is a management tool that informs decision-making and provides real accountability. Failing to meet the disability utilization goal isn't a violation of the regulation, and it won't lead to a fine, penalty, or sanction.
- Requires contractors to invite applicants to voluntarily self-identify as an individual with a disability at the pre-offer stage of the hiring process, in addition to the existing requirement that contractors invite applicants to voluntarily self-identify after receiving a job offer. This data collection should provide contractors with useful information about the extent to which their outreach and recruitment efforts are effectively reaching people with disabilities.
- Requires contractors to invite incumbent employees to voluntarily self-identify on a regular basis. The status of employees may change, and a regular invitation to self-identify provides employees a way to self-identify for the first time, or to change their previously reported status. Providing a regular invitation should contribute to increased self-identification rates. Improving data collection is important to assessing employment practices.
- Requires contractors to maintain several quantitative measurements and comparisons for the number of individuals with disabilities who apply for jobs and the number of individuals with disabilities they hire in order to create greater

accountability for employment decisions and practices. Having this data will enable contractors and OFCCP to evaluate the effectiveness of contractors' outreach and recruitment efforts, and examine hiring and selection processes related to individuals with disabilities.

- Requires prime contractors to include specific, mandated language in their subcontracts in order to provide knowledge and increase compliance by alerting subcontractors to their responsibilities as federal contractors.
- Implements changes necessitated by the passage of the ADA Amendments Act (ADAAA) of 2008 by revising the definition of "disability" and certain nondiscrimination provisions of the implementing regulations.

More information about **changes to the 503 regulations is available at the Department of Labor web page** (www.dol.gov/ofccp).

Collaborative Efforts Involving Public Education Systems

Social Security has become increasingly aware of the importance of working with educational systems, particularly public high schools, in its efforts to promote employment with younger beneficiaries. The agency has collaborated with the U.S. Department of Education and other federal entities on a variety of projects including the Youth Transition Demonstration (YTD) projects and the current PROMISE Initiative.

Youth Transition Demonstration (YTD) Projects

In 2003, Social Security initiated Youth Transition Demonstration (YTD) projects designed to test the effect of a comprehensive package of services and SSI waivers on the post-secondary educational and employment outcomes of SSI beneficiaries ages 14-25. Social Security awarded seven cooperative agreements in six states: California, Colorado, Iowa, Maryland, Mississippi, and New York. The demonstration projects applied interventions that included services and supports such as benefits counseling, service coordination, Disability Program Navigators, enhanced Individual Development Accounts (IDAs), and job placement and training services.

In addition, Social Security waived five SSI program rules:

- Participants whom Social Security determined by their age 18 reviews to be no longer eligible for SSI benefits were permitted to retain those benefits as long as they participate in the project;
- Participants were permitted to receive the student earned income exclusion (SEIE) through the age of 25;
- Participants benefited from a \$1-for-every-\$4 benefit offset for earnings above the general earned income exclusion;
- Participants were allowed greater flexibility in the establishment and implementation of IDAs; and
- Social Security allowed participants to establish goals for PASS accounts that target either postsecondary education or employment outcomes.

The Youth Transition Demonstration projects involved significant interaction with the state VR systems, the WIPA projects, and the American Job Centers. Social Security is fully aware of the importance of early intervention with the younger beneficiaries in any efforts to enhance employment outcomes for adults with disabilities. The earlier schools expose students to employment and the more that school reinforces and supports the expectation of work, the greater the likelihood that the students will have jobs upon graduation. Focusing on transition from school to employment is intelligent public policy and represents a sound investment of resources.

All sites (Colorado; Bronx, NY; Erie, NY; Florida; Maryland; and West Virginia) completed their YTD participation and services as of March 2012. Social Security awarded a national evaluation contract to Mathematica Policy Research in September 2005 with evaluation activities completed in 2014. **The final evaluation reports can be found online at Mathematica's website** (<https://www.mathematica-mpr.com//our-publications-and-findings/projects/youth-transition-demonstration>).

Promoting Readiness of Minors in SSI (PROMISE)

PROMISE is a joint project with the Departments of Education, Labor, and Health and Human Services and Social Security to promote positive outcomes for children who receive Supplemental Security Income (SSI) and their families. The goal of PROMISE is to improve the provision and

coordination of services to promote education and employment outcomes resulting in long-term reductions in the child's reliance on SSI. The Department of Education awarded cooperative agreements to States to implement PROMISE, and Social Security will evaluate the project. The Department of Labor and the Department of Health and Human Services will also provide support for the project. The Department of Education's Office of Special Education and Rehabilitation Services (OSERS) awarded grants to the following five states: Arkansas, California, Maryland, New York, and Wisconsin; and one consortium of states made up of Utah, South Dakota, North Dakota, Montana, Colorado, and Arizona.

The states designed and implemented their own unique models, but all PROMISE project interventions include the following, at minimum:

- Partnerships among State agencies responsible for programs that play a key role in providing services to the target populations;
- Family outreach, recruitment, and involvement; and
- Services including:
 - Case management;
 - Benefits counseling;
 - Career and work-based learning experiences; and
 - Parent/guardian training and information.

The first states began enrolling youths and providing services in the spring of 2014. Project enrollment continued through spring 2016, and services continued through late 2018. Social Security awarded a contract to Mathematica Policy Research (MPR) to evaluate the programs and these evaluation efforts will continue through 2022.

For more **[information about the PROMISE evaluation, visit Social Security's PROMISE website](https://www.ssa.gov/disabilityresearch/promise.htm)**

(<https://www.ssa.gov/disabilityresearch/promise.htm>).

For more **[information on the PROMISE projects, see the Department of Education's PROMISE website](https://promiseneighborhoods.ed.gov/)**

(<https://promiseneighborhoods.ed.gov/>).

Social Security's Internal Efforts to Promote Employment of Beneficiaries with Disabilities

In recent years, Social Security has introduced an array of internal improvements in its disability programs. These improvements are too numerous to describe fully in this unit because they include everything from updated work incentive regulations to enhanced internal record-keeping processes to increased staff training and new job functions. These improvements also include the creation of the Work Incentives Planning and Assistance (WIPA) initiative, which is the basis for this entire training manual. Social Security has created several staff positions focused on work incentive issues that warrant discussion here.

Area Work Incentives Coordinators (AWICs)

Social Security has initiated the Area Work Incentives Coordinator (AWIC) position in all 58 Area offices. The AWIC positions are filled by individuals dedicated to providing assistance to personnel in field offices on employment support and outreach issues. Their duties include:

- Coordinating or conducting local public outreach on work incentives;
- Providing, coordinating, or overseeing training for all personnel regarding Social Security's employment support programs;
- Handling some sensitive or high-profile disability work-issue cases; and
- Monitoring the disability work-related issues in their respective areas.

The current AWIC position actually arose out of an earlier experiment Social Security conducted in designating internal work incentives experts. This original initiative was known as the Employment Support Representative (ESR). In part, the ESR strategy was a response to criticisms from the disability and vocational rehabilitation communities as well as monitoring groups such as the GAO) and Social Security's Inspector General. These groups expressed concerns that disability beneficiaries didn't always get accurate, comprehensive information from Social Security about employment support provisions, commonly called "work incentives." These difficulties in obtaining accurate, reliable information about the effect of work and earnings on entitlement to

monthly cash benefits and health insurance protection create an environment of uncertainty for disability beneficiaries. Social Security recognized that this uncertainty created another barrier for disability beneficiaries to overcome in trying to work and become more financially independent and less dependent on benefit programs.

Work Incentive Liaisons (WILs)

AWICs have been a very positive addition to Social Security's employment support personnel, but they don't operate in isolation. The AWICs coordinate with the 1,335 Work Incentive Liaisons (WILs) housed in local field offices around the country. The Work Incentive Liaison is a special designation given to a Social Security employee with significant expertise in the disability programs and associated work incentives. The WIL acts as an internal resource for other Social Security personnel within that local office. The WIL is the "go-to" person in each local field office for questions about how earned income from wage employment or self-employment affects Social Security disability benefits. Depending on the Social Security office, the WIL may be also the primary contacts on work incentives issues for CWICs.

Other Social Security Demonstration Projects Related to Beneficiaries with Disabilities

Social Security conducts numerous research and demonstration projects to study ways to improve services to current and future beneficiaries, and supports a number of demonstrations and projects intended to address the broad needs of beneficiaries with disabilities. These projects can lead to ways to better serve individuals with disabilities, including potentially changing program rules to allow for better coordination among other federal and state programs. Social Security also receives funding for projects through specific congressional mandates. These projects support specific program changes or outreach activities targeted to populations in particular need.

Social Security is currently working on the following demonstration projects or pilots:

Benefit Offset National Demonstration (BOND)

The purpose of the BOND project is to determine the effect of various interventions, in combination with a benefit offset, on employment outcomes including wages, benefits, hours worked, and job retention. In addition, Social Security recently modified this project to include a test of an early intervention strategy that will focus on disability applicants.

The Social Security Administration has contracted with Abt Associates to help design, implement, and evaluate the Benefit Offset National Demonstration. Abt Associates is a policy research firm with headquarters in Cambridge, MA. In addition to Abt Associates, the team for this project includes: Center for Essential Management Services, Mathematica Policy Research, University of Illinois, and Virginia Commonwealth University. The BOND project became operational early in 2011.

The benefit offset demonstration is testing different program variants for current SSDI beneficiaries around the country. In some of the models, Social Security will gradually reduce benefits when the beneficiary has earnings over a specific amount instead of cutting benefits to \$0 (as under current law). Those who earn less than that specific amount will receive the same benefit as under current law. Some models are testing enhanced benefits assistance, along with information and referral to employment supports. Social Security developed these models with input from four state pilot offset demonstrations in operation since 2005.

Social Security randomly selected 10 of their area office jurisdictions around the country for this test. The demonstrations are being fielded in these entire states: Arizona, Colorado, Wyoming, Alabama, District of Columbia, Wisconsin, Vermont, Maine, and New Hampshire; and in parts of these states: California, Texas, Florida, Massachusetts, Virginia, Maryland, Michigan, and New York.

Social Security will rigorously evaluate the tested programs in the benefit offset demonstration. Social Security has randomly assigned SSDI beneficiaries in the BOND sites to a group Social Security notifies is eligible for a benefit offset if beneficiaries return to work, or groups that can enroll in one of the program variants, or a control group that won't be eligible for these programs but will remain eligible for SSDI benefits and services under existing program rules. Social Security will measure effects of the program interventions on employment, SSDI benefits, and a range of other outcomes by measuring differences in outcomes among

the program and control groups. The agency will also evaluate the operation of the programs and their costs to federal, state, and local governments, as well as any cost savings and additional revenues. The evaluation will use data from surveys of program and control group members, Social Security, other administrative records, and other information sources.

Social Security awarded the contract for the implementation and evaluation of the project to Abt Associates in December 2009. Social Security completed start-up tasks in 2010 and began a three-month pilot of the Benefit Offset National Demonstration in January 2011. Full project implementation began in late April 2011, and enrollment ended in September 2012.

More **information about the BOND project** can be found online (<http://www.socialsecurity.gov/disabilityresearch/offsetnational.htm>).

Promoting Opportunity Demonstration (POD)

The Promoting Opportunity Demonstration (POD) will test simplified work incentives and a benefit offset in the Social Security Disability Insurance (SSDI) program to determine its effects on outcomes such as earnings, employment, and benefit payments. Section 823 of the Bipartisan Budget Act of 2015 directs the agency to carry out POD.

In POD, Social Security will reduce benefits by \$1 for every \$2 earned above the POD threshold, which is the greater of the current Trial Work Period level or the amount of a participant's itemized impairment-related work expenses (up to Substantial Gainful Activity). POD includes a random assignment design to assign 9,000 volunteers to three groups of approximately 3,000 beneficiaries each, a control group and two treatment groups. The control group continues under usual rules. Treatment group 1 is subject to the offset and benefits will be suspended for any months SSDI benefits are reduced to zero. Treatment group 2 is subject to the offset and SSDI entitlement will terminate when benefits are reduced to zero for 12 consecutive months. Both treatment groups are eligible for POD-specific benefits counseling.

Social Security awarded contracts to Abt Associates for the implementation and to Mathematica Policy Research for the evaluation of POD. Abt Associates awarded subcontracts to eight states or areas to deliver work incentives planning and assistance services to POD participants. Enrollment began January 2018 and continued on a rolling

basis through December 2018. Recruitment ended in December 2018 and as of January 2019, Social Security had enrolled over 10,000 volunteers for POD. The project will end for all remaining participants on June 30, 2021.

For more information, refer to **[Promoting Opportunity Demonstration \(POD\) on Social Security's website](https://www.ssa.gov/disabilityresearch/pod.htm)**

(<https://www.ssa.gov/disabilityresearch/pod.htm>).

Supported Employment Demonstration

The Consolidated and Further Continuing Appropriations Act of 2015 (Pub. L. 113-235) appropriated funds to design, develop, and implement an early intervention demonstration to test innovative strategies aimed at helping people with disabilities remain in the workforce.

In August 2016, SSA awarded a contract to Westat, Inc. to implement and evaluate whether offering evidence-based interventions of integrated vocational, medical, and behavioral health services to individuals with behavioral health challenges can significantly reduce the demand for disability benefits and help individuals remain in the labor force.

The Supported Employment Demonstration (SED) uses a random assignment design to assign 3,000 participants to one of two treatment groups (Full Services or Basic Services) or to a control group (Usual Services). For 36 months, participants will receive varying degrees of services based on their assignment. These services include systematic medication management, health care management and care-coordination services, and long-term employment services following the evidence-based Individual Placement and Support (IPS) model.

An important component of the SED is providing Community Mental Health Center personnel with intensive training about Social Security disability benefits and associated work incentives. This training is provided by VCU's NTDC and is closely aligned with the required WIPA training.

Eligibility for the SED is restricted to individuals aged 18 to 50 years who want to work; who applied for disability benefits (DI or SSI) alleging mental impairment in the past 30-60 days; and who received an initial denial decision from Social Security. Thirty urban and rural-urban mixed catchment areas at community mental health agency sites across the U.S. are enrolling participants in the demonstration and are providing the

interventions. SED sites are located in these states: California, Colorado, Florida, Illinois, Kansas, Kentucky, Massachusetts, Maryland, Michigan, Minnesota, New York, North Carolina, Ohio, Oklahoma, Oregon, South Carolina, Tennessee, Texas, Washington, and Wisconsin.

The SED period of performance is from August 2016 through August 2022.

Additional information about the SED is available (<https://www.westat.com/project/evaluating-supported-employment>).

Conclusion

The objective of this unit is to illustrate the sustained effort Social Security has made in a variety of areas over the past 20 years to support the return-to-work efforts of its beneficiaries with disabilities. These efforts have included changing Social Security's internal staffing patterns and work incentives policies, collaborating with other federal stakeholder agencies, and implementing critical components of the Ticket to Work and Work Incentives Improvement Act.

The Social Security Administration no longer defines its role as being limited to processing initial claims and making sure that the right check in the right amount gets to the right person by the right date. The expanded role of Social Security includes actively developing and implementing policies and practices that encourage disability beneficiaries to work and decrease their dependence on public income support programs. WIPA services are an important part of the larger solution to the worrisome problem of our ever-expanding disability benefit programs. The Social Security Administration encourages and supports CWICs to join this effort to enhance the economic independence and financial stability of disability beneficiaries.

Conducting Independent Research

Social Security's Office of Research, Demonstration, and Employment Support

(<http://www.socialsecurity.gov/disabilityresearch/index.html>)

Competency Unit 3 –Understanding the Disability Services System: Key Stakeholder Agencies that Fund or Provide Vocational/ Employment Services for Persons with Disabilities

Introduction

As a CWIC, you are an integral partner on the employment service team. You play an active role in supporting the long-term employment process, including providing information, guidance, and direct assistance in vocational planning. You also help identify and leverage resources to meet the employment support needs of beneficiaries. To be effective in this role, you must have a comprehensive knowledge of the current employment service system for youth and adults with disabilities, and knowledge of the vocational evaluation and planning processes used by local employment agencies. You must also be fully aware of the referral, eligibility, program planning, and service delivery approaches employment service agencies use in their local community.

This unit will provide an overview of the major stakeholders in the vocational service system for persons with disabilities. The following agencies serve as collaborative partners in promoting employment and enhancing financial independence of Social Security disability beneficiaries:

- State Vocational Rehabilitation Agencies (SVRAs)
- Employment Networks (ENs) under the Ticket to Work program
- State or local Workforce Investment Boards (WIBs) and American Job Centers (AJCs)
- State or local Intellectual/Developmental Disability (ID/DD) agencies
- State or local mental health, chemical dependency, or substance abuse agencies

- Centers for Independent Living (CILs)
- State protection & advocacy agencies (P&A)
- Public school systems
- U.S. Department of Veteran's Affairs (VA)
- Community agencies administering IDAs or Asset Development Services

While this unit will provide a basic overview of these agencies and describe the most common services they provide to persons with disabilities, it won't provide suggestions on how WIPA programs can work collaboratively with key stakeholders to support Social Security disability beneficiaries in achieving their employment goals. For specific information about your role in partnering with each of these agencies, please refer to Module 2, Unit 3.

Understanding the Disability Service System

The disability services system may seem very confusing to those with no prior experience in the field. There are so many different agencies involved, and each agency has its own distinct eligibility criteria, menu of services, and restrictions on what assistance it can provide. In many ways, it isn't a coherent or coordinated "system" at all, but rather a loose affiliation of multiple systems and agencies.

To start, it's important to understand the two main categories of systems or agencies that serve persons with disabilities. These categories are:

1. Disability Specific System:

These agencies generally provide a wide range of services to persons who meet the definition of a specific disability type. For example, the mental health system may provide psychiatric services, mental health counseling, day programs, residential support, or even employment services to certain individuals who have mental illnesses. Similarly, the intellectual disability or developmental disability system generally provides a variety of services to persons who meet the definition of having an intellectual disability or a developmental disability including case management, residential support, vocational training, or supported employment. In addition to these relatively large state

systems, smaller agencies such as the Brain Injury Association, United Cerebral Palsy Association, or the Down Syndrome Association often provide a more limited menu of services to more narrowly defined populations. In some cases, individuals may meet the eligibility criteria to receive services from multiple systems or agencies simultaneously.

2. Service Specific System:

These agencies typically serve persons with many different types of disabilities, but only provide one type of service, or a group of related services. For example, State Vocational Rehabilitation Agencies (SVRAs) provide services across many different disability types, but the services all focus primarily on preparing for, obtaining, and maintaining paid employment. Similarly, the local American Job Center funded by the Department of Labor serves a broad spectrum of people, but it too is focused on employment-related services. Some individuals may meet the eligibility criteria of multiple agencies, so several agencies may serve them simultaneously.

The best way to begin is by conducting research to find out what agencies exist in your service delivery area in each of the two broad categories identified above. You will need to know a few basic things about each agency such as who they serve, what specific services they provide, and what restrictions or limits they place on services. It may be possible to find listings of disability service organizations in the phone book, by accessing the Internet, or even by contacting umbrella groups such as the United Way. When working with specific beneficiaries with disabilities, it's helpful to ask which agencies they are or were involved with or getting services from.

It will take time to get to know all of the agencies involved in serving persons with disabilities in any given community. The best advice is to start with the larger state systems and ask for contact information for any other service providers with whom these agencies work or of which they are aware. The information in this unit will help you know which specific agencies WIPA programs are most likely to need to collaborate with and, as a result, where you should start in the information-gathering process.

Understanding Employment Services and Supports Available to Individuals with Disabilities

The following descriptions offer some background information on the most common types of employment services and supports.

Supported Employment

The Rehabilitation Act defines supported employment as “competitive work in integrated work settings, or employment in integrated work settings in which individuals are working toward competitive work, consistent with the strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice of the individuals, for individuals with the most significant disabilities:

- For whom competitive employment hasn’t traditionally occurred; or
- For whom competitive employment has been interrupted or intermittent as a result of a significant disability; and
- Who, because of the nature and severity of their disability, need intensive supported employment services.”

Supported employment providers facilitate competitive work in typical community business settings for individuals with the most severe disabilities (i.e., psychiatric impairments, intellectual disabilities, learning disabilities, traumatic brain injury) for whom competitive employment hasn’t traditionally occurred, and who, because of the nature and severity of their disability, need ongoing support services in order to perform their job. Supported employment provides assistance such as job coaches, transportation, assistive technology, specialized job training, and individually tailored supervision. The jobs involve pay at a competitive wage and may be part- time or full-time.

Supported employment entails intensive and long-term employment supports. In most cases, the supported employment professional helps individuals find jobs by conducting individualized job development services in the local business community. When the beneficiary secures an appropriate job match, the supported employment professional will typically provide direct job site training to the individual for as long as it

takes that person to master the job functions. Even after the individual masters the job functions, the supported employment professional will stay in close contact with the individual and the employer to make certain employment progresses smoothly.

Private non-profit community rehabilitation agencies generally provide supported employment services, but there are exceptions to this. In some states, the state VR agency delivers supported employment services directly instead of or in addition to purchasing these services from community providers. Some agencies may provide supported employment services as well as sheltered employment services. In most areas, the best way to locate the supported employment providers is to contact the local state VR agency personnel.

Customized Employment Services

Customized employment may best be described as a type of supported employment that involves a specialized relationship between job seekers and employers in ways that meet the needs of both. Customized employment is based on a specific approach to client assessment that examines the strengths, requirements, and interests of a person with a complex life — a process often referred to as “discovery.” In addition, in customized employment great care is taken to analyze the employment site, the job functions, and the availability of natural support from supervisors or co-workers. Jobs are often specially created or negotiated with the employer to accommodate the unique needs of the employee. Successful customized employment opportunities are built on four key elements:

- Meeting the job seeker’s individual needs and interests;
- Using a personal representative to assist and potentially represent the individual. This can be a counselor, job developer, advocate, employment specialist, or other qualified professional;
- Negotiating successfully with employers; and
- Building a system of ongoing supports for the job seeker.

Like supported employment, customized employment opportunities include the expectation that accommodations and supports will be available to the job seeker and the employer as necessary over time. Supports may include (but aren’t limited to) benefits counseling, personal assistance, transportation coordination and assistance, and adaptive

equipment. These individualized supports should be flexible to reflect the unique needs of both the job seeker and employer.

Sheltered Employment Services

Agencies known as “sheltered workshops” generally provide sheltered employment services. State vocational rehabilitation, mental health, or developmental disabilities agencies often provide funding. Sheltered employment environments tend to be segregated facilities, meaning that all or most of the employees except supervisory personnel experience a disability of some type. Employees generally earn less than minimum wage, making it highly unlikely that beneficiaries will be able to use earnings from sheltered employment to enhance their financial independence. Many states are establishing initiatives to limit the use of sheltered employment and promote an “Employment First” policy that relies on placement into competitive jobs.

Agencies can also provide sheltered employment services in community-based settings such as businesses. For example, a manufacturing company may have a specific function that it contracts with a sheltered workshop to perform. The agency will provide the employees who typically will all experience disabilities and will often send a non-disabled staff person to supervise the work on a day-to-day basis. While working at the manufacturing company, the individuals with disabilities are generally employees of the rehabilitation facility, which pays them sub-minimum wage based on productivity.

Day Habilitation Services

Day Habilitation services provide individualized assistance to persons with significant disabilities who wish to acquire and maintain life skills that would enable them to become and remain a productive member of our community. In general, the services they offer focus on the development, retention, and improvement of self-help, socialization, adaptive skills, and development of manual or perceptual motor skills. The services correspond with the person’s individual strengths and needs. A variety of Day Habilitation activities include:

- Mobility training
- Development of social behaviors
- Development of communication skills

- Training and assistance in developing basic safety skills
- Training and assistance in developing competency in housekeeping skills
- Training and assistance in developing competency in personal care skills
- Training and assistance in developing health care skills
- Training and assistance in developing money management skills
- Providing individual and group social, health-related, and recreation activities
- All necessary transportation

For the most part, Day Habilitation services are non-vocational in nature. This means that they generally don't provide employment and job skill training. There are certainly exceptions to this, and some Day Habilitation programs also provide both sheltered employment and supported employment services. The most common funding source for Day Habilitation Services is state Medicaid waiver programs, although the services may also use some state general funds. State VR agencies don't fund Day Habilitation services. Professionals may deliver Day Habilitation services within a facility, in community-based settings, or a combination of both.

State Vocational Rehabilitation Agencies

Vocational Rehabilitation (VR) is a nationwide federal-state program that provides medical, therapeutic, counseling, education, training, work-related placement assistance, and other services to eligible individuals with disabilities. Specifically, the system of state VR agencies was established to provide the services and supports that individuals with disabilities might need to overcome barriers to employment. The Rehabilitation Services Administration (RSA) of the U.S. Department of Education is the federal agency responsible for overseeing the grant programs that help individuals with physical or mental disabilities to obtain employment and live more independently through the providing such supports as counseling, medical and psychological services, job training, and other individualized services. RSA's major Title I formula grant program provides funds to state vocational rehabilitation (VR)

agencies to provide employment-related services for individuals with disabilities, giving priority to individuals who are significantly disabled. VR agencies cover the following services:

- Assessment to determine eligibility and needs, including (if appropriate) by someone skilled in rehabilitation technology;
- Counseling, guidance, and job placement services, and (if appropriate), referrals to the services offered by WIOA providers;
- Vocational and other training, including higher education and the purchase of tools, materials, and books;
- Diagnosis and treatment of physical or mental impairments to reduce or eliminate impediments to employment, to the extent financial support isn't available from other sources, including health insurance or other comparable benefits;
- Maintenance for additional costs incurred during rehabilitation;
- Transportation, including adequate training in the use of public transportation vehicles and systems that is provided in connection with the providing any other service described in this section and that the individual needs to achieve an employment outcome. Transportation may include vehicle purchase. Under the regulations, transportation is defined as "travel and related expenses that are necessary to enable an applicant or eligible individual to participate in a VR service";
- Personal assistance services while receiving VR services;
- Interpreter services for individuals who are deaf, and readers, rehabilitation teaching, and orientation and mobility services for individuals who are blind;
- Occupational licenses, tools, equipment, initial stocks, and supplies;
- Technical assistance for those who are pursuing telecommuting, self-employment, or small business operation;
- Rehabilitation technology, including vehicular modification, telecommunications, sensory, and other technological aids and devices;

- Transition services for students with disabilities to facilitate the achievement of the employment outcome identified in the Individual Plan for Employment (IPE);
- Supported employment;
- Services to the family to assist an individual with a disability to achieve an employment outcome; and
- Post-employment services necessary to assist an individual to retain, regain or advance in employment.

To be eligible for state VR services, a participant must meet certain criteria. First, he or she must have a physical or mental impairment that results in a substantial barrier to employment. However, the disability doesn't need to be so severe that it qualifies the person for Social Security disability benefits. SSI and DI beneficiaries can receive VR services, assuming they intend to achieve an employment outcome. Second, individuals must be able to benefit from VR services. Finally, they must eventually be able to achieve an employment outcome. State VR agencies can deny benefits if they can show that a person can't benefit from the services. To make determinations, state VR agencies use existing data, such as medical reports, Social Security records, and education records and, to the extent that the existing data is insufficient to determine eligibility, an assessment by the VR agency.

The State Vocational Rehabilitation agency assigns a VR counselor to those eligible for services. The counselor will develop and coordinate the types of assistance a person with a disability needs for employment, including the development of an Individual Plan for Employment (IPE). The IPE is a written agreement between VR and the individual to achieve the individual's employment goal, and must be consistent with his or her interests, unique strengths, priorities, abilities, and capabilities. The VR counselor provides some services directly to the eligible individual and arranges for or purchases other services from providers in the community. Before providing certain services, the VR counselor must consider the availability of comparable services and benefits for which the individual is eligible through other sources, such as Medicaid.

For VR participants who don't receive Social Security disability benefits, the payment method for VR services varies by state. Based on the individual's available financial resources, the state VR agency may require an eligible individual to help pay for services. All eligible and accepted VR

participants have access to the following services at no cost: assessments to determine eligibility and VR needs, vocational counseling, guidance, referral services, and job placement services.

To access **[contact information for all of the state VR agencies](https://choosework.ssa.gov)**, go to **choosework.ssa.gov**.

Employment Networks (ENs)

An Employment Network (EN) is an organization or group of organizations that Social Security has deemed qualified to provide or coordinate the delivery of necessary services and other types of employment-related services and supports to assist Social Security beneficiaries with disabilities to enter, maintain, and advance towards self-supporting employment.

The EN assumes responsibility for the coordination and delivery of employment services, vocational rehabilitation services, or other support services to beneficiaries who have assigned their Ticket to that EN. ENs provide services either directly or by entering into agreements with other providers and take measures to ensure that provided services meet the requirements of individual work plans. Under the Ticket program, all ENs are required to develop Individual Work Plans (IWP) for each beneficiary the program serves. The Individual Work Plan (IWP) is an agreement between a beneficiary and an Employment Network (EN) outlining the specific employment services, vocational rehabilitation services, and other support services that the two parties determine are necessary to achieve the beneficiary's stated employment goal and provide a road map for financial independence.

ENs must:

- Inform and educate Ticket holders that the purpose of the Ticket Program is to provide individuals with the opportunities and supports they need to go to work, increase earnings, and become self-sufficient through financial independence by leaving cash benefits to the maximum extent feasible;
- Fairly and objectively advise each Ticket Holder on the benefits and risks of leaving cash benefits and becoming self-sufficient;

- Provide employment services that afford Ticket holders the opportunity and supports necessary to prepare for, obtain, and retain career ladder jobs that will realistically enable them to leave and remain off cash benefits;
- Avoid even the appearance of advising or condoning the practice of artificially manipulating a beneficiary's work and earnings to remain on cash benefits; and,
- In light of the above, an EN must choose a business model that provides opportunities and supports to beneficiaries that enable them to progress towards self-sufficiency and financial independence through work, rather than encourage and promote indefinite part-time employment.

Organizations must apply to become ENs and are required to meet certain criteria as determined by Social Security. Organizations must apply to become ENs by responding to the EN Request for Application (RFA). Once approved, the organization must sign a Ticket Program Agreement (TPA) and key staff must complete a suitability determination and orientation training before operating as an EN. ENs can be for-profit or non-profit service providers, state, and local government agencies, or a group of providers working together as a single EN. Federal agencies can't be ENs.

To learn more about the **EN requirements, go to**
yourtickettowork.ssa.gov

(<https://yourtickettowork.ssa.gov/web/ttw/en-home>)

Traditional ENs are community-based service providers that have been involved in promoting employment for individuals with disabilities. Examples of these providers are community rehabilitation programs such as Goodwill Industries and United Cerebral Palsy organizations, community mental health programs, independent living centers, habilitation providers, disability student services at community colleges, and vocational training schools. This is the largest pool of organizations currently operating as ENs.

Over the years, a variety of other EN models have emerged. The Ticket to Work program defines the Employer Employment Network (EN) model as a business model that includes the EN serving as the beneficiary's employer or an employer's agent. The program describes an employer's agent as a group or individual who is working with an employer under an

agreement or other arrangement to locate and place suitable job candidates with that employer.

Social Security's EN application package requires that Employer ENs:

- Identify the jobs they have available;
- Pay wages at or above the amount that Social Security defines as Substantial Gainful Activity (SGA);
- Identify where the EN plans to place beneficiaries; and
- Describe how the EN plans to provide beneficiaries with the supports and opportunities to permit them to keep a job that pays SGA-level earnings.

The business plan a perspective Employer EN submits must include:

- A promise to maintain an active program for hiring and providing ongoing services and supports to their workers with disabilities;
- A plan for placing Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI) beneficiaries in jobs that pay at or exceed the annual SGA amount; and
- A provision for paying SSI or SSDI beneficiaries in a timely manner for work performed.

The salaries Employer ENs pay to beneficiaries can't be contingent on the EN's receipt of Milestone or Outcome payments under the Ticket program. Earnings, for purposes of the Employer EN's request for payment under the Ticket program, means actual wages the employer pays to a beneficiary prior to the EN's payment request.

For a detailed description of how ENs operate under the Ticket to Work Program, refer to Unit 10 Module 3 of this manual. For a **listing of current ENs, go to choosework.ssa.gov** (<https://choosework.ssa.gov/findhelp/>).

American Job Centers (AJCs) and Workforce Investment Boards (WIBs)

American Job Centers (AJCs)

The Workforce Investment Act of 1998 (WIA) provided the original framework for a national workforce preparation and employment system designed to meet both the needs of the nation's businesses and the needs of job seekers as well as those who want to further their careers. This legislation created an entirely new national Workforce Development System, which replaced programs and services provided under the former Job Training Partnership Act (JTPA).

The key guiding principles of the Workforce Investment Act included:

- **Streamlining Services:** Programs and providers co-locate, coordinate, and integrate activities and information, so that the system as a whole is coherent, accessible, and easy to use.
- **Empowering Individuals:** Eligible adults have the financial power to use Individual Training Accounts (ITAs) at qualified institutions.
- **Universal Access:** Through the creation of the American Job Centers (AJCs) all individuals have access to core employment-related services. This includes information about job vacancies, career options, student financial aid, relevant employment trends, and instruction on how to conduct a job search, write a resume, or interview with an employer.
- **Employer Involvement:** Businesses provide information and leadership and play an active role in ensuring that the American Job Center system prepares people for current and future jobs.

The principles described above were refined and reauthorized in the **Workforce Innovation and Opportunities Act of 2014 (WIOA)**. The enactment of WIOA provides opportunity for reforms to ensure the American Job Center system is job-driven—responding to the needs of employers and preparing workers for jobs that are available now and in the future. Of particular note to Help Line Agents is that WIOA increases individuals with disabilities' access to high quality workforce services and prepares them for competitive integrated employment. The following requirements of the legislation are of significance:

- Youth with disabilities will receive extensive pre-employment transition services so they can successfully obtain competitive integrated employment.
- State VR agencies will set aside at least 15 percent of their funding to provide transition services to youth with disabilities.
- A committee will advise the Secretary of Labor on strategies to increase competitive integrated employment for individuals with disabilities.
- VR state grant programs will engage employers to improve participant employment outcomes.
- American Job Centers will provide physical and programmatic accessibility to employment and training services for individuals with disabilities.

For more information about **WIOA**, go to www.doleta.gov/wioa/.

“One-Stop” Approach

The current national Workforce Development System is based on a “one-stop” concept where information about and access to a wide array of job training, education, and employment services is available for customers at neighborhood locations called American Job Centers (AJC). A **virtual American Job Center (AJC)** is available online (<https://www.americasvos.com/vosnet/Default.aspx>.)

By using the American Job Center system, job seeking customers are able to easily:

- Receive a preliminary assessment of their skill levels, aptitudes, abilities, and support service needs;
- Obtain information on a full array of employment- related services, including information about local education and training service providers;
- Receive help filing claims for unemployment insurance and evaluating eligibility for job training and education programs or student financial aid;
- Obtain job search and placement assistance, and receive career counseling;

- Access up-to-date labor market information, which identifies job vacancies and skills necessary for in-demand jobs, and provides information about local, regional, and national employment trends; and
- Get information about accessibility and special accommodations for people with disabilities.

In addition, through the local American Job Centers, employers have a single point of contact to provide information about current and future skills needed by their workers and to list job openings. **Find the nearest AJC** by going online

(<https://www.careeronestop.org/localhelp/americanjobcenters/find-american-job-centers.aspx>).

Eligibility and Service Requirements

WIOA specifies three funding streams to the states and local areas: adults, dislocated workers, and youth.

The American Job Center system provides most services for adults and dislocated workers, and most customers use their individual training accounts to determine which training program and training providers fit their needs. The Act authorizes “core” services available to all adults with no eligibility requirements and “intensive” services for unemployed individuals who aren’t able to find jobs through core services alone. In some cases, the intensive services are also available to employed workers who need more help to find or keep a job.

Core services include job search and placement assistance (including career counseling); labor market information (that identifies job vacancies; skills needed for in-demand jobs; and local, regional and national employment trends); initial assessment of skills and needs; information about available services; and some follow-up services to help customers keep their jobs.

Intensive services include more comprehensive assessments, development of individual employment plans, group and individual counseling, case management, and short-term pre-vocational services.

In cases where qualified customers receive intensive services but are still not able to find jobs, they may receive training services that are directly linked to job opportunities in their local area. These services may include occupational skills training, on-the-job training, entrepreneurial training,

skill upgrading, job readiness training, and adult education and literacy activities in conjunction with other training.

If adult funds are limited in an area, recipients of public assistance and low-income clients get priority for services. The Act also authorized the providing supportive services (e.g., transportation) to assist participants receiving the other services and the providing temporary income support to enable participants to remain in training.

WIOA enacted a comprehensive youth employment program for serving eligible youth, ages 14-24, who face barriers to education, training, and employment. Funds for youth services are allocated to states and local areas based on a formula. The WIOA program focuses primarily on out-of-school youth (OSY), requiring local areas to expend a minimum of 75% of WIOA youth funds on OSY. The program includes 14 program elements that are required to be made available to youth participants. WIOA prioritizes work experience through a 20% minimum expenditure rate for the work experience program element. Local programs provide youth services in partnership with the WIOA American Job Center System and under the direction of local Workforce Development Boards. **For more information visit [About Youth Services through the US Department of Labor's website](http://www.doleta.gov/Youth_services/about_oys.cfm)** (http://www.doleta.gov/Youth_services/about_oys.cfm)

State and Local Workforce Investment Boards

Under WIA each state established both state and local workforce investment boards. The state Workforce Investment Board (WIB) helps the Governor develop a five-year strategic plan describing statewide workforce development activities, explaining how the requirements of the Act will be implemented by the boards, and outlining how special population groups will be served. Local workforce investment boards must submit the plan, which must also include details about how local employment service and job service activities fit into the new service delivery structure, to the Secretary of Labor. The state WIB advises the Governor on ways to develop the statewide workforce investment system and a statewide labor market information system. The state WIB also helps the Governor to monitor statewide activities and report to the Secretary of Labor.

Local workforce investment boards, in partnership with local elected officials, plan and oversee the local system. These boards submit local

plans for the Governor's approval. Local boards designate AJC operators and identify providers of training services, monitor system performance against established performance measures, negotiate local performance measures with the state board and the Governor, and help develop the labor market information.

State/Local Intellectual/Developmental Disabilities (ID/DD) Agencies

Individuals with intellectual or other developmental disabilities generally enter the state ID/DD system at an early age and stay in this system during their post-school transition and through adulthood. State ID/DD agencies work cooperatively with local governments, voluntary organizations, service providers, and families to provide necessary services for persons with a diagnosis of intellectual disabilities or developmental disabilities. In most states, ID/DD agencies provide or fund an array of services including after-school programs; services for the aged; housing and residential options; counseling; day habilitation services; developmental programs; family support services; financial assistance; health care; respite care; transportation; waiver programs; research, prevention and intervention programs; and supported and sheltered employment.

States generally define developmental as a severe, ongoing, mental or physical disability that was present before 22 years of age. It's important to note that some states vary age of onset of disability requirements. For example, Arizona requires onset of disability before age 18.

A service delivery-planning construct similar to the Individualized Education Plans (IEPs) used in Special Education programs at public schools guides the ID/DD system. The Individual Service Plan (ISP) requires specific services, supports, roles, responsibilities, and time frames for assisting individuals in meeting their objectives. In most cases, ID/DD practitioners develop the ISP with assistance from counselors, case managers, or others with administrative oversight.

ID/DD agencies are funded in a variety of ways. The state typically allocates general funds through the state ID/DD agency, and a growing portion of funding for ID/DD services comes from Medicaid. ID/DD agencies typically access these funds through special programs known as

“Medicaid waivers.” While Medicaid historically financed long-term institutional care, there have been recent movements to place persons with ID/DD in community settings. For example, Medicaid Home and Community Based Services (HCBS) waiver programs have been effective at reducing institutionalization and providing Medicaid funds for community-based services. For more information about the Medicaid Home and Community-Based Services waivers, refer to Unit 1 of Module 4.

State/Local Mental Health and Substance Abuse Agencies

People with mental health support needs may access a relatively independent and loosely coordinated public and private service system. The system’s four major components include:

- **Specialty Mental Health Sector:** Consists of mental health professionals such as psychiatrists, psychologists, psychiatric nurses, and psychiatric social workers trained to treat people with mental disorders. Mental health professionals provide services in this sector in outpatient settings such as private office-based practices or in public or private clinics.
- **General Medical/Primary Care Sector:** Consists of health care professionals such as general internist, pediatricians, and nurse practitioners. The general medical sector is often the first point of contact for adults with mental disorders.
- **Human Services Sector:** Social services, school-based counseling services, residential rehabilitation services, VR, criminal justice-based services, and religious professional counselors are part of this sector. For children, school mental health services are a major source of care, as are services in the child welfare and juvenile justice systems.
- **Voluntary Support Network Sector:** Consists of self-help groups such as 12-step programs and peer counselors. The network is an established component within the mental and addictive disorder treatment system as adult usage of services has increased since the early 1980s.

The Substance Abuse and Mental Health Services Administration (SAMHSA) is the federal agency in charge of the state mental health systems. The Center for Mental Health Services (CMHS), one of the three centers under SAMHSA, awards state grants for providing mental health services to people with mental illnesses. These grants improve access to community-based health care delivery systems for people with serious mental illnesses who don't have private health insurance. CMHS works closely with each state to design a customized service delivery plan that addresses the unique needs of the state's populations. Each state administers its public mental health budget and authorizes services in several broad areas, including: system leadership for state and local county mental health units; systems oversight, evaluation and monitoring; administration of federal funds; and operation of state mental health programs, hospitals, or institutions.

Medical professionals, human service agencies, or schools refer people into the mental health system. Individuals with mental impairments gain access to these services by meeting specific state medical criteria usually related to the Diagnostics Statistical Manual (DSM). Because the largest provider of mental health services to children and adolescents is the school system, most youth with mental illnesses will contact the mental health system before their exit from school. Individuals with mental health impairments may enter this system during their schooling years through the Comprehensive Community Mental Health Services for Children program in several states or local collaborative programs administered jointly by schools and county mental health services. Upon leaving school, some youth may continue to use services.

To find local providers of mental health or substance abuse treatment, go to [samhsa.gov](https://www.samhsa.gov/find-treatment) (<https://www.samhsa.gov/find-treatment>).

Centers for Independent Living (CILs)

The Centers for Independent Living (CIL) program provides grants for consumer-controlled, community-based, cross-disability, nonresidential, private nonprofit agencies that individuals with disabilities design and operate within a local community. These centers provide an array of independent living services. At a minimum, centers are required to provide the following core services:

- Information and referral;
- Independent living skills training; and
- Peer counseling;
- Individual and systems advocacy; and
- Services that support transition from nursing homes and other institutions to the community, provide assistance to those at risk of entering institutions, and facilitate transition of youth to postsecondary life.

Most CILs are also actively involved in one or more of the following activities: community planning and decision making; school-based peer counseling, role modeling, and skills training; working with local governments and employers to open and facilitate employment opportunities; interacting with local, state, and federal legislators; and staging recreational events that integrate individuals with disabilities with their non-disabled peers. Many CILs also provide vocational services such as job development and placement. Some CILs are also actively involved in providing WIPA services.

The Centers for Independent Living program is funded and administered by the Rehabilitation Services Administration (RSA). This program provides support for the planning, conduct, administration, and evaluation of centers for independent living that comply with the standards and assurances in Section 725 of the Rehabilitation Act, consistent with state plans for establishing statewide networks of centers. The purpose of the Independent Living Program is to maximize the leadership, empowerment, independence, and productivity of individuals with disabilities and to integrate these individuals into the mainstream of American society. The Independent Living Program through RSA provides financial assistance to provide, expand, and improve independent living services; develop and support statewide networks of centers for independent living; and improve working relationships among state independent living rehabilitation programs, Centers for Independent Living, statewide Independent Living Councils (SILCs), Rehabilitation Act programs outside of Title VII, and other relevant federal and non-federal programs.

A directory of local CILS is available online

(<http://www.virtualcil.net/cils/>). More information about the **independent living movement** (www.ncil.org) is available online.

The State Protection and Advocacy System

The Protection and Advocacy (P&A) system is the one longstanding and institutionalized system of disability-related advocacy services available, free of charge, in every state. The P&A system has the capacity to provide a wide range of advocacy services to persons with disabilities through several specific federally funded P&A grants. Each P&A grant establishes a program with its own unique mandate.

Each state has a designated state P&A agency. Typically, this is an independent, not-for-profit agency such as Advocacy, Inc. in Texas or Protection and Advocacy, Inc. in California. In some states, the designated P&A agency will be part of the state government such as the Indiana Protection and Advocacy Services program. Most P&A systems deliver services through employees of the state-designated P&A agencies. However, some state P&A agencies will provide grants or subcontracts to other agencies to provide all or part of the services mandated under a particular P&A program.

All state P&A agencies employ, directly or through subcontractors, attorneys and other advocates to deliver services to eligible individuals with disabilities. The non-attorney advocates typically carry the title of advocate; some carry the title of paralegal.

The sections below describe the P&A programs that exist in each state. These include:

- Protection and Advocacy for the Developmentally Disabled (PADD)
- Protection and Advocacy for Individuals with Mental Illness (PAIMI)
- Protection and Advocacy for Individual Rights (PAIR)
- Protection and Advocacy for Assistive Technology (PAAT)
- Protection and Advocacy for Beneficiaries of Social Security (PABSS)

- Protection & Advocacy for Individuals with Traumatic Brain Injury (PATBI)
- Protection & Advocacy for Voting Accessibility (PAVA)
- The Client Assistance Program (CAP)

Although CAP does not carry the P&A name, most consider CAP a part of the P&A family of programs. Like the P&A programs, it's a federally funded advocacy program that exists in every state to serve persons with disabilities. In many states, the same agencies that deliver services under the other P&A grants offer the CAP program.

The services of the seven P&A programs and the CAP program will, in all states, typically fall under one of the following categories:

- Information and referral services;
- Individual representation, including pursuit of client objectives through negotiation, mediation, administrative appeals, and court actions;
- Investigation of allegations of abuse and neglect (primarily a function of the PADD and PAIMI programs); or
- Outreach and community education (e.g., speaking, dissemination of print and web-based materials).

In addition, many P&As dedicate staff time to activities such as sitting on boards and committees where they make decisions concerning disability service delivery and policy within a state, or region of a state.

In the descriptions below, some of the more typical P&A services are outlined with an emphasis on the type of services that would most likely help an SSI or SSDI beneficiary overcome a barrier to employment. Although individual P&A programs discuss typical services or advocacy cases, there is great overlap among the P&A programs regarding the types of services each offers to eligible individuals. For example, each of the four traditional P&A programs may become involved with Americans with Disabilities Act (ADA) issues. Each state P&A system develops its own set of priorities on how best to use its limited resources, and some state P&A programs do not provide the full range of services described below. In addition, many P&A agencies provide valuable services other than those described, including services they provide through additional, non-P&A sources of funding.

Description of the Individual P&A Programs

The Protection and Advocacy for Persons with Developmental Disabilities (PADD) Program was created by the Developmental Disabilities Assistance and Bill of Rights (DD) Act of 1975. The Act requires P&A programs to pursue legal, administrative, and other appropriate remedies to protect and advocate for the rights of individuals with developmental disabilities under all applicable federal and state laws. The governor in each state designated an agency to act as the P&A system, and provided assurance that the system was and would remain independent of any service provider. The 1994 amendments to the DD Act expanded the system to include a Native American P&A program. Administration for Children Youth and Families, Administration on Developmental Disabilities (ADD) administers the PADD program.

The Protection and Advocacy for Individuals with Mental Illness (PAIMI) Program was established in 1986. Each state has a PAIMI program that receives funding from the national Center for Mental Health Services. Agencies must protect and advocate for the rights of people with mental illness and investigate reports of abuse and neglect in facilities that care for or treat individuals with mental illness. Agencies provide advocacy services or conduct investigations to address issues that arise during transportation or admission to, the time of residency in, or 90 days after discharge from such facilities. The system designated to serve as the PADD program in each state and territory is also responsible for operating the PAIMI program. SAMHSA CMHS administers the PAIMI program.

The Protection and Advocacy for Individual Rights (PAIR) Program was established by Congress as a national program under the Rehabilitation Act in 1993. PAIR programs protect and advocate for the legal and human rights of persons with disabilities. Although PAIR is funded at a lower level than PADD and PAMI, it represents an important component of a comprehensive system to advocate for the rights of all persons with disabilities. The system designated to serve as the PADD program in each state and territory is also responsible for operating the PAIR program. OSERS RSA administers PAIR.

The Protection & Advocacy for Assistive Technology (PAAT) Program was created in 1994 when Congress expanded the Technology-Related Assistance for Individuals with Disabilities Act (Tech Act) to include funding for P&As to “assist individuals with disabilities and their

family members, guardians, advocates, and authorized representatives in accessing technology devices and assistive technology services” through case management, legal representation, and self-advocacy training. Originally passed by Congress in 1988, the Tech Act set up a lead agency in each state to coordinate activities to facilitate access to, providing, and funding for assistive technology devices and services for individuals with disabilities. The Office of Special Education and Rehabilitative Services, National Institute on Disability and Rehabilitation Research (NIDRR) administers PAAT.

The Protection and Advocacy for Beneficiaries of Social Security (PABSS) is the P&A program that was developed as a component of the Ticket legislation when it was passed in 1999. PABSS projects provide legal advocacy services to Social Security beneficiaries that support their efforts to obtain and maintain employment. Services can include assisting beneficiaries in disputes with ENs or WIPA projects, enabling beneficiaries to access and benefit from employment services such as VR or AJCs, and advocating for beneficiary rights regarding wage and hour disputes. PABSS projects investigate and support beneficiaries in situations involving representative payees.

Created by the Traumatic Brain Injury (TBI) Act of 1996 (Public Law 104-166) as amended, the **Protection and Advocacy for Individuals with Traumatic Brain Injury (PATBI) program** is designed to improve access to health and other services for all individuals with brain injury and their families through grants to State Agencies and Protection and Advocacy Systems. PATBI serves to protect the rights of adults with TBI and ensures access to services for students with TBI.

The Help America Vote Act, which was signed into law on October 29, 2002, will overhaul federal elections in the United States through new set of minimum voting standards that each state and territory must follow. The Act also authorizes the Secretary of Health and Human Services to provide funds to the P&A of each state and territory to ensure full participation in the electoral process for individuals with disabilities, including registering to vote, casting a vote, and accessing polling places. These funds created the **Protection & Advocacy for Voting Accessibility (PAVA) program** operated by the state Protection & Advocacy agencies.

The Client Assistance Program (CAP) was established as a mandatory program by the 1984 Amendments to the Rehabilitation (Rehab) Act.

Every state and territory, as a condition for receiving allotments under Section 110 of the Rehab Act, must have a CAP. CAP services include assistance in pursuing administrative, legal, and other appropriate remedies to ensure the protection of persons receiving or seeking services under the Rehab Act. The Rehabilitation Services Administration (RSA) also administers CAP.

More **information about the state protection and advocacy system** is available online (<https://acl.gov/programs/aging-and-disability-networks/state-protection-advocacy-systems>)

Public School Systems

Special Education

National and state laws govern special education services and supports for children with disabilities attending public schools. Congress passed the landmark legislation of the Education for All Handicapped Children Act (PL 94-142) in 1975 establishing a national policy for the education of all children with disabilities. In 1990, the law became the Individuals with Disabilities Education Act (IDEA), and Congress has reauthorized it twice, most recently in 2004. The law mandates a free appropriate public education (FAPE) for all children regardless of their disability. The federal law specifies children to receive services age three through 21. However, some states have authorized services beginning at an earlier age and extending past the age of 21. A free and appropriate public education (FAPE) means that special education and related services:

- Are provided at public expense, under public supervision and direction, without charge;
- Meet the requirements established by a state board of education;
- Include preschool, elementary school, middle school, or secondary education in a state; and
- Are provided in keeping with an individualized education program (IEP).

Children in special education receive specifically designed instruction to meet their unique needs. The five-step special education process begins

with identifying a child through reevaluation every three years to determine continuing need for special education and related services.

1. **Identification and referral:** When a child is suspected of having a disability, a referral, either written or oral, is given to the school requesting an evaluation.
2. **Evaluation:** The school then evaluates the child to determine whether or not the child has a disability as well as the nature and extent of the special education and related services needed.
3. **Determination of eligibility:** Based on the results of the evaluation, a team determines if a child is eligible to receive special education and related services.
4. **Development of an individualized education program (IEP) and determination of services:** If a child is found eligible to receive special education and related services, a team then develops and implements an appropriate IEP to meet the needs of the child. The IEP must be reviewed and revised at least annually.
5. **Reevaluation:** At least every three years, a team must reevaluate a child to determine whether he or she continues to need special education and related services.

Beginning in 1990, the Individuals with Disabilities Education Act (IDEA) required transition services for all children with disabilities. Secondary education transition is a results-oriented process focused on improving the academic and functional achievement of the child with a disability to facilitate the child's movement from school to post-school activities including postsecondary education, vocational education, integrated employment (including supported employment), continuing and adult education, adult services, independent living, and community participation. The IEP must contain transition goals and activities no later than the first IEP to be in effect when the child is 16 and updated annually. The law states that special education and related services prepare students for employment and independent living that makes it clear that educators, parents, and students must consider adult outcomes as they plan for students' school experiences.

U.S. Department of Veterans Affairs (VA)

A completely separate system of services provided by both the VA and the U.S. Department of Labor helps veterans re-enter the civilian workforce. Some programs are for veterans with disabilities, while other programs or services are available to all veterans. It's important to understand that individuals may receive services from BOTH the veterans system and the general service system, and CWICs should explore all potential options.

The following section will describe the major vocational rehabilitation and employment support programs offered by the VA to veterans with disabilities. For more information about **VA services**, refer to www.va.gov.

Also, keep in mind that a wide range of employment services and supports are available to all veterans of the U.S. armed forces, which are also not covered in this unit. For more information about these services, go to the **Department of Labor** (www.dol.gov/vets/).

The Vocational Rehabilitation and Employment (VR&E) Program

The Vocational Rehabilitation and Employment (VR&E) Program assists veterans who have service-connected disabilities with obtaining and maintaining suitable employment. This program is also referred to as the Chapter 31 program because Congress authorized it under Title 38, Code of Federal Regulations (CFR), Chapter 31. Services that the VR&E program may provide include:

- Comprehensive rehabilitation evaluation to determine abilities, skills, and interests for employment;
- Vocational counseling and rehabilitation planning for employment services;
- Employment services such as job-training, job-seeking skills, resume development, and other work readiness assistance;
- Assistance finding and keeping a job, including the use of special employer incentives and job accommodations, on-the-job training (OJT), apprenticeships, and non-paid work experiences;

- Post-secondary training at a college, vocational, technical, or business school;
- Supportive rehabilitation services including case management, counseling, and medical referrals; and
- Independent living services for veterans unable to work due to the severity of their disabilities.

Eligibility for the VR&E Program

The VR&E program is only available to certain individuals who meet very specific eligibility criteria. Active duty service members are eligible if they:

- Expect to receive an honorable discharge upon separation from active duty;
- Obtain a memorandum rating of 20 percent or more from the VA; and
- Apply for Vocational Rehabilitation and Employment (VR&E) services.
- Veterans are eligible if they:
 - Have received, or will receive, a discharge that is other than dishonorable;
 - Have a service-connected disability rating of at least 10 percent, or a memorandum rating of 20 percent or more from the Department of Veteran Affairs (VA); and
 - Apply for Vocational Rehabilitation and Employment (VR&E) services.
- VR&E services are only available to eligible individuals for a certain period of time, the “basic period of eligibility.” The basic period of eligibility in which veterans may use VR&E services is 12 years from the latter of the following:
 - Date of separation from active military service, or
 - Date the VA first notified the veteran of a service-connected disability rating.

The VA may extend the basic period of eligibility if the agency determines that a veteran has a serious employment handicap.

Applying for VR&E Services

Veterans and active duty service members can apply for **VR&E benefits** using the Internet (<https://www.ebenefits.va.gov/ebenefits/homepage>).

Veterans may also apply for VR&E services by mail by **completing VA Form 28-1900, Disabled Veterans Application for Vocational Rehabilitation** (<http://www.va.gov/vaforms/>). Veterans should mail the completed form to the nearest VA regional office.

VR&E Entitlement Determinations

Once an eligible veteran has applied for VR&E services, the VA schedules him or her to meet with a Vocational Rehabilitation Counselor (VRC) for a comprehensive evaluation to determine if he or she is entitled for services. A comprehensive evaluation includes:

- An assessment of the veteran's interests, aptitudes, and abilities;
- An assessment of whether service-connected disabilities impair the veteran's ability to find or hold a job using the occupational skills he or she has already developed; and
- Vocational exploration and goal development leading to employment or maximum independence at home and in the veteran's community.

During the entitlement determination, a Vocational Rehabilitation Counselor (VRC) works with the veteran to determine if an employment handicap exists. An employment handicap exists if the veteran's service connected disability impairs his or her ability to obtain and maintain a job. The VCR establishes entitlement to services if the veteran has an employment handicap and is within his or her 12-year basic period of eligibility and has a 20 percent or greater service-connected disability rating.

If the service-connected disability rating is less than 20 percent, or if the veteran is beyond the 12-year basic period of eligibility, then the VRC must find a serious employment handicap to establish entitlement to VR&E services. The VRC bases the serious employment handicap on the extent of services the veteran requires to overcome his or her service and non-service connected disabilities, permitting the return to suitable employment.

VR&E Services

Once the VRC determines a veteran is entitled for VR&E services, the veteran and VRC work together to:

- Determine transferable skills, aptitudes, and interests
- Identify viable employment or independent living services options
- Explore labor market and wage information
- Identify physical demands and other job characteristics
- Narrow vocational options to identify a suitable employment goal
- Select a VR&E program track leading to an employment or independent living goal
- Investigate training requirements
- Identify resources the veteran needs to achieve rehabilitation
- Develop an individualized rehabilitation plan to achieve the identified employment or independent living goals

A rehabilitation plan is an individualized, written outline of the services, resources, and criteria that the veteran will use to achieve employment or independent living goals. The plan is an agreement signed by the veteran and the VRC and is updated by the VRC as needed to assist the veteran in achieving his or her goals.

Depending on their circumstances, veterans will work with their VRC to select one of the following five tracks of services:

1. **Reemployment with Previous Employer:** This option is designed for those individuals who wish to return to work with a former employer. Services under this option may include advice about reemployment rights, consultation with the employer, work adjustment services, job accommodations, job modifications, short-term training, licensure, and certifications.
2. **Rapid Access to Employment:** This option is designed for those veterans who already possess most of the necessary skills to compete for suitable employment opportunities and wish to obtain employment as soon as

possible. Services under this option may include short-term training, licensure, certifications, job readiness preparation, resume development, job search assistance, job accommodations, and post-employment follow-up.

3. **Self-Employment:** This option is designed for individuals who have limited access to traditional employment, need flexible work schedules, or need a more accommodating work environment due to their disabling conditions or other life circumstances. Services under this option may include analysis of the viability of a business concept, development of a business plan, training in the operation of a small business, marketing and financial assistance, and guidance on obtaining adequate resources to implement the plan.
4. **Employment through Long-Term Services:** This option is designed for those individuals who need specialized training or education to obtain and maintain suitable employment. Services under this option may include on-the-job training (OJT), apprenticeships, post-secondary education such as college, vocational or technical school, internships, job shadowing, work monitoring, work-study, and public-private job partnering.
5. **Independent Living Services:** This option is designed for individuals whose disabilities are so severe that they are currently unable to pursue an employment goal. These individuals may need rehabilitation services to live more independently and to increase their potential to return to work. Services under this option may include independent living skills training, assistive technology, services at special rehabilitation facilities, and connection to community-based support services.

After the VRC and veteran work together to develop and sign a plan, a VRC or case manager will continue to work with the veteran to implement the plan to achieve suitable employment or independent living. The VRC or case manager will provide ongoing counseling and assistance, and coordinate services such as tutorial assistance, training in job-seeking skills, medical and dental referrals, adjustment counseling, payment of

training allowance, if applicable, and other services as required to help the veteran achieve rehabilitation.

Independent Living Services Provided by VR&E

The Independent Living program ensures that each eligible veteran is able, to the maximum extent possible, to live independently and participate in family and community life, increasing his or her potential to return to work.

The independent Living program is designed for veterans whose service-connected disabilities are so severe they are currently unable to pursue an employment goal. Services may include the following:

- Assistive technology
- Specialized medical, health, or rehabilitation services
- Services to address any personal or family adjustment issues
- Independent living skills training
- Connection with community-based support services

When a VRC determines that employment goals aren't currently feasible, he or she will need to conduct an evaluation of the veteran's independent living needs. The VRC and veteran will work together to identify the veteran's needs and the services required to address the identified needs. The VRC will write an individualized Independent Living Program Plan providing the services necessary to meet the veteran's identified needs. Referral to specialized rehabilitation facilities or for consultation with other rehabilitation professionals may be necessary to development and implement the veteran's ILP.

The VetSuccess on Campus Program (VSOC)

The VSOC program aims to help student veterans and their qualified dependents succeed and thrive through a coordinated delivery of on-campus benefits assistance and counseling, leading to completion of their education and preparing them to enter the labor market in viable careers. VSOC Counselors may provide the following services:

- Community and on-campus outreach;
- Communication with student veterans and their dependents to address questions regarding VA education benefits, health services, and general VA benefits;

- Educational and vocational assessments and counseling designed to help an individual choose a vocational direction and determine the course of action needed to achieve the chosen goal; assistance may include interest and aptitude testing; occupational exploration; setting occupational goals; locating the right type of training program; and exploring educational or training facilities that might help achieve an occupational goal;
- Survivors and Dependents Assistance, which provides education and training opportunities to eligible dependents of certain veterans;
- Adjustment counseling to resolve problems that interfere with completion of education programs and entrance into employment;
- Referrals for more intensive health services, including mental health treatment through VHA medical centers, Community-Based Outpatient Clinics, or Vet Centers;
- Assistance to veterans applying for other VA benefits; and
- Referrals to community organizations as needed.

Additional information on **VetSuccess on Campus can be found online on the U.S. Department of Veterans Affairs**

(<https://www.benefits.va.gov/vocrehab/vsoc.asp>)

Educational and Career Counseling Services Provided by VR&E

VA's Education and Career Counseling program is a great opportunity for service members and veterans to get personalized counseling and support to help guide their career paths, ensure most effective use of their VA benefits, and achieve their goals.

Eligibility:

- Transitioning service members within six months prior to discharge from active duty
- Veterans within one year following discharge from active duty
- Any service member or veteran currently eligible for a VA education benefit
- All current VA education beneficiaries

Services include assisting the service member or veteran with:

- **Career choice:** Understanding the best career options based interests and capabilities.
- **Benefits coaching:** Guidance on the effective use of r VA benefits and/or other resources to achieve education and career goals.
- **Personalized support:** Academic or adjustment counseling and personalized support to help remove any barriers to success.

Veterans may apply by following these steps:

1. Access the **VA Form 28-8832**
(<https://www.vba.va.gov/pubs/forms/VBA-28-8832-ARE.pdf>)
2. Print, complete, and mail the form to the nearest VA regional office.
3. Eligible individuals will be invited to attend an orientation session at the nearest VA Regional Office.

Community Agencies Administering Individual Development Accounts (IDAs) and Other Asset Development Programs

In the past, our best efforts to help American families living in poverty focused almost exclusively on providing income supports, such as TANF and SSI monthly cash payments. In recent years, there has been a growing emphasis on moving beyond these methods. While monthly cash payments provide much-needed assistance to meet basic living needs, they do very little to help poor families save for their future and become more self-sufficient. Some of the most current thinking in poverty reduction focuses on the accumulation of “wealth,” not just on cash flow. This approach encourages people to save money and invest in assets that increase in value over time based on the theory that asset development has the capability to both move people out of poverty and keep them out over time. Unfortunately, this population has historically been left out of asset building programs for a variety of reasons, including lack of information. This is beginning to change, and the new way of thinking about asset development is gaining a foothold in the disability services community.

Achieving a Better Life Experience (ABLE) Accounts

A new asset-building opportunity for beneficiaries is the Achieving a Better Life Experience (ABLE) Act. This Act, signed into law in December 2014, provides an opportunity for certain individuals with disabilities to establish a tax-favored savings account that is excluded from the SSI resource limit, up to \$100,000, and from certain other means-tested federal programs, up to the ABLE program limit.

The beneficiary can use the funds in the account to pay for qualified disability expenses. The expenses must relate to blindness or disability, including expenses for maintaining or improving health, independence, or quality of life. These expenses may include education, housing, transportation, employment training and support, assistive technology and related services, personal support services, health, prevention and wellness, financial management and administrative services, legal fees, expenses for ABLE account oversight and monitoring, funeral and burial, and basic living expenses.

The ABLE Act addresses the significant costs that individuals with disabilities have in living or working in the community. For more information on ABLE accounts, go to online to **[ABLE National Resource Center](https://ablenrc.org/)** (<https://ablenrc.org/>).

Individual Development Accounts (IDAs)

Individual Development Accounts (IDAs) are a great example of public policy that supports asset development. IDAs are special accounts that allow members of low-income groups (including persons with disabilities) to save for specific goals such as home ownership, small business ownership, or post-secondary education while also receiving matching funds and financial counseling. An IDA participant identifies a specific asset that he or she would like to acquire and works with the IDA program to develop a savings plan that will make it feasible to reach the goal and ultimately purchase the asset. The individual then begins to deposit a certain amount of earned income on a regular basis, typically monthly, into an IDA account based on his or her plan.

What defines the IDA savings account is that participants are eligible to receive matching funds if they use their savings to purchase an eligible asset. The match rate is the amount that the IDA program contributes for each dollar that a participant saves. The rate varies greatly across IDA programs and can range anywhere from \$1 to \$8 of match for every

\$1 of earnings saved. For example, if a program has a \$2 match rate for every \$1 saved, each time a participant deposits \$25 in his or her IDA account, the IDA program allocates an additional \$50 in matching funds for their savings. Match dollars for IDAs come from many different places such as government agencies, private companies, churches, or local charities. In most cases, donors can get a tax deduction for contributions to IDAs. Depending on the program, the participant may not actually place the matching funds into the IDA account during the savings period, but could put them in a separate account until he or she is ready to purchase the asset. When the account holder is ready, he or she uses both the savings and the match to purchase the asset. By leveraging saved dollars against matched dollars, individuals can grow their savings more quickly and be successful in purchasing an asset with long-term return potential.

IDAs are usually offered through programs that involve partnerships between local non-profit organizations and financial institutions. The IDA program recruits participants, and provides or arranges with community partner organizations to provide financial education classes for participants. They may also provide or arrange for IDA participants to receive one-on-one counseling and training. After signing up for an IDA program, each participant opens up an account with the partnering bank or credit union. The bank or credit union handles all transactions to and from the IDA, just as they do with other types of savings accounts. Each month, IDA participants receive a report telling them how much money (individual savings plus match plus interest) is accumulating in their IDA. An IDA program can be as short as one year or as long as five years. IDA participants may have the money dispersed as soon as they have reached their savings goal and as long as they have approval from the IDA program sponsor. Some IDA participants choose one big savings goal, such as a home, but others save for a number of related goals, such as textbooks and college tuition.

There are two kinds of IDAs. Some are federally funded; some have funding provided by other organizations. The Department of Health and Human Services, Administration for Children and Families (ACF) oversees the Assets for Independence (AFI) federal grant program, which has historically been one of the primary federally funded IDA programs. In fiscal year 2017, no funds were appropriated for the AFI program and ACF will not be making new grant awards. At this time, grantees are fading out their programs, however, organizations operating AFI projects

with existing grants are responsible for continuing to operate those projects for the funded project period indicated on the notice of their grant award. All federal funding for AFI IDA projects will cease after federal fiscal year 2021. IDA programs with other funding continue to operate.

For more information on IDA programs that may be available in your area, go to prosperitynow.org/map/idas.

For detailed information about how ABLE accounts, IDAs, and other asset development programs operate and how funds set aside in these programs may affect Social Security disability benefits, refer to Module 5, Unit 7.

Conclusion

This unit provided brief overviews of the services offered by the most common agencies that assist individuals with disabilities. It's important to recognize that there will be variance among states and local areas in terms of which agencies are operational and how they provide services. In addition, we did not discuss many small service providers in this unit. You will need to scan your local communities and note all providers of services that could potentially help Social Security disability beneficiaries achieve their employment goals. You should maintain and update regularly any contact information for all potential service providers. WIPA Project Managers need to ensure that they maintain agency information in a centralized location accessible to all team members. We also recommend that personnel receive training on the various service systems so that they will understand all of the local rules governing who is eligible for services, which agencies provide services, and how beneficiaries can access them.

