Part II Chapter 10 – Managing Initial Requests for WIPA Services

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Learning Objectives

After you have read this chapter and completed the associated lectures and activities during WIPA Initial Training, you should be able to:

1. Describe the role of the Ticket to Work Help Line in making direct referrals for WIPA services.
2. Describe the WIPA eligibility requirements and distinguish between beneficiaries who are eligible from those who are not.
3. Describe the CWIC's role in assisting individuals who are ineligible for WIPA services.
4. Describe Social Security's five priorities for individualized WIPA services and distinguish between beneficiaries who are in a priority situation from those who are not in urgent need for services.
5. Describe the difference in services provided to beneficiaries who are in a priority situation for individualized WIPA services and those who are not.
6. Describe the CWIC's role in assisting eligible individuals who are not in a priority situation for individualized services.
7. Identify beneficiaries who are in a priority situation for individualized WIPA services who have urgent needs for services.

List of Acronyms

- BS&A – Benefits Summary and Analysis
- BSS – Beneficiary Support Specialist
- CDB – Childhood Disability Beneficiary
- DWB – Disabled Widow(er) Benefits
- EN – Employment Network
- MQGE – Medicare Qualified Government Employee

- SGA – Substantial Gainful Activity
- SSDI – Social security Disability Insurance
- SSI – Supplemental Security Income
- VR – Vocational Rehabilitation

Importance of Managing Initial Requests for WIPA Services

When managing initial requests for service, CWICs must focus on providing work incentives planning and assistance services that support employment. Remember, the purpose of the WIPA program is to:

- Support Social Security disability beneficiaries who choose to work by providing accurate and complete information about work supports and work incentives;
- Support beneficiaries to successfully maintain paid employment over time by helping them anticipate benefit changes, report earnings, and manage work incentives; and
- Provide work incentives counseling that enables beneficiaries to meet their employment and earnings goals.

Social Security has developed very clear boundaries for you to follow when determining who to serve and what type of services to deliver. If you provide services to people who are ineligible, spend time resolving benefits problems for individuals with no interest in employment, or assist in areas that are beyond your scope of work, you will have less time available to perform the services Social Security requires.

WIPA Referral Sources

The majority of referrals for WIPA services come from the Ticket to Work Help Line. This is a call center operated by Cognosante through the Ticket Program Manager contract. Social Security requires WIPA programs to include the Ticket to Work Help Line contact information on websites, in brochures, and within presentations. WIPA programs may also include the WIPA program direct contact information in outreach materials.

Help Line Beneficiary Support Specialists (BSS) verify that callers are eligible for WIPA services and screen callers to determine if they meet the priorities for direct referral to WIPA programs. BSSs also provide general information about the Ticket to Work program and Social Security work incentives, and can provide referrals for other services as needed. Virginia Commonwealth University's (VCU) National Training and Data Center (NTDC) trains Help Line BSSs about WIPA eligibility and services.

Many WIPA programs also accept referrals directly from beneficiaries, their representatives, and local agencies. You will need to meet with your Program Director to learn more about referral sources in your area and the referral protocols your WIPA program requires.

Determining Eligibility for WIPA Services

Not everyone who contacts a WIPA program will be eligible for services. When screening WIPA referrals, your first task is to determine whether the caller is eligible for services. The current WIPA Terms and Conditions Document defines eligibility as:

WIPA projects serve beneficiaries who are between age 14 and full retirement age, who receive any of the following benefits based on their own disabilities:

- SSDI including Disability Insurance Benefits for disabled workers, Childhood Disability Benefits (CDB) for adult children with disabilities of disabled, retired, or deceased workers, and Disabled Widow(er)'s Benefits (DWB) for widows and widowers with disabilities who are at least aged 50;
- SSI benefits based on blindness or disability;
- Medicare under the Extended Period of Medicare Coverage (for former disability beneficiaries performing substantial work);
- Medicaid under Section 1619(b) of the Social Security Act (for SSI beneficiaries ineligible for payment due to work income) who use Medicaid;
- A state supplementary SSI payment (even if the beneficiary is not due a Federal SSI payment); or
- Medicare coverage based on disability and Medicare Qualified Government Employment (MQGE).

You will find more specific information about **WIPA eligibility requirements** on the NTDC website at https://vcu-ntdc.org/resources/viewContent.cfm?contentID=65eligibility

Making WIPA Eligibility Determinations

Your first contact, or initial call, with the beneficiary begins the process of intake services. During your initial call with the beneficiary you will determine or confirm WIPA eligibility. Determining WIPA eligibility is straightforward for people referred by the Ticket to Work Help Line. As explained earlier, Help Line Beneficiary Support Specialists (BSSs) verify that callers are eligible for WIPA services and screen callers to determine if they meet the priorities for direct referral to WIPA programs. If the Help Line referred the person, you can find the type(s) of Social Security benefit listed on the SSA-4567 Help Line Referral form attached in the encrypted referral email. In these cases, you should confirm the type of benefits received with each person during the initial call. If there are discrepancies between what the beneficiary says they receive and what shows in the referral section, ask additional questions to clarify.

For beneficiaries who contact you directly, during your initial call, you will need to establish that the person meets the eligibility requirements first. Some possible questions to ask would include:

- Can you tell me what type of benefits you get from Social Security?
- Do you know if you get Social Security disability benefits (SSDI) or SSI?
- Do you get more than one benefit payment from Social Security each month?
- How much is your Social Security payment?
- Do you know if your benefits are based on your past work, or do you get benefits from the earnings record of a parent or a spouse?
- Do you know if you have Medicare or Medicaid health insurance?

- Do you have any letters from Social Security that you could read to me?

These questions are just a beginning. Depending on how the individual responds, you may need to ask additional questions to determine exactly what type of Social Security benefits the individual is receiving and whether or not the benefit is based on disability. In the majority of cases, you will be able to know if a caller is eligible by using phone interview techniques.

If you cannot determine eligibility by asking the questions presented above, another alternative for verifying basic Social Security benefit information is the "my Social Security" online portal system. Beneficiaries can go to Social Security's website and create a personalized account that they can use to print a benefit verification letter. The beneficiary will also be able to see their record of annual earnings, benefit amount, and payment information. Beneficiaries can change their address, phone number, and direct deposit through this portal. Beneficiaries can **sign in or create a my Social Security account** at www.ssa.gov/myaccount.

What to do about Ineligible Callers

When you identify an ineligible caller, begin by stating that you are unable to provide WIPA services and offer a short explanation of the WIPA eligibility requirements. Ask the caller what the presenting need is and recommend alternate referral sources that could potentially assist the individual. Be polite and professional when assisting ineligible callers, but do not allow these calls to consume a lot of your time.

Determining the Priority Level of Eligible Individuals

Once you determine that an individual is eligible for WIPA services, the next step of your initial call is determining whether or not the beneficiary is in a high priority situation for individualized WIPA services.

Social Security requires that WIPA programs prioritize services to beneficiaries who are most vulnerable to overpayment, and most in need of immediate attention. The current Terms and Conditions states that WIPA programs must serve beneficiaries meeting the following priority order, regardless of the referral source:

1. Beneficiaries who are working full-time, are self-employed full-time or are about to start full-time work.
2. Beneficiaries who are working part-time, are self-employed part-time or about to start part-time work.
3. Beneficiaries who have had a job interview within the 30 days prior to their first contact with the WIPA program or who have a job interview within the two weeks following initial contact with the WIPA program.
4. Beneficiaries seriously considering employment, who are currently receiving services from a State Vocational Rehabilitation (VR) agency, or who have assigned their Ticket to an Employment Network (EN) or other vocational program, or who indicate serious intent to work.
5. Other beneficiaries seeking work incentives counseling if the WIPA program has capacity to serve them.

Note: Beginning with referrals in calendar year 2024, the Ticket to Work Help Line will focus on referrals fitting the first two priority categories above.

Once you have established that a caller is eligible for WIPA services, you should begin asking questions about the person's employment. Employment status is the factor that determines whether someone is in a high priority situation for in-depth benefits analysis and work incentives counseling. After determining that the beneficiary fits a high priority category for individualized WIPA services, take time to explain those services, how they will benefit the individual, and the next steps you need to take to provide those services. Once you have determined an individual meets eligibility, fits high priority requirements and you have explained next steps you are ready to move to the next step of intake services which will be covered in the next chapter.

Understanding Individualized WIPA Services

Individualized work incentives planning and assistance requires CWICs to perform extensive information gathering by conducting a comprehensive intake interview verify all benefits an individual receives, analyze the effect of the individual's employment on benefits, and provide accurate information about work incentives. For most beneficiaries receiving individualized WIPA services, CWICs provide a written summary of the customized analysis known as a Benefits Summary and Analysis (BS&A) report. CWICs follow the written BS&A report with counseling and direct assistance to complete wage reporting responsibilities, apply work incentives, and resolve any problems that may occur. CWICs typically provide this assistance over a period of weeks, months, or even years.

Social Security developed the priorities described above to guide CWICs in managing the high volume of WIPA service requests. WIPA eligible beneficiaries who are in situations that do not meet Social Security's priorities do receive assistance, but typically do not get intensive benefits analysis or ongoing work incentives counseling and support. CWICs address the needs of this group by providing basic summary information about benefits, work incentives, programs or services. This type of service does not require extensive information gathering or verification of benefits. Most often, CWICs handle these requests with one or two phone or email contacts with the beneficiary. In some instances, CWICs may supplement the information provided during phone or email communication with printed resources. Services to this group do not usually involve repeated contacts with the beneficiary.

What to do About Beneficiaries in Priority Situations Who Decline Individualized WIPA Services

Keep in mind that beneficiaries who are in high priority situations for WIPA services must have an interest in receiving individualized, employment-focused benefits counseling in order for you to provide the services. You need to get the beneficiary's permission to move forward with information gathering, benefits verification, and benefits analysis. Be careful when you are discussing this with beneficiaries. Never assume that a caller who begins by asking questions about benefits issues unrelated to employment is uninterested in WIPA services. Beneficiaries may have many benefits issues they want to discuss and questions related to employment may only be a part of the puzzle. When you ask beneficiaries if they want to move forward with individualized WIPA services, some beneficiaries will decline to participate. When this happens, be sure to describe the valuable information and support you can provide to avoid future benefit problems. Make sure beneficiaries understand that you cannot provide this customized service without conducting a thorough intake interview and verifying benefits with Social Security and other agencies. Use your best persuasive skills to engage beneficiaries in individualized work incentives counseling – particularly those who are already employed. If they decline, respect that, but offer an invitation to call back if their needs change in the future.

What to do About Eligible Beneficiaries Who Are Not in a Priority Situation for Individualized WIPA Services

You will receive some requests for services from individuals who have only begun to think about the possibility of going to work for the first time or returning to work. Many beneficiaries at this stage have no clear vocational goal and have taken few, if any, steps to prepare for employment. You will also encounter some beneficiaries who state they are not interested in working, or feel they are unable to work. Sometimes, beneficiaries say they are not interested in working because they are fearful about how paid work will affect benefits. They may be unsure of what they are able to do or would require significant workplace supports in order to be successful. These are people who need information you can provide, even though they are not candidates for individualized benefits analysis and work incentives counseling. When talking to beneficiaries who are not in a high priority situation for individualized WIPA service, focus on the following points:

- Help beneficiaries think about whether or not they are physically and emotionally ready to work. Make sure they know that it is possible to attempt work for a period of time and not lose benefits.
- Refer beneficiaries who need vocational counseling or other employment support to agencies providing those services. Assure beneficiaries that work place supports provided by the vocational services agencies and job site accommodations can help even those with the most severe disabilities be successful in employment.

- Discuss barriers to employment beneficiaries' face. Offer information and referrals about services and supports that could help overcome these barriers.
- Be sure to answer any questions beneficiaries pose and provide basic information and referral services to meet presenting needs – even those unrelated to employment. We describe information and referral services in detail in Chapter 11.
- Provide general information about how work will affect Social Security disability benefits or Supplemental Security Income and send beneficiaries written information such as the Redbook or factsheets about work incentives so they have something to refer back to later.
- Explain that Medicare, Medicaid, Medicare Savings Programs and the Medicare Part D Low-income Subsidy protections may permit them to keep health insurance even if they earn wages.

You should not make further proactive contact with individuals who are not a priority for individualized WIPA services. You would also not conduct any further information gathering or verification of benefits since these tasks are only required when you provide in-depth benefits analysis and work incentives counseling. In many cases, this initial phone call will be the only contact you have with the person. However, you should encourage beneficiaries to contact you again to request individualized WIPA services when they make the decision to pursue employment and have a clear earnings goal. By providing a bit of encouragement, targeted information, and counseling early on, some beneficiaries may later decide that work is a viable option after all.

Determining Which Beneficiaries Have an Urgent Need for WIPA Services

When beneficiaries have an urgent need for WIPA services, it means that they are at imminent risk of a potential benefits problem related to employment such as an overpayment or unexpected loss of cash payments or health insurance. In the WIPA program, urgency relates to how quickly a CWIC needs to provide individualized work incentives counseling and support in order to avoid or resolve a potential problem.

Here are some examples of the types of urgent issues that high priority beneficiaries might present:

- Caller has a job offer and needs immediate assistance to understand how the job will affect cash benefits and public health insurance.
- Caller just started working full-time and needs information about how to report wages to Social Security.
- Caller is considering a promotion at work but needs information about how the promotion would affect benefits.
- Caller has been working part-time for over six months, but her SSI cash payment has never changed. She is afraid that Social security never got the wage information she submitted.
- Caller has received a letter from Social Security saying that he is no longer disabled due to Substantial Gainful Activity (SGA)-level work activity. Caller is considering quitting his job and seeks immediate information on how countable earnings are determined.
- Caller earns enough money to cause the cessation of his SSI cash payments. He just received a letter from the state Medicaid agency that his Medicaid will stop as well.
- Caller works part-time and receives services through a Medicaid waiver program. The state Medicaid agency has determined that the caller will need to pay much of his income, called “patient liability” to the waiver provider, which would consume almost all of his wages.
- Caller is working and has expenses that appear to be IRWEs, but needs help getting Social Security to review and approve the expenses.

These examples are beneficiaries with an urgent need for employment-focused benefits counseling and assistance. When you encounter a beneficiary with an urgent need, you must move quickly to conduct an intake interview, verify all benefits, and begin providing individualized WIPA services, including help resolving the presenting problem. We describe all of these important components of WIPA services in detail in subsequent chapters.

Handling Calls from Beneficiaries who are not in a Priority Situation for Individualized Services, but who have Urgent Benefits Issues

You will get calls from beneficiaries who do not meet a priority category for individualized services, but do have a problem(s) with their benefits that they would like you to help with. Some of these problems are truly urgent in that they are likely to cause an overpayment, loss of critical benefits, or both. Here are some examples:

- Caller is not interested in employment but has just received notice from Social Security that her benefits are being terminated due to medical recovery. She relies on this check to pay all of her expenses and is very upset.
- Caller is unable to work due to severe health problems and receives attendant care services through the Home and Community Based Services Medicaid waiver. He has received an inheritance and is at risk of losing Medicaid coverage due to excess resources.
- Caller is not working or pursuing employment in any way, but recently became engaged and wants to know how getting married will affect his benefits.
- Caller is the representative payee of an SSI recipient who has just received a letter from Social Security indicating that she has been overpaid by a substantial amount due to unearned income which was not reported. The beneficiary is in a non-vocational day program and is not seeking paid employment.

You need to be careful how much time you spend working on urgent issues for beneficiaries who are not a priority for individualized WIPA services. These issues are common and if you do not limit your efforts, you will spend far too much time reacting to these non-employment related crisis situations. Remember – the priority of WIPA services is providing employment-focused benefits counseling. You need to spend the bulk of your time and expertise supporting beneficiaries who are working or actively pursuing employment.

Although these individuals described above are not in a priority category for in-depth work incentives counseling, they do require your assistance. It is not ethical to simply ignore these urgent pleas for help. The problem CWICs face is how to assist without going too far. Here are the steps you should take:

1. Make sure you understand the presenting problem. Ask questions to piece together the chain of events and grasp what occurred to create the problem.
2. Explain to the beneficiary what the problem is and how it occurred.
3. Provide clear and specific information about steps the beneficiary can take to resolve the problem.
4. If possible, send beneficiaries written information or forms they may need to complete to resolve the problem (i.e. Request for Reconsideration form, Request for Waiver of Overpayment form)
5. Provide referrals to other sources of assistance as needed and available.

Although you may want to tell the beneficiary to contact you again later with questions, you should not offer to contact the individual proactively. Make sure the individual understands the limits to the support you can offer.

Next Steps

This chapter provided an overview of the WIPA referral process and how CWICs should manage initial requests for service. The most important aspect of managing referrals is 1.) Determining which callers are eligible for WIPA services; and 2.) Determining which of the eligible callers meet Social Security's priorities for receiving individualized WIPA services. When CWICs screen callers for eligibility and priority efficiently, they are better able to manage their daily work and achieve the goals of the WIPA program.

The role CWICs play in screening and triaging referrals is critically important as it sets the stage for all subsequent work. Here are some next steps you can take to make sure you manage initial requests for service correctly:

1. Begin by meeting with your WIPA Program Director to find out how your program handles referrals. In some programs, there is a central point of contact for all referrals. In other programs, all CWICs accept referrals from the Help Line, beneficiaries or other referral sources.

2. If possible, you should "shadow" experienced CWICs to learn how they handle initial referrals. Experienced CWICs can help you develop scripting to guide initial calls or offer tips about questions to ask and in what order.

3. When questions arise, be sure to reach out to your assigned NTDC Technical Assistance Liaison. That person can help answer your questions about beneficiary eligibility and priority. You can also refer to several resource documents about **WIPA eligibility and priority** available on the NTDC website at https://vcu-ntdc.org/resources/resourceDetail_search.cfm?id=6#DeterminingEligibility,GatheringInformationandVerifyingBenefits.