BRIEF

ISSUE BRIEF

Promoting Opportunity Demonstration: Treatment Group Members' Perspectives on Reporting Earnings and Using the POD Benefit Offset

April 18, 2022

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Submitted to:
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Executive summary

The Promoting Opportunity Demonstration (POD) tested modifications to Social Security Disability Insurance (SSDI) program work rules. Beneficiaries who work encounter challenges navigating the complex rules that govern earnings and eligibility (Ruh and Staubli 2019). Under current rules, beneficiaries with earnings that exceed substantial gainful activity (SGA) limits can lose their benefits. POD replaced this sudden loss of benefits—often called the "cash cliff"—with a $1 for $2 benefit offset for earnings above the POD threshold or the beneficiary's impairment-related work expenses (IRWEs) (up to a maximum of the SGA amount, which was $1,310 per month for non-blind beneficiaries in 2021), whichever amount was higher. POD also included modifications to other current rule provisions, such as removing the Trial Work Period (TWP). Thus, the POD offset took effect immediately for monthly earnings above the POD threshold or allowable IRWEs. An evaluation team randomly assigned eligible beneficiaries who volunteered into treatment and control groups. The treatment group members were eligible for the new POD rules. The control group members received benefits under the current rules.

Treatment group members had to submit monthly earnings to support the processing of the POD offset. Any delays or inaccuracies in earnings submissions directly affected the accuracy of the POD benefit offset. SSA and an implementation team set up earnings reporting systems to adjust benefits. The implementation team also provided treatment group members with benefits counseling supports to help them understand the POD rules.

This brief summarizes the experiences of treatment group members in reporting earnings and using the POD offset. Our findings are based on qualitative interviews with a subset of 72 treatment group members who reported earnings during the demonstration. A focal point of our questions concerned their experiences reporting monthly earnings to comply with POD and their reaction to the new offset. We also asked about their experiences with benefits counseling supports and perceptions of the POD rules.

The selected 72 respondents for the study represent a subset of those who reported earnings. Their experiences provide insights into options for obtaining timelier or more accurate earnings reports from SSDI beneficiaries. The findings also provide insights into how future changes to collect more frequent earnings reports might affect beneficiaries. A caveat, however, is that respondents are a select segment of treatment group members who were working and reported earnings and are thus not representative of all POD treatment group members. Nonetheless, they represent an important subgroup who used services that might enhance SSA's understanding of options to improve earnings reporting among SSDI beneficiaries.

The findings highlight the tradeoffs of implementing new POD supports to enable more frequent earnings reporting. Respondents noted the POD supports prompted them to organize their wages and more closely manage their income on a monthly basis. They cited having flexible options to submit earnings (web, fax, phone, and mail) and reminders as being particularly helpful in submitting earnings information on time. They also noted the proactive supports from POD counselors were beneficial in understanding the new rules and changes to their benefits due to additional earnings. However, many respondents noted that submitting monthly earnings information was often challenging. Submitting monthly earnings was especially challenging for those who worked for several employers. Additionally, some noted difficulties in submitting earnings information because they lacked the necessary equipment to access their pay stubs, such as a computer or printer. Key factors in managing fluctuations in benefit payments include having advance knowledge of changes to monthly benefit payments.

A. Introduction

There is a long-standing policy interest in understanding how the SSDI program can support the employment of people with disabilities. The SSDI program is the largest federal program that provides benefits to qualifying people with disabilities. SSA administers the SSDI program and provides cash benefits to eligible individuals when they need to leave the workforce due to a long-term disability or blindness. Prior evidence indicates that some aspects of SSDI program rules potentially discourage beneficiaries from working (Ruh and Staubli 2019; Gelber et al. 2017; Maestas et al. 2013; Weathers and Hemmeter 2011; Schimmel et al. 2011). For example, under the current rules, beneficiaries risk losing their entire SSDI monthly benefit if their earnings exceed the substantial gainful activity (SGA) amount, which was $1,310 per month for non-blind beneficiaries in 2021.

As part of the Bipartisan Budget Act of 2015, Congress directed SSA to conduct POD. The demonstration was part of a larger interest by Congress to test interventions that might strengthen the labor force attachment of SSDI beneficiaries.[1] POD introduced a benefit offset and modified other program rules. SSA contracted separately with Abt Associates and Mathematica to lead the implementation and evaluation of POD, respectively. The Abt Associates implementation team and SSA developed systems to process the offset under the new rules.

This brief examines POD treatment group members' experiences with the POD rules. To begin, we examine their experiences reporting their monthly earnings to POD. We then draw on qualitative data to explore beneficiaries' perceptions of monthly reporting and the resulting benefit adjustments under POD. We also identify factors that helped treatment group members manage their monthly benefit payment changes under the POD rules. Finally, we explore treatment group members' perceptions of POD design features.

We use information from qualitative interviews with 72 treatment group members to inform our findings. Unless otherwise noted, the findings represent summaries from these interviews and include quotes from treatment group members, which we refer to as respondents. When interpreting findings, we summarize trends in responses based on our coded qualitative data (see text box). We use descriptive data from Abt Associates' Implementation Data System to describe general trends in reporting earnings and offset usage among all treatment group members.

Qualitative methods at a glance

In spring 2021, we conducted semistructured telephone interviews with 72 treatment group members who had different experiences using the POD benefit offset (Appendix Exhibit 1). We split the sample into four groups to capture diverse perspectives of treatment group members who were working or recently worked. We used an analytic framework that captured the major themes of responses to each question. Some questions, such as earnings reports, were only asked of specific subgroups of respondents to which this question applied, such as benefit offset users.

[1] Section 823 of the Bipartisan Budget Act of 2015 amended Section 234 of the Social Security Act to include POD. See https://www.govinfo.gov/content/pkg/COMPS-11720/pdf/COMPS-11720.pdf (accessed December 12, 2021). Section 234 gives SSA the authority "to carry out experiments and demonstration projects designed to promote attachment to the labor force and determine the advantages and disadvantages of alternative methods of treating the work activity of individuals entitled to disability insurance." See https://www.ssa.gov/OP_Home/ssact/title02/0234.htm (accessed April 9, 2021).

B. Background

POD changed several aspects of current rules in ways that affect beneficiary earnings reporting. Below, we summarize the main provisions of current rules and POD that could influence this earnings reporting. We begin with a brief summary of current rules. We then summarize the differences between the POD and current rules.

Current SSDI program rules

Important aspects of earnings reporting under current rules are the concepts of SGA and TWP (Exhibit 1, column 1). To qualify for SSDI benefits, an individual must be unable to engage in work that constitutes SGA due to a medically determinable disability. Having earnings above the SGA amount is evidence that the beneficiary does not have a work-limiting impairment and is therefore ineligible. If a beneficiary has earnings below SGA, there is no effect on benefits. Additionally, the current rules allow for a TWP and subsequent grace period that enables beneficiaries to test their ability to work without having their monthly benefits reduced. After a beneficiary earns enough to complete these two periods, SSA reduces their benefits to $0 when earnings are above the SGA amount (often called the "cash cliff"). The changes in how earnings affect benefits after the TWP are potentially confusing to beneficiaries and administratively complex to track (Ruh and Staubli 2019).

SSA reviews beneficiary earnings to assess continuing eligibility and the accuracy of benefit payments. SSA must conduct a work continuing disability review (CDR) to evaluate earnings, determine the use of work incentives, and determine the appropriate months for benefit payments. The time to complete a work CDR under current rules is linked to when SSA receives information on earnings, which can vary widely. SSA may receive earnings information at different times, such as when beneficiaries self-report their earnings or when SSA reviews annual Internal Revenue Service data or quarterly wage data from states. In 2019, SSA received 292,000 direct earnings reports from beneficiaries compared to 2,106,000 reports based on annual earnings data from the IRS and 2,257,000 reports based on quarterly earnings data (SSA 2021a).

After reviewing earnings, SSA assesses whether the beneficiary received an improper payment, which includes overpayments and underpayments. Accumulated overpayments account for a large amount of funds. The prevalence of work-related overpayments between 2010 through 2012 was below 2 percent of all beneficiaries (Hoffman et al. 2019). The SSA's Office of the Inspector General estimated that 35,000 SSDI beneficiaries received incorrect payments totaling $371 million based on the failure of beneficiaries to report work from 2012 to 2016 after completing the TWP (Office of the Inspector General 2018).

Exhibit 1. Overview of current SSDI rules and POD rules

Current Rules	POD Rules
Reporting of earnings SSDI beneficiaries are required to report their earnings to SSA if they experience a change in their employment status (i.e., start or stop work or change their job duties, hours worked, or rate of pay). When assessing earnings, SSA periodically conducts a work CDR to confirm beneficiaries' continued eligibility for benefit receipt.	**Reporting of earnings** Treatment group members reported if their earnings were greater than the POD threshold ($940 per month in 2021).[1] Employed beneficiaries could report their monthly earnings to SSA/POD via the online reporting portal, phone, mail, or fax. Treatment group members were not subject to work CDRs during the demonstration.
Benefit suspension for earnings in excess of the SGA level SSDI beneficiaries are entitled to receive a full SSDI benefit check during a nine-month TWP, during which time they can earn any amount. The TWP is completed once a beneficiary has monthly earnings above the TWP threshold ($940 in 2021) or works more than 80 hours a month in self-employment for nine months over a rolling 5-year window. The nine months need not be consecutive. After completing the TWP, beneficiaries enter the EPE. In SSA's terminology, disability "ceases" for beneficiaries who engage in SGA during the EPE. • During the EPE, gross monthly earnings from work are evaluated relative to the SGA amount. During the first 36 months of the EPE, known as the re-entitlement period, beneficiaries have cash benefits suspended if they earn above the SGA amount (the "cash cliff"), but remain entitled to full benefits if their earnings are lower than that amount.	**$1-for-$2 benefit adjustment** POD included two treatment groups, both of which used the same rules to administer benefits. The rules eliminated the TWP and the grace period. These rules also replaced the cash cliff with a benefit offset that reduced benefits by $1 for every $2 earned above the larger of the POD threshold (chosen to align with the TWP threshold) and the amount of the POD treatment group member's IRWE (up to a maximum of the SGA amount). POD suspended cash benefits when they were reduced to $0 according to the $1-for-$2 benefit offset. The two treatment groups differed in their rules governing termination of benefits. • In one treatment group (T1), cash benefits were not terminated because of earnings from work. • In the other treatment group (T2), cash benefits were terminated after 12 consecutive months of benefit suspension (benefit payment reduced to $0 under the POD rules).
Termination of benefits After the re-entitlement period, cash benefits are terminated if a beneficiary's countable monthly earnings exceed the SGA amount. • If a medical CDR indicates that a beneficiary's medical condition improved substantially, their entitlement to benefits will terminate. Within 60 months of termination due to work, individuals can request that SSA reinstate their cash benefits through Expedited Reinstatement (EXR). Upon award of EXR, beneficiaries enter a 24-month Initial Reinstatement Period (IRP) where earnings must remain below SGA. If earnings exceed SGA, the beneficiary is not due benefits and is not credited with the completion of an IRP month. Upon completing the IRP, the beneficiary is eligible for another TWP and EPE.	**Benefit termination is possible** Beneficiaries in the T2 group whose eligibility for monthly benefit payments were terminated because of work remained eligible for EXR, as specified for those terminated under current rules. • A beneficiary in the T2 group who received an award of EXR, re-entered POD. However, the 24-month IRP was paused during POD participation for those with an award of EXR. Such a beneficiary could therefore immediately use the POD offset again. Beneficiaries in both treatment groups were subject to termination of benefits if their medical conditions substantially improved.

[1] The exception was those cases when a treatment group member was in full offset but their earnings dropped below the POD threshold. In such cases, they were advised to report their monthly earnings to POD to reverse the full offset that was applied to their monthly benefits.

Note: The cash cliff refers to when SSA reduces benefits to $0 after a beneficiary's earnings are above SGA and they have completed the TWP and subsequent grace period.

CDR = continuing disability review; EPE = Extended Period of Eligibility; EXR = Expedited Reinstatement; IRP = Initial Reinstatement Period; IRWE = impairment-related work expenses; POD = Promoting Opportunity Demonstration; SGA = substantial gainful activity; SSA = Social Security Administration; SSDI = Social Security Disability Insurance; T1 = treatment group 1; T2 = treatment group 2; TWP = trial work period.

POD rules included a monthly benefit offset

The new POD rules replaced the cash cliff with a benefit offset and eliminated other provisions of current rules, notably the TWP and grace period (Exhibit 1, column 2). The POD rules featured a benefit offset ramp that gradually decreased benefits by $1 for every $2 in monthly earnings above a POD threshold, which aligned with the TWP amount ($940 per month in 2021). POD also included special provisions for beneficiaries who had IRWEs. If the total monthly amount of IRWEs was greater than the POD threshold, SSA used the total monthly amount of itemized IRWEs as the monthly POD threshold for the POD benefit offset, up to a maximum of the SGA amount (which was $1,310 for non-blind beneficiaries and $2,190 for blind beneficiaries in 2021). SSA deducts approved IRWEs under current rules.

POD was a randomized controlled trial that included two treatments of a benefit offset. The two treatment groups had the same benefit offset but different termination rules. Treatment group 1 (T1) did not face termination due to work, but treatment group 2 (T2) faced termination after 12 consecutive months of earnings above the full offset amount (the point at which benefits were reduced to zero). Unless otherwise noted, we group the T1 and T2 groups together and refer to them as treatment group members. We do so because the process of reporting earnings was the same for the two groups. Additionally, as documented in Wittenburg et al. (2022), there were limited differences in outcomes between the two treatment groups, and no differences in employment outcomes.

The POD rules necessitated process changes for earnings reporting, placing more emphasis on monthly direct reports from beneficiaries. POD included an annual reconciliation process to check earnings. With monthly benefit offset adjustments in POD, there was more attention to collecting direct earnings reports from treatment group members as the preferred method to collect earnings, in comparison to current rules.

Under the POD rules, SSA collected earnings reports monthly with support from the implementation team, and, in most cases, used an automated system to process benefit adjustments. There was an end-of-year adjustment if reported earnings were missed during the year. Both the changes in program rules and the processing of earnings could affect the prevalence and size of improper payments.

POD included supports to facilitate monthly earnings reporting and benefits counseling

The key features of POD implementation included benefits counseling services and support for processing earnings information. Abt Associates worked with partners to deliver counseling services and process earnings adjustments in the eight POD states (Alabama, California, Connecticut, Maryland, Michigan, Nebraska, Texas, and Vermont). POD benefits counselors provided direct benefits counseling supports. Other POD implementation staff provided additional support to facilitate understanding of the new rules and earnings processing.

The POD benefits counseling services included three levels of supports. First, all treatment group members received an informational contact at enrollment in POD. Second, POD counselors provided information and referral (I&R) to treatment group members who could benefit from other employment services (e.g., Vocational Rehabilitation) or other programs (e.g., Medicaid). Finally, treatment group members could receive individualized work incentive counseling services beyond I&R. These services included proactive outreach by POD counselors to treatment group members to help them make informed choices about their employment and earnings. This last, most intensive set of services was particularly germane to our respondents given that they were working. These services were also notably different from those under current rules, where beneficiaries seek out benefits counseling services independently.

Treatment group members had four options for transmitting earnings to SSA. The options included: (1) the online reporting portal, (2) mail (Abt Associates provided earnings reporting packets to treatment group members with postage-paid business reply envelopes), (3) fax, or (4) in-person/telephone. During the height of the pandemic in 2020, SSA expanded options to allow treatment group members to report their earnings orally over the phone. Additionally, POD counselors called all treatment group members in the early phase of the pandemic to offer support, connect them to area resources, and inquire about changes in their employment status.

The implementation team first reviewed the earnings reports for any inaccuracies or missing information. After they passed this review, they sent the completed earnings information to SSA, and SSA used the information to calculate the offset.

C. Earnings reporting behavior

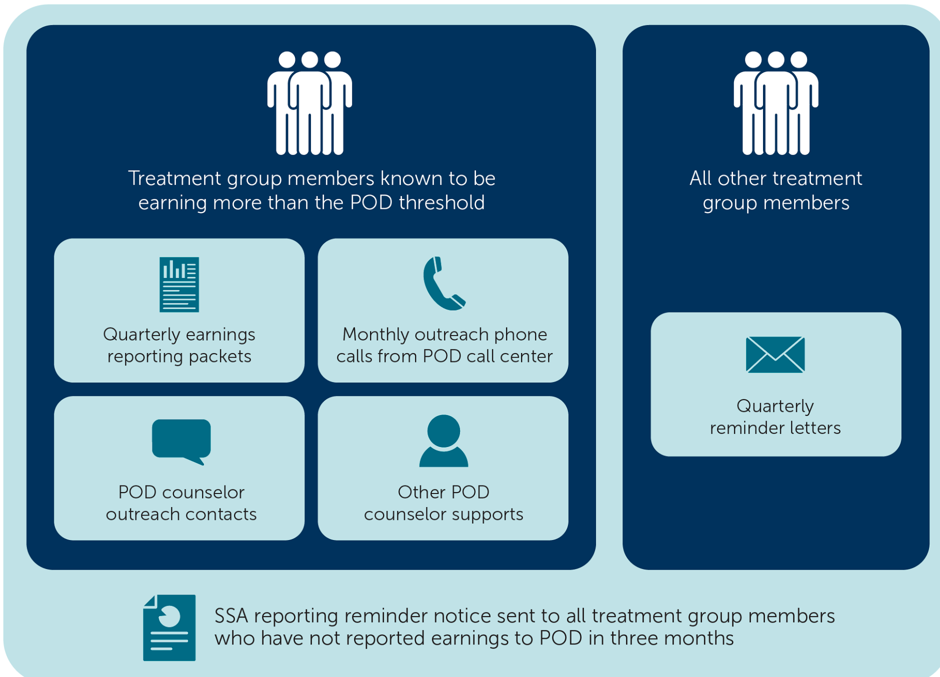
To receive accurate benefit adjustments, treatment group members had to report their earnings in a timely manner. Treatment group members earning more than the POD threshold had to submit their earnings documentation to SSA by the sixth day of the following month. If treatment group members failed to report their earnings for a month, SSA carried forward the benefit offset adjustment from the previous earnings report.

POD supports included reminders about monthly earnings

The implementation team and SSA sent treatment group members periodic phone and mailing reminders about submitting earnings (Exhibit 2). Staff called and sent quarterly packets to those known to be earning more than the threshold. For those not earning above the POD threshold, the implementation team contacted them by sending quarterly reminders to reinforce POD reporting requirements. Finally, SSA sent earnings reminder notices to all treatment group members regardless of earnings level who had not reported earnings in three months. The letter reminded them about the POD rules and reinforced the earnings reporting requirements.

Beyond these reminders, POD benefits counselors provided treatment group members with individualized support. For example, counselors helped treatment group members access their electronic pay stubs, calculated their monthly gross earnings from the pay stubs, and explained how to navigate the online portal to submit their reports. Many POD counselors also proactively called employed treatment group members who had not yet reported their earnings to remind them of the deadline.

Exhibit 2. Earnings reporting supports provided to treatment group members

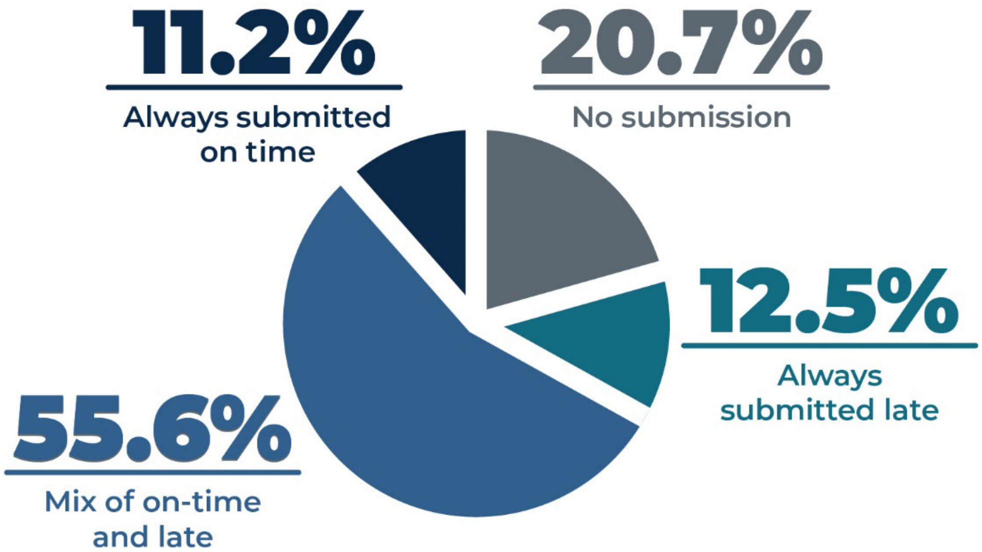


Note: The quarterly earnings reporting packets contained a letter reinforcing the importance of reporting monthly earnings, three POD earnings and impairment-related work expenses reporting forms, and three postage-paid business reply envelopes for the POD project.

Many treatment group members struggled to submit earnings on time

POD treatment group members faced challenges submitting their earnings on time (Exhibit 3). The exhibit shows the earnings reporting data for all treatment group members who used the benefit offset through 2020. Throughout the demonstration, 11 percent of offset users consistently submitted their monthly earnings reports on time; another 56 percent submitted their monthly earnings but had trouble always submitting on time. Twenty one percent of offset users did not report earnings. A caveat is that earnings reporting did improve throughout the demonstration. For example, the timeliness of the earnings reports improved from 26 percent in February 2018 to 70 percent in September 2020 (Wittenburg et al. 2022).

Exhibit 3. Timeliness of earnings submission among POD offset users



Source: Abt Associates' Data Implementation System on POD earnings reporting, January 2018 to December 2020.

Treatment group members valued the ability to choose among reporting options

Treatment group members used reporting modes that suited their circumstances. Based on program data, among those who reported earnings from 2018 to 2020, nearly half (45 percent) went through the online reporting portal (Wittenburg et al. 2022). Another 29 percent of reports were sent by mail, 18 percent by fax, and 8 percent by telephone or in person.

> "Last year, when I got COVID-19, I contacted [my POD counselor to let her know], 'I'm at the hospital, and I'm not working.' . . . I wasn't able to submit because I wasn't at home to scan my pay stubs . . . [I told her] how much I made that month. . . . Everything was good, smooth."
>
> —Former offset user describing interaction with POD counselor

In interviews, respondents noted their preferences for different reporting modes based on their needs, particularly during the height of the pandemic. For example, many preferred using the online portal because they could easily access it on their smartphone or computer. These respondents noted that it was much quicker to submit their earnings reports through the portal than by mail. Two respondents with low vision preferred to report using POD's prepaid envelopes because they could do so independently or with minimal support. Another respondent reported earnings to their POD counselor by phone while hospitalized for coronavirus disease (COVID-19).

The flexibility of reporting options allowed respondents to try multiple reporting modes. For example, several reported their earnings via mail or fax but later switched to reporting online because it was faster. Many respondents expressed positive feedback about the options available for reporting earnings.[2] Respondents described the available reporting modes as "easy," "straightforward," "simple," and "convenient" to use.

> "When [POD] first started, I was mailing [pay stubs] in and then . . . my counselor told me about the portal and sent me a link to it…And, ever since he did that, I was doing it all through the portal; it was making it a whole lot easier than mailing them in."
> —Full offset user describing earnings reporting via the online portal

Respondents encountered challenges organizing their finances that were unrelated to POD

Despite the satisfaction with the flexibility of the reporting processes, more than half of the respondents encountered barriers when reporting their earnings.[3] For example, some respondents had difficulty remembering to report or organizing their pay stubs to submit. Others described having low levels of proficiency using technology or said that they did not have the equipment, such as a scanner or computer, to access their digital pay stubs. In addition, community and workplace printers and fax machines that treatment group members had typically used to report were not accessible during the pandemic. Respondents who worked long hours or had multiple employers also noted challenges in trying to meet deadlines to report earnings by the sixth day of every month. Some respondents also noted the need to report their income to other social service agencies or housing authorities,

> "You get a physical check in the mail . . . you have to scan it or take a picture of it, and then upload it. . . . I'm not a computer expert. I found that to be . . . overwhelming, and that's why I needed help."
> —Partial offset user describing their experience reporting their earnings online

> "There are no print shops around my area, and I did not feel that I was able to do my job at 100 percent if I was trying to take off time . . . trying to track down a place where I could go and submit [pay stubs] by email or by fax. . . . So, submitting the paperwork was a nightmare."
> —Full offset user describing their experience reporting their earnings

[2] We asked all 72 interviewed treatment group members to describe their experiences submitting monthly earnings information to POD. Of the 72 respondents, 46 named specific things that helped them submit their earnings under POD.

[3] Of the 72 respondents, 42 named barriers that made earnings reporting difficult. Of these, 12 had difficulty remembering to report or keeping their paystubs organized, and 11 encountered challenges accessing or using technology.

which necessitated more frequent reporting due to fluctuations in their benefit payment under the POD rules.

Suggested improvements included easing the burden of earnings reporting

To further assess earnings reporting, we asked respondents if there were ways to improve earnings reporting (see text box). Nearly half of respondents did not have any new ideas for changes. These respondents expressed positive experiences with the new rules.

Many respondents who offered suggestions proposed supporting on-time earnings through additional reminders, more reporting modes, and extended deadlines. For example, six respondents suggested text reminders or phone calls to prompt on-time reporting each month. Additionally, six other respondents indicated reporting modes that would make reporting more convenient (e.g., report via mail, email, smartphone app, or their counselor). Some others suggested moving the reporting deadline later in the month, perhaps to the tenth day of the month, to provide more time for beneficiaries to collect and submit their earnings documentation.

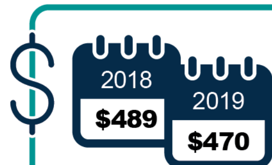
Suggestions for Improving Earnings Reporting

- Offer text prompts or reminder calls (N = 6)
- Offer other modes for reporting (N = 6)
- Extend the reporting deadline (N = 4)
- Enhance the online portal (N = 4)
- Change the reporting frequency (N = 3)
- Use clearer messaging about reporting (N = 2)
- Increase the POD threshold (N = 1)
- Share information between government programs (N = 1)

Source: Semi-structured interviews with POD treatment group members (N = 72).

D. Factors that influenced how treatment group members responded to the POD benefit offset

We also examined how treatment group members experienced the benefit offset adjustment. We used the interviews to explore how treatment group members responded to changes in their monthly benefits under the POD rules.



Among treatment group members who ever used the offset, **the average monthly reduction under the POD rules was $489 in 2018 and $470 in 2019**, which represents **45 percent** of offset users' average monthly SSDI benefit amount received at enrollment (Levere et al, 2021).

Proactive benefits counseling cited as important in preparing for monthly benefit fluctuations

Most eventual benefit offset users (including our respondents) used the most intensive individualized counseling services. For example, approximately 86 percent of all treatment group members who used the benefit offset received individualized counseling. By comparison, 24 percent of non-offset users received individualized counseling.[4] More than half

[4] These figures reflect programmatic data from Abt Associates through December 30, 2020.

(51 percent) of offset users received counseling services within two months of using the benefit offset, indicating POD counselors helped treatment group members to adjust to the new rules.

This timely and proactive support from POD counselors helped treatment group members plan for possible benefit fluctuations. For example, two respondents described working with their POD counselors to understand the $1-for-$2 earnings calculation and discuss budgeting. A third respondent's POD counselor informed them that their overall earnings and total income were higher even though their benefit payments were reduced.

Financial planning supported management of benefits

Treatment group members used various financial planning supports and tools to manage benefit fluctuations. Of the 59 respondents who reported being able to handle the changes in their benefit payment under the POD rules, 15 said they could do so because they understood the POD rules or knew in advance that their benefit payments would be reduced. Respondents described some tools and strategies to understand the $1-for-$2 calculation and manage their spending (for example, classes in financial management, preparing budgets, or offset calculation worksheets provided by their POD counselor).

> "I actually worked on my budget or I would look a month ahead to see what extra had to be paid . . . or I would call and ask could I extend this to this date. . . . I would try to pay something that was due the next month, because I knew my check was going to be short [smaller]."
>
> —Partial offset user describing how they managed changes to their monthly benefit payment

> "I officially got on the books [with a new job] that December. And [I] immediately called [my POD counselor] and let him know that I was going to be starting [to submit] some paystubs. He informed me that because I got paid at the end of the year . . . to input those, and that my Social Security would probably stop in January. So I had a month's notice that . . . this money is not coming. . . . And to me, that was great."
>
> —Former offset user describing interactions with their POD counselor

Some treatment group members managed changes in benefit payments by saving or monitoring their finances. These respondents noted using their extra income to save money to buffer against future benefits payment changes.[5] Others reported carefully monitoring their finances to inform their spending. For example, one respondent who worked for several employers calculated their expected benefit payment each time they accepted a new job to know their total income in advance. Another often called their benefits counselor to determine how much their monthly benefit payment would be, allowing them to manage their spending and plan accordingly.

[5] We asked all 65 treatment respondents who were currently in offset or had ever been in offset what made it hard to prepare for the monthly change in their benefit check and what helped to manage the changes. Of those 65, 59 were prepared to manage the change in their benefit check. Of those 59, 22 reported that their earnings compensated for the reduction in their benefit check.

Treatment group members with more volatile earnings struggled to predict monthly benefit adjustments

> "I had bills being paid on the day I was getting Social Security and then my Social Security [benefit payment] got reduced and then I couldn't pay half the bills"
>
> —Partial offset user describing their experience with the POD benefit offset

Respondents reported challenges in managing benefit fluctuations under the POD rules.[6] For example, one respondent noted that in months with five weeks and an extra pay period, they were paid three times per month instead of twice. As a result, their monthly earnings increased and their benefit payment was reduced more than expected. Another explained that although their earnings were higher than the reduction in their benefit amount, it was still difficult to manage their bills when they could not predict the timing or exact amount of the benefit adjustments. A third respondent understood the POD rules and how their check would be affected but found the two-month delay between earnings reporting and the adjustment in their benefit payment challenging. They knew to expect a partial benefit offset based on their earnings, but the aforementioned delay created challenges in understanding when the adjustment would occur.

Respondents with more consistent earnings, particularly higher earnings, reported fewer difficulties in managing their benefit adjustments. For example, four respondents noted their constant monthly earnings motivated them to earn enough to remain in full offset and therefore did not think about their benefit amount. One of these respondents enjoyed working to keep busy, another wanted to become financially independent, and a third described having to earn high wages to pay for their living expenses. This group reported no challenges in preparing for changes in their monthly benefit payments and did not report using tools or strategies to manage the variation. All respondents who had been in full offset for at least six continuous months reported being prepared to handle the payment reduction when their benefits were initially reduced to $0 under the POD rules. A few others were not affected because they lived with family members who assisted with their living expenses.

E. Suggestions for refining POD design features

As a final component of our interviews, we asked respondents for suggestions to refine future POD rules (Exhibit 4). Of the 72 respondents, 35 offered ideas for possible modifications related to the structure of the offset, earnings reporting, communications, or other suggestions.[7] Not surprisingly, most suggestions were geared towards allowing beneficiaries to retain more of their benefits while working. Thus, these suggestions from beneficiaries must be interpreted in

[6] Of the 65 respondents who were currently in offset or had ever been in offset, 7 reported that managing the changes in their monthly benefit payment was difficult.

[7] Of the remaining 37 respondents, most did not have a suggested improvement or indicated that POD should continue (30 respondents). Seven respondents did not provide a response or answered that they did not know.

this context, as opposed to policy recommendations that balance the full benefits and costs of specific proposals.

Exhibit 4. Suggestions from treatment group members for how SSA could improve POD

POD Feature	Suggestions
POD offset calculation (13 treatment group members)	• Increase POD threshold amount (6 responses) • Consider interactions with other federal programs when calculating earnings amount (5 responses) • Make monthly benefit check amount more predictable (3 responses)
Earnings reporting (8 treatment group members)	• Improve earnings reporting methods (3 responses) • Decrease frequency of reporting requirements to every three months or once per year (3 responses) • Require monthly reporting to simplify end of year reconciliation (1 response) • Improve accuracy with which reported earnings are captured by SSA (1 response)
Communication (8 treatment group members)	• Make POD counselors more accessible (3 responses) • Improve information exchange between POD and other agencies (2 responses) • Improve updating of treatment group members' mailing addresses (2 responses) • Allow treatment group members to opt into receiving all communication electronically (1 response)
Other (6 treatment group members)	• Clarify POD rules (2 responses) • Extend POD to make up time lost during the COVID-19 pandemic (2 responses) • Provide job training (2 responses)

Note: Some respondents provided more than one response to the question.

Source: Semistructured interviews with POD treatment group members (N=72).

POD = Promoting Opportunity Demonstration.

Adjust the POD offset calculation by increasing the POD threshold or changing the benefit offset

Some respondents suggested increasing the POD threshold or changing the benefit offset in some way. For example, six respondents suggested increasing the POD threshold so that treatment group members could earn more before a benefit offset; one person suggested the threshold be closer to $1,000. Four respondents thought offset calculations should change to consider how POD interacts with other federal programs. Two of these respondents thought the earnings amount should exclude expenses related to Medicare and Medicaid (one person focused on Medicare Part B premiums and the other focused on health-related expenses covered by Medicare and Medicaid). One suggested using an individual's earnings relative to the federal poverty level as a base for adjusting benefits. Three others suggested ways in which the monthly payment amounts could fluctuate less or be easier to predict (for example, by establishing payment amounts based on earnings within a specific range/tier or dividing benefits payments evenly across months in the year).

> "[I would tell SSA to change] . . .the payment system, so it would be easier to know exactly what you'll be getting every month. It's a surprise when you don't know. It would be straightforward, say if you make this amount, this is the amount you'll get for your Social Security [benefit payment]. If you go over this amount, this is what you're going to get. And then that will be easier, too. That way you know not to go over."
>
> —Partial offset user suggesting refinements to the POD rules

The suggestions underscore findings from the final report about beneficiaries' understanding of how earnings affects their SSDI benefits (Wittenburg et al. 2022). Specifically, we found that control group members struggled to understand specific provisions of current program rules. Respondents communicated similar struggles in understanding aspects of the POD rules. Taken together, the qualitative suggestions above underscore beneficiaries' desire for rules that are easy to understand and a preference for predictable changes in monthly benefits when a person does return to work.

Reduce the earnings reporting burden and improve information exchanges

Respondents also suggested improving the earnings reporting processes. For example, one respondent had difficulty accessing their paystubs and suggested that their employer should be able to submit earnings information directly to POD. Others indicated that reporting could occur quarterly or annually instead of monthly.[8] Other responses focused on improving POD communication and information exchanges.

> I did go to an agency . . . downtown in Baltimore, they knew nothing of the POD program. The people that are doing the job hunting for you, they had no idea about POD."
>
> —Former offset user describing experience with a non-federal agency

[8] This reporting cadence was used under the Benefit Offset National Demonstration, which tested a $1 for $2 benefit offset based on estimated annual earnings.

Of these, three respondents said POD counselors should be easier to contact or that POD treatment group members should have more access to them. Two said there should be better communication and coordination between POD and other agencies (federal and non-federal). Both had to explain what POD was to program operators.

Respondents expressed mixed views on the 12-month termination period

Finally, we included questions to assess perspectives on the period of termination. As noted above, the T1 and T2 groups had different termination provisions. However, respondents' views were not strongly associated with the treatment group (T1 or T2) they were in.[9] Rather, most respondents reflected more generally on the general need for an ultimate termination period.

> "I think [the 12-month termination period] is a fair amount of time. I think it's enough time for you to . . . be better acquainted with this scary step that you're taking. . . . At some point the cord has to be cut. If you're doing well enough, that you're not getting benefits for 12 months, I think that the whole process should end for you."
>
> — Full offset user sharing perspective on 12-month period before benefit termination

Respondents had mixed views on whether to extend the period before benefits terminate due to work. About half of respondents expressed that 12 months was a reasonable length of time to test working and earning more. The other half conveyed that providing beneficiaries with a period to test their ability to work before entitlement to benefits terminated was reasonable, but the length of time should increase (most suggested 18 months to 2 years) or be modified based on a person's age, disability, or circumstance at the end of 12 months. For example, one person suggested that after 12 months, the beneficiaries should have a health assessment to determine whether to extend the eligibility period. Others said that 12 months was not long enough to adjust to a new job and health benefits or that 12 months did not provide an adequate cushion to ensure that their health status would not change or that they could sustain a new job. Finally, some questioned whether eligibility for SSDI benefits should ever terminate.[10] For example, some suggested that the decision to terminate eligibility for SSDI benefits should consider individual factors, such as the

> "I think there shouldn't be a . . . [termination period]. I feel like people that [have] been on disability and . . . get better enough to where they can work and make do, instead of just sitting around monthly waiting on a check, they're able to go back to work; it brings confidence in people. When I went back to work, it brought my confidence up so high. I had a purpose. People are scared to go back to work, because they're afraid they're going to lose their benefit."
>
> — Full offset user sharing perspective on 12-month period before benefit termination

[9] The lack of differences in perspectives likely reflects that few treatment group members had continuous periods of full offset long enough for termination to take effect (see Wittenburg et al. 2022 for more details). The Final Evaluation Report showed that most outcomes for T1 and T2 groups, including impacts on earnings and benefit amounts, did not differ between these groups. These groups also had similar rates of benefit offset usage.

[10] Of the 35 respondents who were in full offset, 8 questioned whether eligibility for SSDI benefits should ever terminate.

person's disability, type of job, and amount of earned income. Others conveyed that eligibility for benefits should never be terminated. One person stated that if they were not receiving cash benefits, they did not think there would be a cost to the government to maintain their eligibility. The qualitative input above suggests a mix of approaches to termination of benefits due to work, that reflects the beneficiary's health status, income, and other personal circumstances. Although these are valid points, implementing such an approach to the termination rules would likely be complex to administer.

F. Discussion

The demonstration included a mix of supports that helped many treatment group members fulfill the program requirements and adjust to the POD rules. The implementation team and SSA instituted structures to support earnings reporting requirements and benefits counseling.

The findings provide qualitative insights into how more frequent earnings reporting requirements relative to current law affected beneficiaries and how they responded to benefit adjustments under the POD rules. Treatment group members faced challenges obtaining and submitting their earnings documentation to meet monthly reporting requirements. Some respondents overcame these issues with flexible submission options, such as via the web and mail. Overall, a high proportion of treatment group members who used the benefit offset accessed needed support to report their monthly earnings using the best method suited to their circumstances. One noted strength of implementation was the availability of individualized support from POD counselors. Treatment group members noted that the proactive supports from these counselors helped them better plan for the benefit offset and adjust to the new POD rules. Many treatment group members managed monthly changes to their benefit payments with advance planning and individualized counseling. They also expressed satisfaction with the POD rules, though some suggested extending the termination period and changing the earnings reporting process and frequency. Although these findings are based on a select sample of offset users, such individuals are the ones most likely to have earnings under current law and thus be the primary group affected by any changes.

Some POD processes could inform improvements around earnings reporting in current rules. Of particular note are the processes for more frequent reminders, individualized benefits counseling supports, and flexible options for earnings reporting. Adapting some of these processes for current rules could improve the timeliness of earnings reporting in the future. For example, adapting existing supports to focus more proactively on earnings reports, such as the Work Incentives Planning and Assistance providers who offer free benefits counseling to SSDI beneficiaries, could facilitate this effort. Additionally, SSA could leverage reminders sent through mySSA (for those beneficiaries with accounts) to prompt more frequent reporting of earnings. However, there are costs associated with such changes for both beneficiaries (e.g., time burden in organizing pay stubs) and SSA (e.g., processing more information) that are important to account for when considering any change. As noted in the final report (Wittenburg et al. 2022), SSA incurred costs with implementing and monitoring the new POD rules and associated counseling supports.

The qualitative findings might also inform future modifications to SSDI program rules. SSA recently proposed a legislative policy change that focuses on simplifying current rules using a four tiered earnings structure (SSA 2021b). A tiered structure that is tied to monthly earnings has the potential to address respondent concerns about frequent fluctuations in benefit payment amounts that surfaced in the interviews.

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APPENDIX

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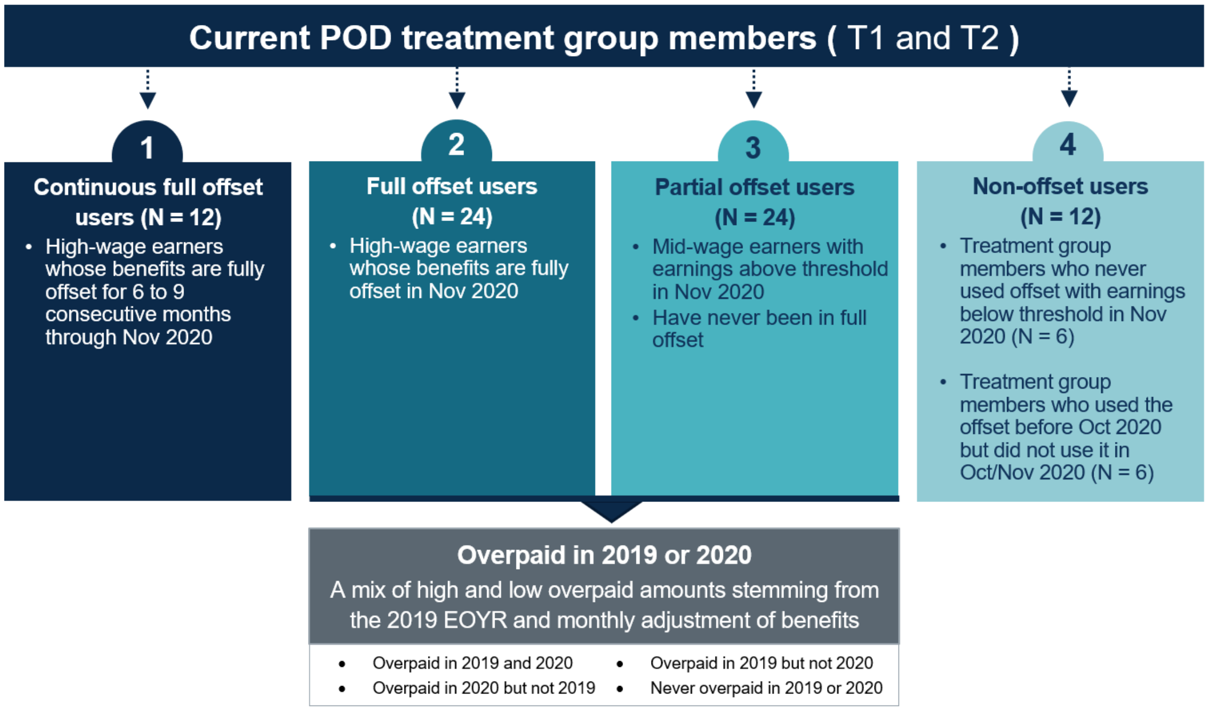
Appendix Exhibit 1. Approach to identify four subgroups for semistructured interviews with POD treatment group members



Note: For all groups, we excluded treatment group members who participated in an earlier round of qualitative interviews, whose preferred language is not English (as indicated on the baseline survey), whose participation in POD was terminated for a medical cessation or some other reason, who withdrew from POD surveys, or who otherwise communicated they did not wish to be contacted.

EOYR = end-of-year reconciliation; POD = Promoting Opportunity Demonstration; T1 = Treatment Group 1; T2 = Treatment Group 2.