

Running Head: EMPLOYMENT NETWORKS' VIEWS

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The Ticket to Work Program:

Employment Networks' Views on Serving Blind or Visually Impaired Beneficiaries

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Abstract

This article reports on a survey of employment networks' (ENs) opinions about serving social security beneficiaries who are blind or visually impaired under the Ticket to Work program.

Although most of the 267 ENs who participated in the survey expressed concerns about working with these beneficiaries, they did not seem to be biased against working with those who are blind or visually impaired based solely on their disability type.

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The Ticket to Work (TTW) program was established by the Ticket to Work and Work Incentives Improvement Act of 1999. The program began in 13 states in February of 2002, and by the end of 2004 the program will be in effect nationwide. TTW is meant to help all persons with disabilities who are receiving federal aid from the Social Security Administration (SSA) to obtain employment. However, because of the way the Act has been implemented, there is a question of whether it will be effective with certain populations of consumers. One such group of consumers is those who are blind or visually impaired. The purpose of this study was to begin investigating TTW's effectiveness with blind and visually impaired consumers.

Overview of the Ticket to Work Program

Purpose of the Program

The TTW program provides a ticket to eligible disabled beneficiaries who are receiving either Social Security Disability Insurance (SSDI) payments or Supplemental Security Income (SSI) payments. This ticket can be used to obtain vocational rehabilitation services with the goal of return to work. These services can be obtained from an employment network (EN) or a state vocational rehabilitation agency (SVRA), which under the Act is functioning as an EN. The primary purposes of TTW are to (a) increase beneficiary choice in rehabilitation service providers, (b) increase the quality of rehabilitation services by providing competition among service providers, (c) encourage beneficiaries to join the workforce, and (d) provide long-term services to help beneficiaries retain employment (Livermore, Nowak, Stapleton, Kregel, Bouchery, & Glosser, 2003; Ticket to Work and Work Incentives Advisory Panel [TTWWIAP], 2004). In addition to these purposes, the program is intended to be a cost-savings measure for

federal and state governments, through decreased SSA benefits and increased tax revenues for those beneficiaries who maintain employment (Livermore et al., 2003). The Act also provides for increased work incentives for beneficiaries, such as the opportunity to keep medical benefits (Medicare or Medicaid) after obtaining employment and the automatic reinstatement of SSA benefits within 36 months of return to work at the substantial gainful activity (SGA) level, should the person stop earning at this level during that time.

How the Program Works

Any agency, company, or individual can sign up to become an EN under TTW, although they must meet some general eligibility requirements (Livermore et al., 2003). Many of the organizations who have signed up as ENs were providing rehabilitation services prior to TTW, often contracted through an SVRA. Beneficiaries can take their tickets to these ENs and exchange them for rehabilitation services. To be eligible for the TTW program, a beneficiary must (a) be between the ages of 18 and 64, (b) have been found to be disabled under SSA's adult rules, and (c) have a condition that is not expected to improve prior to the first scheduled medical review. Beneficiaries receive a ticket in the mail, and they can choose to use the ticket or not. An important aspect of this program is that ENs can also choose whether or not to accept a ticket. In other words, if a beneficiary wants to assign their ticket to a specific EN, that EN can refuse to provide services to the person, unlike a SVRA.

If both parties do want to work together, they must develop an individual work plan (IWP), which is a written agreement that specifies what each party will do to help the beneficiary obtain employment. If a beneficiary is not satisfied with the services he/she is receiving from an EN, the beneficiary can take the ticket out of assignment and assign it to another provider. The beneficiary must undergo progress reviews to ensure that "timely progress" toward self-

supporting employment is being made. These reviews are conducted by the program manager and occur at 24 months after ticket assignment, then every 12 months after that. MAXIMUS was hired to serve as the program manager for TTW. MAXIMUS' role in TTW is to handle all of the day-to-day management functions necessary for the program to work, such as signing up agencies to become ENs; collecting and managing program-related data; providing training on the program to ENs, SVRAs, and SSA staff; and providing information to beneficiaries about TTW.

There are two payment options for ENs, the milestone-outcome payment system and the outcome payment system. (SVRAs also have the option of continuing the cost-reimbursement payment system they've been under, which most of them have chosen to do.) With the outcome payment system, an EN can receive up to 60 monthly payments per beneficiary. These monthly payments are equal to 40% of the prior calendar year's national average monthly SSDI or SSI disability payment amount. The EN only receives payments for each month that the beneficiary receives no social security payments because of earnings from work. With the milestone-outcome payment system, an EN can receive four payments at "milestones" achieved by a beneficiary, then monthly outcome payments for up to 60 months. Examples of the first two milestones are earnings above SGA for one calendar month and earnings above SGA for three calendar months in a 12-month time period. These monthly outcome payments are at a reduced amount (34% of the average monthly DI or SSI payment amount rather than 40%). While the milestone-outcome system allows for more payments up front, the total dollar amount received by the EN is lower with this system. The total amount of payments available under the outcome payment system was \$20,160 for SSDI and \$11,940 for SSI, based on 2004 amounts. The

payment amounts for the milestone-outcome system were \$17,160 for SSDI and \$10,140 for SSI, again based on 2004 amounts (MAXIMUS, n.d.).

Current Status of the Program

The program was initially implemented in February of 2002 in 13 states (Arizona, Colorado, Delaware, Florida, Illinois, Iowa, Massachusetts, New York, Oklahoma, Oregon, South Carolina, Vermont, and Wisconsin). All 10 of the Rehabilitation Services Administration regions are represented by at least one of these states. Eight of the states have a separate SVRA that specializes in serving persons who are blind, while five of them have a combined SVRA that serves all consumers. By November of 2004 ticket distribution is to be completed in all states. As of July, 2004 MAXIMUS had mailed tickets to more than 9 million beneficiaries, along with a letter providing a brief explanation of the program. There was initially a significant response from beneficiaries, many wanting clarification of what the ticket was and what it meant to their benefits. However, very few of these inquiries fielded by ENs resulted in a ticket assignment (Livermore et al., 2003; S. Webb, personal communication, March 3, 2004; P. Wilson, personal communication, February 18, 2004).

Participation in TTW has been very limited by beneficiaries, with only approximately 0.6% of them assigning their tickets, which represents 55,065 people (Social Security Administration, 2004). Of those who have assigned their ticket, the vast majority (over 90%) have assigned them to a SVRA. Although nationwide the majority has assigned tickets to a SVRA, in certain states a relatively large percentage have assigned them to an EN (e.g., Arkansas: 49%, Rhode Island: 42%, District of Columbia: 39%, Arizona: 31%; Social Security Administration, 2004). Participation by ENs has also been limited, in two ways. Not as many ENs have signed up as expected (as of this writing there were over 1,200 signed up), and most of

those who have signed up have not accepted tickets from beneficiaries (only 37% have; Shaw & Matsui, 2004).

Problems with TTW

Indications so far are that the program has not been successful, and there is serious concern that the program will no longer exist if changes are not made to it (TTWWIAP, 2004). The Panel (2003; 2004) and several other organizations (e.g., Consortium for Citizens with Disabilities, Council of State Administrators of Vocational Rehabilitation) have identified many problems with the program, resulting in its lack of success. A major problem that was identified early is insufficient funding and administrative resources dedicated to implementation of TTW. Another problem is lack of beneficiary understanding of the program. It appears that the information sent out with the tickets was not adequate, and even those who set out to obtain more information about the program may not fully understand how it works or the benefits the program and work incentives portion of the Act provide them. Another problem is that not enough ENs are accepting tickets to allow for true choice by consumers. One purpose of the program was to increase choice in rehabilitation service providers; however, with limited EN participation in the program, this has not materialized for many beneficiaries.

Several reasons have been cited for the lack of EN participation, primarily related to the payment system. The way the system is structured, ENs only receive payment after the person has stopped receiving SSA benefits due to earnings, and that payment is spread out over 60 months. Not only does this force the EN to assume all of the risk associated with serving a beneficiary, it also requires them to have a supply of "upfront" money, which very few of these organizations have. Two other issues associated with the EN payment system are that ENs are required to provide long-term tracking of beneficiary earnings to receive payment, and that there

have often been long delays in processing EN payment claims. Another major problem thought to be contributing to the failure of TTW is the lack of a marketing plan (to both beneficiaries and ENs) for the program. This problem may be resolved in the future, as SSA has awarded contracts to support development of a strategic marketing plan (TTWWIAP, 2004). Hopefully this effort will not be completed too late.

Finally, several concerns have been expressed about the program not providing any incentives to serve those who are severely disabled. There is a concern that what happened in the past with SVRAs selecting only the easiest to serve clients, referred to as “creaming,” would occur with TTW. The program is actually set up to encourage this behavior by ENs. In the case of TTW, this process of selecting the clients who are the easiest to serve and place in jobs would not be illegal or inappropriate, but would make good business sense. In particular this is a concern for certain groups of beneficiaries, such as SSI recipients (who have a poorer work history and must earn more than SSDI beneficiaries to go off benefits), and populations perceived as being harder-to-serve (such as those with psychiatric disabilities and those who are blind or visually impaired).

Evaluation of TTW with Blind and Visually Impaired Beneficiaries

The Rehabilitation Research and Training Center on Blindness and Low Vision at Mississippi State University has been funded by the National Institute on Disability and Rehabilitation Research (grant H133B010101) to evaluate TTW's effectiveness with blind and visually impaired beneficiaries. (Note: Hereafter, the term “blind” will be used to describe all levels of vision loss.) The primary reason this research has been initiated is a concern that the program's payment system and structure will act as a disincentive to serving persons who are blind. This is a concern for several reasons, such as the higher level of earnings required for

blind persons to go off SSDI benefits. During calendar year 2004, this difference was greater than \$500 per month (i.e., \$1,350 compared to \$810 for others). Persons who are blind are perceived by many to be difficult to place, which would provide another disincentive to working with this population. They are also more likely to require expensive services, such as assistive technology, which few, if any, ENs would be able or willing to provide, as they would not be reimbursed for their expenses. A final concern that was recognized by the research team was the need for expertise in working with those who are blind to effectively serve them. It is doubtful that many ENs will have staff with the experience and knowledge necessary to provide quality services to blind beneficiaries. Given the multiple issues and disincentives that exist for ENs to serve blind consumers, it was hypothesized that ENs would be less open to serving blind beneficiaries, compared to those with other disabilities. If this were true, then blind beneficiaries would have to rely on SVRAs for rehabilitation services, resulting in a failure of TTW for them.

This hypothesis is being investigated using two primary research methods: survey research with ENs and statistical analyses of secondary data obtained from SSA and the Rehabilitation Services Administration's 911 data. The survey data will provide a direct response from ENs about their perceptions of working with blind consumers, while the analyses of secondary data will provide an answer to whether blind beneficiaries were less likely to be served by ENs, as is suspected based on the concerns outlined above. This article is a report of the survey conducted with ENs in the first 13 states.

Method

Participants

All ENs in the first 13 Phase I states that were listed on MAXIMUS' website in April of 2004 were asked to participate in the study. There were a total of 469 ENs identified. Each of the

ENs were mailed a copy of the survey, along with a cover letter explaining the purpose of the research. The surveys were addressed to the EN representative named on MAXIMUS' website. Sixteen surveys were returned to us as undeliverable, leaving 453 ENs that were believed to have received the survey. A total of 267 surveys were completed, for a response rate of approximately 59%.

Procedure

Initially, a detailed survey addressing perceived barriers to serving blind beneficiaries was planned for the ENs. However, as reports began to appear about the lack of participation by ENs, it was felt that in order to receive a good response a short survey would be necessary. The survey was developed based on pre-existing concerns about TTW with blind beneficiaries, as well as information obtained from informal interviews conducted with three ENs in Arizona. A list of ENs and the name of the EN contact person was obtained from MAXIMUS' website and put into a database. The surveys and cover letters were initially mailed to these identified contacts in May of 2004. Three weeks later, a second survey and cover letter was mailed to those who had not responded.

Survey

The final version of the EN survey consisted of five questions, which fit onto one page.

The questions were:

1. What concerns do you have about accepting tickets from blind/visually impaired beneficiaries? (checklist provided)
2. Have you accepted tickets from SSA beneficiaries? (Y/N response, with a request to report how many if answered "Yes")

3. Have you accepted tickets from any blind or severely visually impaired beneficiaries?
(Y/N response, with a request to report how many if answered "Yes"; if the response was "No," instructions were to stop and return the survey in the envelop provided)
4. Have you ever refused to accept a ticket from a blind/visually impaired beneficiary? (Y/N response)
5. If yes, please provide the reason(s). (checklist provided)

Results

The majority of respondents (69.5%) expressed at least one concern about accepting a ticket from a blind consumer, while 30.5% reported no concerns. Thirty-eight percent reported one or two concerns, 19.6% reported three or four concerns, 10.2% reported five or six concerns, and 1.6% reported 7 or more concerns (out of a possible of 9). The top three most commonly expressed concerns were: "difficulty placing blind people," "lack of knowledge or expertise in blindness," and "transportation issues" (see Table 1 for a complete list and percentages). Thirty-five ENs wrote in a response for "other" concerns about accepting tickets from blind beneficiaries. The most common reason given was that the agency specialized in working with other special populations (e.g., mentally ill or developmentally disabled) or that the agency simply did not work with blind persons. Some of these responses seemed to be similar to the "lack of knowledge or expertise" option. Another commonly listed "other" concern was TTW's poor payment system and lack of funding to provide services to beneficiaries.

A small majority (53.6%) of the ENs who responded had accepted at least one ticket from a beneficiary. The majority of these had only accepted a small number of tickets (10 or less, 68.3%). The most commonly accepted number of tickets was one (19.5% of the ENs), but ranged as high as 345 accepted tickets. Of the ENs who indicated that they have accepted a ticket, 23

(16.3%) of them accepted a ticket from a blind beneficiary. (This represents less than 9% of the total number of ENs who have accepted a ticket from a blind beneficiary.) The number of tickets accepted from blind beneficiaries ranged from 1 to 10.

Only nine (5.5%) of the ENs reported that they had refused to accept a ticket from a blind beneficiary. (Note that not all ENs answered this question, as they were instructed not to continue with the survey if they had not accepted any tickets.) Three ENs indicated that they were not sure whether they had rejected a blind beneficiary (they had rejected several beneficiaries), but indicated that the type of disability was not a factor in determining whether they declined to accept a ticket. The most commonly reported reason for rejecting a blind beneficiary was “person did not want to go off benefits” (55.6%), followed by “did not think the person could earn above SGA level” and “did not have the expertise to provide the person the services needed” (44.4% for each), “other” (33.3%), “services would have been too expensive” (22.2%), and “person was not job ready” (11.1%). Two of the “other” reasons listed had to do with the person living too far away.

Although not requested, 52 ENs (19.5%) wrote comments on the survey. One of the most common themes from these comments was that either no one with a ticket had applied to the EN, or no one who was blind had applied to the EN. One EN indicated that over 200 beneficiaries had been contacted but only one showed up for an interview. Several made comments about problems with the payment system and not being able to afford to provide services to beneficiaries. An interesting theme occurred with ENs from Illinois: six ENs indicated that they do not or cannot accept the tickets due to an agreement with Illinois' SVRA. One EN representative specified that if they accepted a ticket, then they could not refer that client to the SVRA or they would be charged for all services the client received. Comments from two other

states (two from New York and one from Oklahoma) also indicated that the ENs did not accept tickets directly, but that the SVRA did, and then the EN might work with the client, which is what was occurring prior to TTW.

Discussion & Conclusions

Most of the ENs who responded had at least one concern about accepting tickets from blind beneficiaries. The higher level of earnings required (SGA level) for blind beneficiaries was not as important of a concern for ENs as expected, with only approximately 20% reporting this. The most common concerns expressed might have been anticipated. The perceived difficulty in placing blind persons may be a reality, based on the lower employment rates of those who are blind compared to other disabilities. ENs may be aware of that or may realize that employers often are unaware of the capabilities of blind persons and hold negative stereotypes about their work abilities. Of course, some ENs may also be unaware of the capabilities of blind persons and hold the same stereotypes, causing them to express this concern. The second most common concern expressed, lack of expertise in working with blind persons, may be a valid concern. Persons who are blind often need specialized services, and only persons with experience in this area can provide appropriate service (Cavanaugh, 1999; Gallagher, 1988).

Several ENs reported that they specialize in serving only those with a specific disability, such as psychiatric or developmental disabilities, and would therefore not serve those who are blind. (Only one EN acknowledged that there may be a blind person who also has one of these additional disabilities.) Other than these providers, it seems that for many ENs the issue of whether to accept a ticket is not based on disability type but the perceived ability to place the person in a job quickly. Even for those ENs who expressed concerns about accepting a ticket from blind beneficiaries, several of them had already accepted tickets from someone who is

blind. Of the 23 ENs who reported having accepted a ticket from a blind beneficiary, 18 (78%) of them expressed one or more concerns. Apparently having concerns about accepting tickets from blind beneficiaries does not completely deter ENs from providing services to them, which is good news for blind beneficiaries.

A higher percentage of respondents to our survey had accepted tickets, compared to the percentage reported nationwide (53.6% versus 37%). What has not been evaluated or reported elsewhere is the percentage of those ENs who have accepted a ticket that have accepted one from a blind beneficiary, which was 16.3% of the respondents in this study. Several ENs indicated that no blind consumers had ever applied to them, which would mean these ENs did not even have the opportunity to serve blind consumers. An important component to this research was to determine whether blind beneficiaries were not being accepted by ENs, and if so, why. A very small percentage of ENs reported that they had refused to accept a ticket from a blind beneficiary. The fact that only nine ENs decided not to accept a blind beneficiary's ticket is a positive finding. However, this is a small number to then make conclusions on why blind beneficiaries are being turned down. The most common reasons in this study had to do with lack of expertise of the EN or earnings issues (person did not want to go off benefits or didn't have earning potential above SGA). These are certainly valid concerns for an EN. It would not make business sense for an EN to accept a person for whom they did not believe they would ever receive payment, and it would not be in the best interests of the beneficiary to provide services to them if the EN did not have the knowledge or experience necessary. Based on these overall results, it appears that most ENs who participated in this survey are not biased against blind beneficiaries, or less likely to work with them just because they are blind, but most do have some concerns about serving them.

Of course, the limitations to this study should be considered when evaluating the results. One limitation is that the responses are self-report, and the accuracy of responses cannot be determined. Another limitation is that we do not know who completed the survey. It was sent to the EN representative that was listed on MAXIMUS' website. Hopefully, if this was not the correct person to complete the form, it would have been given to the correct person. However, we have no way of knowing who completed the survey and whether this was the best person to do it. This is particularly a potential problem when you consider the question about concerns, as each person who might have completed the survey at an EN may have different concerns. Although the response rate was good for this type of study, there were many ENs that did not respond, and we have no way of knowing whether their responses would have been different from the ones we received.

Despite its limitations, this is the first study of its kind to evaluate the effectiveness of the TTW program for blind beneficiaries. Other organizations are evaluating the program as a whole, but as the potential for problems with the program for blind beneficiaries is even higher than for others, it is important that it be evaluated for this group separately. Our second part to this research project, analyzing SSA data, will provide more information about whether blind beneficiaries are being served by ENs, and how this compares to SSA beneficiaries with other disabilities. The second part of this research project, analyses of SSA data, will provide more information about whether blind beneficiaries are being served by ENs, and also how this number compares to the number of SSA beneficiaries with other disabilities who are being served by ENs.

Table 1

Numbers and percentages of ENs reporting concerns about accepting tickets from blind beneficiaries

<u>Concern</u>	<u>Frequency</u>	<u>Percent</u>
Higher SGA level	53	19.9
Difficulty placing blind people	80	30.0
High cost of working with or placing blind people	47	17.6
Assistive technology issues	59	22.1
Transportation issues	68	25.5
Blind persons need more services than we can afford to provide	43	16.1
Lack of knowledge or expertise in blindness	76	28.5
Blind people tend to be difficult to work with	2	< 0.1
Other	35	13.1

N = 246

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