Effectiveness of the Ticket to Work Program for Beneficiaries with Blindness or Low Vision: Comparisons with Other Beneficiaries

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The Ticket to Work (TTW) program began in 13 states in February of 2002, and was implemented nationwide in the Fall of 2004. This program, which is funded by the federal government, is meant to assist persons who are receiving disability benefits from the Social Security Administration (SSA) to gain employment, with the ultimate goal of terminating SSA benefits and thereby providing a cost-savings for the government (Livermore et al., 2003). Other goals of the program include increasing beneficiary choice in rehabilitation service providers and to improving the quality of rehabilitation services by providing for competition among service providers. The manner in which the program was implemented caused concerns to be raised in the field of blindness rehabilitation about whether it would be effective with persons with blindness or low vision. Employment networks (ENs), who provide services to beneficiaries under the TTW program, have the option of refusing services to beneficiaries for any reason and could select not to serve persons with blindness or low vision. ENs may choose not to serve blind beneficiaries because they: may require a higher level of earnings to terminate benefits, are more likely to need expensive services and/or assistive technology, may be perceived as difficult to place, and require assistance from persons with specialized training in blindness rehabilitation (Cavenaugh, 1999, 2000; Gallagher, 1988; Spungin, 1997).

Reports to date (e.g., Thornton et al., 2004, 2006) have indicated that the program has not been very successful, with only a small percentage of beneficiaries assigning their tickets (i.e., less than 1.5%). Although only a small percentage of beneficiaries have assigned their tickets, a relatively large number of beneficiaries are using tickets and therefore it is important to evaluate the program’s effectiveness with these people. To evaluate the effectiveness of the TTW
program with beneficiaries with blindness or low vision, comparisons between these populations and beneficiaries with other disabilities in terms of ticket use and preliminary outcomes were conducted. Three hypotheses were investigated:

1. Beneficiaries with blindness or low vision are less likely to assign their tickets when compared to all other beneficiaries.

2. Beneficiaries with blindness or low vision are less likely to assign their tickets to an EN (rather than a vocational rehabilitation [VR] agency) when compared to all other beneficiaries.

3. Beneficiaries with blindness or low vision who assign their tickets are less likely than other beneficiaries to achieve employment and stop cash benefits.

Method

Data and Population. The data used for the analyses was SSA administrative data taken from the Ticket Research File (TRF), which is an analytical file that contains longitudinal data on beneficiaries eligible for the TTW program (Hildebrand, Loewenberge, & Phelps, 2005). The database contains TTW information, demographic information, and monthly records for these beneficiaries from January 1994 through December 2004. In October 2005, when the data extract used for the analyses was pulled, the total number of beneficiaries who had received a ticket was 10.6 million, and this represents the population used for the first hypothesis. The population used for hypothesis 2 consisted of all beneficiaries who had assigned a ticket ($N = 98,948$), while the remaining hypothesis consisted of only those beneficiaries who had assigned a ticket before October 1, 2004 ($N = 79,613$), and a subgroup of this population, only SSI beneficiaries ($N = 38,249$). Blind beneficiaries were identified by being classified as statutorily blind (i.e., those meeting the definition of legal blindness), and beneficiaries with low vision were identified by
having a diagnosis associated with visual impairment (e.g., retinal detachments and defects, other retinal disorders glaucoma, cataract, visual disturbances, blindness or low vision, and strabismus and other disorders of eye movement). Because these two groups differ in terms of level of visual impairment and in terms of SSA rules (only those classified as statutorily blind receive special benefits, such as a higher SGA level for SSDI beneficiaries and blind work expenses), analyses were conducted with the groups separately.

Variables. The independent variable in all analyses was type of disability (i.e., blindness, low vision, or other disability). Four dependent variables were investigated in this research study: assignment of ticket (yes or no), who ticket was assigned to (EN or VR), employment at SGA, and stopped benefits due to work. The first two variables are present in the database, while the second two variables had to be created from several other variables available in the database. Employment at SGA (the standard SGA level rather than the “blind” SGA level was used) was calculated from a monthly earnings variable, which is only available for beneficiaries who receive SSI. Mathematica Policy Research, Inc., the organization contracted by SSA to evaluate the TTW program, developed an algorithm to identify those beneficiaries who stopped benefits due to earnings in a given month. This algorithm was used to create the second outcome variable used in this study. As beneficiaries’ status on these two outcome variables can change, they were calculated monthly. For the purpose of these analyses, information from the last month for which data was available was used (December 2004).

Data Analysis. Percentages of each group were compared for each dependent variable, and relative risks were calculated for the comparisons between the blind and low vision groups to the other disability group. Because the entire population of interest was included in these analyses, any differences found are real differences. Therefore statistical significance tests were
not necessary and were not conducted. Relative risks are a measure of effect size, which can help
the reader evaluate importance of the findings. They are calculated by taking the ratio of the
percentage of an outcome for one group compared to the percentage of the same outcome for the
other group. The relative risk can be interpreted as the relative likelihood of an event occurring
between two groups. Relative risk values below 1 indicate that the event is less likely to occur
for a group, and values greater than 1 indicate an event is more likely to occur for a group.

Results

_Hypothesis 1 and 2._ Contrary to the first hypothesis, beneficiaries with blindness or low
vision were _more_ likely than beneficiaries with other disabilities to assign their ticket. This
difference was especially substantial for beneficiaries who were statutorily blind, as they were
almost twice as likely to assign a ticket than those with other disabilities. As hypothesized,
beneficiaries with blindness and low vision were substantially less likely to assign their tickets to
ENs. Differences were slightly larger for blind beneficiaries, who were almost half as likely to
assign their tickets to ENs compared to beneficiaries with other disabilities. (See Table 1 for
complete results.)

_Hypothesis 3._ Blind beneficiaries receiving SSI who assigned their tickets were more
likely to be employed at SGA than both other groups, while SSI beneficiaries with low vision
who assigned their tickets were less likely to be employed at SGA than those with other
disabilities. Both beneficiaries with blindness and beneficiaries with low vision were less likely
to stop cash benefits due to earnings from employment than beneficiaries with other disabilities.
Beneficiaries with other disabilities were more than 1.5\(^1\) times more likely to stop cash benefits

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\(^1\) These values are obtained by taking the inverse of the relative risk values presented in Table 1. Generally,
interpretation is easier when reporting the value greater than 1 rather than less than 1.
than beneficiaries with blindness. They were 1.35\textsuperscript{1} times more likely to stop cash benefits than beneficiaries with low vision.

**Discussion**

Percentage differences between groups tended to be small. However, because percentages for each dependent variable were small, these small differences were meaningful, as illustrated by the relative risk values. Two of the three hypotheses were supported or partially supported by the data analyses. As expected, beneficiaries with blindness or low vision were substantially less likely to assign tickets to ENs and were less likely to be employed at an earnings level that stopped cash benefits. An unexpected finding was that beneficiaries with blindness or low vision were more likely to assign their tickets, with beneficiaries who are blind being approximately twice as likely to assign tickets compared to other beneficiaries. This finding may be indicative of the difficulties persons with blindness or low vision face in obtaining employment. It may signify that a larger percentage of this population would like to work, but feel that they cannot obtain employment on their own. It may also signify a real or perceived threat of discrimination posed by employers. In a survey of SSA beneficiaries, TTW participants were much more likely than beneficiaries who did not use their tickets to report that their reasons for not working included: discouraged by previous work attempts, cannot find a job he/she is qualified for, cannot find a job he/she wants, and employers will not give her/him a chance (Thornton et al., 2006). Given that many more beneficiaries with blindness or low vision have assigned their tickets, these populations may be more likely to experience these employment difficulties.

In terms of employment, SSI beneficiaries with low vision were slightly less likely to be employed at SGA than those with other disabilities, while SSI beneficiaries who were statutorily blind were more likely to be employed at SGA than either other group. However, they were also
more likely to be employed at SGA prior to the implementation of the TTW program, indicating that, in general, this group may be more likely to work than the other groups regardless of the TTW program. In terms of being employed with earnings at a level that stops cash benefits, both beneficiaries with blindness and low vision were less likely to reach this goal than those with other disabilities. This last finding must be considered along with the fact that some beneficiaries who are statutorily blind will need to earn a higher salary to stop receiving cash benefits. For SSDI beneficiaries, this difference is caused by the different SGA levels used for blind and other beneficiaries (i.e., $860 versus $1,450 in 2006). For SSI beneficiaries, small differences will exist if the beneficiary utilizes blind work expenses rather than impairment-related work expenses, which are both exemptions to earnings from work. These differences do not, however, apply to beneficiaries with low vision, who were also less likely to have stopped cash benefits due to earnings.

The limitations of these analyses should be mentioned. The primary limitation with the outcome analyses is the short time span for which the data is available, considering that some beneficiaries (in Phase 3 states) did not receive their tickets until September 2004. Therefore the employment outcome results should be considered preliminary. Also, the lack of earnings or employment data for SSDI beneficiaries is a limitation of the data. If this information were available, results for the employment at SGA variable may have been different.

Conclusions

Beneficiaries with blindness and low vision have been much more likely than those with other disabilities to assign their tickets. This may be indicative of greater difficulties persons with blindness and low vision face in navigating the labor market and obtaining employment. Despite the fact that they are more likely to use their tickets, a substantially lower percentage of
these populations assign their tickets to ENs. This finding indicates that the program has not been as effective for beneficiaries with blindness and low vision in terms of providing a choice in service providers. The finding that those with other disabilities were 1.35 to 1.5 times more likely to stop cash benefits due to earnings indicates that the program has also not been as effective for beneficiaries with blindness and low vision in terms of obtaining employment with a high level of earnings. Although not definitive, these results provide some support for the concerns expressed by the blindness field in terms of the TTW program not being as effective with beneficiaries with blindness or low vision.
References

Cavenaugh, B. S. (1999). *Relationship of agency structure and client characteristics to rehabilitation services and outcomes for consumers who are blind.* Mississippi State: Mississippi State University, Rehabilitation Research and Training Center on Blindness and Low Vision.

Cavenaugh, B. S. (March, 2000). *Services and outcomes of vocational rehabilitation consumers who are blind.* Testimony before the House Committee on Ways and Means, Subcommittee on Social Security, Hearing on work incentives for blind and disabled social security beneficiaries. Washington, D.C.


experience during the second two years of operations (2003-2004). Washington, DC:
che/CUIPR/Washington/Current-Projects/Ticket-to-Work.cfm
Table 1

*Percentages and Relative Risks Associated with Dependent Variables*

<table>
<thead>
<tr>
<th>Variable</th>
<th>Statutory Blind</th>
<th>N</th>
<th>Low Vision</th>
<th>N</th>
<th>Other Disability</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assignment of ticket</td>
<td>1.80 (1.98)</td>
<td>197,777</td>
<td>1.29 (1.42)</td>
<td>122,048</td>
<td>0.91</td>
<td>10,293,947</td>
</tr>
<tr>
<td>Assignment to EN</td>
<td>5.69 (0.54)</td>
<td>3,568</td>
<td>6.15 (0.59)</td>
<td>1,576</td>
<td>10.51</td>
<td>93,804</td>
</tr>
<tr>
<td>Employment at SGA&lt;sup&gt;a&lt;/sup&gt;</td>
<td>7.76 (1.20)</td>
<td>1,302</td>
<td>5.23 (0.81)</td>
<td>440</td>
<td>6.46</td>
<td>36,507</td>
</tr>
<tr>
<td>Stopped cash benefits</td>
<td>1.57 (0.63)</td>
<td>2,875</td>
<td>1.85 (0.74)</td>
<td>1,300</td>
<td>2.50</td>
<td>75,438</td>
</tr>
</tbody>
</table>

Note. Relative risks are in parentheses, with “other disability” serving as the comparison group.

<sup>a</sup>SSI beneficiaries only.