Rethinking the Promoting Opportunity Demonstration Project

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The Bipartisan Budget Act of 2015 (BBA) extended the Social Security Administration's authority for conducting demonstration projects "designed to promote attachment to the labor force." To this end, the BBA mandates that the Social Security Administration (SSA) conduct a "Promoting Opportunity Demonstration Project" to (in the words of the Social Security Act) "determine the relative advantages and disadvantages" of a specific alternative to how current law treats "the work activity of individuals entitled to disability insurance benefits." Under current law, Social Security Disability Insurance (SSDI) beneficiaries who work face no loss in benefits for up to one year. After this interval, cash benefits are suspended if earnings exceed a certain threshold called "substantial gainful activity" (SGA). The Promoting Opportunity Demonstration (POD) is intended to test an alternative formula. While important details are left up to SSA, the POD would: (1) eliminate the one-year period during which beneficiaries could earn any amount without loss of benefits, and (2) reduce SSDI benefits by $1 for each $2 in earnings above a threshold that is lower than SGA. This formula would increase work incentives for some SSDI beneficiaries but (as discussed further below) reduce them for others.

Currently, only a small proportion of SSDI beneficiaries work at all, and fewer still earn enough to leave the program. Congress is justly applauded for authorizing and encouraging SSA to devise and test alternatives to current policy that show prospect of helping beneficiaries regain or increase labor force attachment. Unfortunately, given other BBA requirements, the POD cannot produce reliable evidence on the impact of the innovation Congress envisions. However, another experiment already funded by Congress, the Benefit Offset National Demonstration (BOND), is nearing completion. The BOND evaluation promises to provide evidence on the operational feasibility and impact of an incentive scheme very much like that incorporated in the POD.

This paper reviews current policy, outlines the changes proposed for the POD,

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and shows why other restrictions imposed upon the demonstration by the BBA would prevent the POD from yielding results helpful for guiding policy. It also summarizes important insights already gained from the ongoing BOND evaluation. In light of these insights and the problems with the POD design, Congress and the public would be better served if the SSA were allowed to invest research funds and management effort elsewhere.

This is a "friend of the Congress" brief. Students of SSDI from both parties agree that encouraging work by SSDI beneficiaries who are able to do so is desirable. Furthermore, there is no question that SSA can field the POD and will do so if Congress does nothing to change the BBA requirement. The practical question is whether Congress should modify the BBA requirement and enable SSA to direct its resources toward more promising ends.

How SSDI Works Today

People qualify for SSDI on the basis of age, work history, and onset of a disability.[1] Disability is defined as "inability to engage in any substantial gainful activity [SGA] by reason of any medically determined physical or mental impairment which can be expected to result in death which has lasted or can be expected to last for a continuous period of not less than 12 months" (SSA 2015). SGA is defined in terms of potential earnings. For 2016, the SGA threshold is $1,130 (except for blind beneficiaries, for whom the standard differs).

Once eligibility and disability are established, payments begin effective the fifth month following the date determined to be the point of disability onset. The SSDI benefit is based on the applicant's earnings history. Workers with low earnings histories receive smaller benefits than do workers with high earnings histories, but the ratio of SSDI benefit to pre-onset earnings—the "replacement rate"—is higher for low than for high earners.

In principle, SSDI applicants could be awarded benefits if currently working but earning less than SGA due to disability. In practice, virtually all applicants are unemployed when awarded benefits. However, once eligibility is established, the program encourages return to at least some work. As noted, work at earnings less than SGA has no effect on benefits. Monthly earnings above an indexed "trigger" amount ($810 in 2016) determine a "Trial Work Period" (TWP), during which beneficiaries can earn amounts beyond SGA without affecting their disability benefit. If earnings above SGA are sustained following a ninth TWP month, a three-year "extended period of eligibility" (EPE) begins. Payments continue for a three-month "cessation and grace" period without regard to earnings and then cease if earnings continue above SGA. Payments are resumed at any time during the EPE if earnings drop below SGA. Continuation of earnings above SGA beyond the EPE leads to termination of SSDI eligibility. Medicare coverage continues, however, and former

[1] See Owens (2016) for an overview of the SSDI program.

beneficiaries have an additional five years of eligibility for "Expedited Reinstatement" if earnings fall below SGA as a result of their disability.

This complicated procedure reflects a compromise among conflicting objectives. The TWP promotes return to work, and it presumes that movement into work is facilitated by removing risk of benefit loss for a period. At the same time, return to work signals some recovery of capacity, and it would make no sense to ignore such a development. SSDI is intended to support workers who are disabled, and the very first step in the disability process involves establishing that the applicant is *not* capable of earning above the SGA standard (SSA 2015, 3). Allowing continuation of benefits for a trial period may be justified as transitional support for return-to-work. However, allowing benefits to continue indefinitely for people whose earnings would preclude their initial eligibility is inconsistent with the program's logic.

Moreover, the opportunity for those returning to work to retain benefits may increase the attractiveness of SSDI application for workers with disabilities whose current work status makes them marginal candidates for SSDI qualification and presents them with alternatives. This "induced" application flow and the resulting caseload increase would raise costs. The current law is a compromise, providing support during the transition but also limiting continued eligibility if earnings are high and sustained. The EPE softens the impact of the TWP time limit for beneficiaries who cannot sustain work above SGA, by providing a ready door for return to benefit.

The law also requires periodic examinations of SSDI beneficiaries—continuing disability reviews (CDRs)—to determine whether they have recovered medically from the condition that established their benefit eligibility. One might suppose that earning above SGA should trigger a CDR, as sufficient earnings would suggest disability recovery. However, if employment did trigger a CDR, the threat of losing benefit eligibility would undermine the work incentives that the current treatment of earnings within the SSDI program creates. Consequently, medical CDRs are suspended for those engaged in trial work or training activities.

As accommodating as the CDR, the TWP, extended period of eligibility, as well as Expedited Reinstatement and suspension of medical CDR policies are, an important problem remains—a major disincentive for beneficiaries to work. Once the TWP and grace periods are exhausted, moving from earnings $1 below SGA to earnings even slightly above SGA results in complete loss of the SSDI benefit. The average SSDI payment to worker-beneficiaries in 2014 was $1,165, but in some cases payments were as high as $2,200 or more (SSA 2015, 23). The SGA level was then $1,070 ($1,800 for blind beneficiaries). While earnings above SGA are completely disregarded in benefit calculation through the TWP and grace periods, things come to an end when the three months of grace are exhausted—total income falls by the *total amount of the*

benefit. This drop is famously called the "cliff."

SSDI work incentives are complicated for SSA to administer and for beneficiaries to understand. In addition, the results are disappointing. Less than 1 percent of cases close each year because of medical improvement or working above SGA. Given the rigor of the qualification process, many recipients can never reasonably be expected to return to work. Indeed, a third of worker SSDI terminations are due to death. Even so, evidence exists that more SSDI beneficiaries may have work capability than are currently working.[2] For that reason, efforts to promote work that are less complicated and more effective than in the current system are surely justified.

Enter the POD

The BBA, as noted, proposes the POD to test an alternative to the current system for supporting return to work—and the differences between the two are dramatic. The POD would do away with the TWP and extended period of eligibility. Instead, benefits would be reduced by $1 for every $2 of earnings in excess of some amount equal to or less than the current $810 trigger for clocking a trial work month. This one-for-two benefit offset (i.e., a gradual reduction in benefits as earnings rise) would replace the current precipitous elimination of SSDI benefits after a year of earning above SGA—a "ramp" would replace the "cliff." The proposed ramp resembles procedures in the means-tested Supplemental Security Income (SSI) program, although the POD ramp begins at a much higher earnings level than occurs in SSI.

If the POD offset threshold is set at the maximum $810, beneficiaries could earn up to an amount equal to twice their base benefit award plus $810 and still receive some payment. For someone receiving the average monthly benefit in 2014 of $1,165, benefit payments would continue (at progressively lower levels) until earnings reached $3,140 per month or $37,680 per year. [3] Moreover, benefits could continue indefinitely at any lower earnings level. For people entitled to larger base benefits, earnings to even higher levels ($62,520 for those with base benefit of $2,200 per month) would be consistent with some continuing benefit payment.

POD Design Problems

Notwithstanding the potential merits of replacing the current benefit cliff with the POD's ramp feature, the POD design has four major problems that would lead to inequities among beneficiaries, as well as work disincentives, compared to current law.

1. The earnings level at which benefits are terminated under the POD would vary with the SSDI benefit level, leading to inequities that would benefit the pre-disability high earners. Under current law, the earnings level at which benefits

[2] See the discussion of "premature SSDI entry" in Stapleton, Ben-Shalom, and Mann (2016).

[3] $3,140 minus the disregard minus one-half of earnings in excess of the offset threshold = $3,140 - $810 - .5 * ($3,140 - $810) = $1,165.

cease after completion of the TWP and grace period is uniform—SGA. Under the POD, the benefit termination earnings (BTE) level would vary, because a person's BTE would depend on the person's SSDI benefit. In general, low wage earners receive the lowest SSDI benefits and, in consequence, would have the lowest BTE. The result is that, even though the same (SGA) standard would be applied to determine initial SSDI eligibility as under current law, under the POD some beneficiaries would retain eligibility and continue benefits at earnings levels much higher above SGA than others. The POD structure is particularly advantageous to those workers with high earnings in the years before disability onset who recover full capacity for employment.[4]

2. Any beneficiary with earnings between the offset threshold and SGA would lose under POD. Under current law, earnings in this range have no effect on benefits, although months with earnings at this level count toward the TWP and reduce opportunity for earning above SGA without suspension. Under POD, in contrast, each dollar earned above the offset threshold would lead to a fifty-cent reduction in benefits. If SSA runs the POD with a lower threshold, as the BBA permits, the range of earnings over which beneficiaries would be worse off under POD than they are under current law would widen and the amount they would lose would increase.[5]

3. Under POD, beneficiaries whose earnings cause benefits to go to zero would lose much more than they do under current law. Exceeding the BTE under POD would bring not just suspension of benefits, but also loss of entitlement. The BBA says that entitlement to SSDI under POD would end "following the first month for which such [SSDI] benefit has been reduced to $0 [through application of the one-for-two formula]." But POD would eliminate the TWP and EPE. As the BBA is silent on Expedited Reinstatement, that option would presumably remain available in some form. It includes up to 6 months of temporary cash benefits while an eligibility review, including a medical CDR, occurs. These features would confront working beneficiaries whose earnings are near to but below the levels (different for each person) at which benefits are zeroed out with troubling choices. Earning more would cost them, not only the small benefit that remains but also—and surely more importantly—the option to automatically regain benefits should a job be lost. Daring to earn more would require considerable faith in one's ability to sustain those earnings, as the beneficiary would give up the benefit backup provided by EPE for the uncertain outcome of Expedited Reinstatement.

This specification would also raise important administrative issues. Benefit

[4] Kathleen Romig (2016) points out that the POD offset would allow benefits to be paid to some beneficiaries earning substantially more than average wages across all workers.

[5] The POD specification allows the disregard to be increased for some individuals to cover "itemized" impairment-related work expenses.

payments would continue automatically until SSA received notice of earnings and was able to alter actual issuance of checks. Would payments made 'in error' be recouped? If so, how? Or would there be a grace period? If so, how long? Whatever the policy, eligibility would be lost once earnings caused benefits to be reduced to zero for even one month.

4. The gap between the SGA and BTE under the POD would increase inequities and introduce a major disincentive to leave the program for work. The BBA places no time limit on the one-for-two offset. Consider again the disabled worker who receives the 2014 mean monthly benefit of $1,165. The "average indexed monthly earnings" (AIME) that entitles the worker to this benefit is $2,161. Suppose that such a beneficiary recovers skill and capacity to hold a job paying just three-quarters of his/her pre-onset AIME—$1,621 in this example case. Under the POD, a beneficiary would be able to hold that job indefinitely, earn $1,621 per month, and continue to receive a monthly benefit of $760, even though $1,621 exceeds the SGA standard by over 50 percent. The beneficiary in the present example could well be working with another worker *with a functionally equivalent disability* who would not be eligible for the $760 per month benefit the POD would provide the example worker. And the gap between SGA and BTE would be even greater for the almost 50 percent of workers with base benefits greater than the $1,165 average.

Apart from the resentment such inequities might engender, this problem is important for the work disincentive it embodies. Survey data show the prevalence of disabilities that limit the kinds of work and potential earnings of working-age adults to be far greater than the prevalence of SSDI receipt under current law (cf. Bureau of Labor Statistics 2015). A differential like the POD would only increase the incentives for people who judge themselves potentially eligible for SSDI benefits to lose (or avoid) work strategically and apply. How large such an inflow would be and how great the consequent costs is uncertain, but the costs could well swamp any gain to the Disability Insurance Trust Fund from savings due to any increased work by those now on the rolls who respond to the one-for-two incentive.

Is A 'Real' Experiment Feasible?

The POD benefit offset formula has the great virtue of simplicity, and a demonstration could be structured, at least in principle, to enable its equity and incentive effects to be measured. Selecting a target group of SSDI applicants or beneficiaries—and consigning half at random to the current program and half to the POD for a period long enough so they behave as if the alternative system were permanent—is conceivable. Data could be collected in such a random assignment experiment on differences between the two groups in employment rates, the nature of the jobs they can find, and income. Any statistically significant differences in outcomes between the two groups could then be confidently attributed to the POD and potentially relevant for policy.

In the real world, however, it is hard to envision plausible conditions under which such an experiment could actually be fielded, because it would deny selectively to the POD group the benefit structure available to everyone else. While some people assigned to the one-for-two group would be made much better off by the new program's structure, many (possibly most) would lose. That means Congress would have to *either* force some people into an experiment that would injure them relative to the rest of the population, *or* provide sufficient compensation to induce voluntary participation. But the latter option would have to be done without skewing the decision to volunteer—which would otherwise result in a POD population unlike the general population, rendering the results useless as a guide to the effects of an actual policy. Such costs would have to be justified on the basis of policy-relevant knowledge to be gained. In the current context, as discussed in the next section, such justification would be virtually impossible to accomplish.

The Consequences of Volunteering and Revocation

The BBA requires that the POD experiment be done with volunteers, and established research protocols require that human participants give informed consent. Where in the SSDI application/ receipt process volunteer recruitment would occur will be up to SSA to determine. It could occur at the point of program entry, at some later point in receipt, or without regard to receipt history. Whatever the target group for volunteer recruitment, candidates would have to be told about current practice, the terms of the one-for-two innovation, and randomization. It is hard to think of a way to do this effectively, particular for new program entrants— persons who have just been through both the onset of disability and the complexities of SSDI's eligibility determination process.

Furthermore, provisions in the BBA guarantee those who volunteer to *enter* the POD experiment have the right to *leave* it—that is, "revoke" participation—at any time. Revocation can only mean that the recruited beneficiary returns to current program rules. But to where in the SSDI process would a beneficiary return? Do months spent working under POD regulations count toward the TWP? Revocation introduces a whole new element of strategy that must be explained to participants, and the optimal strategy depends to a significant degree on the point in the SSDI process to which the beneficiary is offered the opportunity to return.

Consider two example cases based on time of offer. If the one-for-two opportunity is presented early in SSDI receipt, before any return to employment occurs, the beneficiary will have to determine that one-for-two is desirable and therefore justifies volunteering and gaining a chance to get it. With one-for-two, the first twelve months of work above the offset threshold will produce smaller benefit than would be gained under current practice. The recipient would need to believe that 'investing' in a reduction in benefits lasting a full year would be compensated by the

necessarily uncertain prospect of earning more than SGA in future years.

If, instead, the one-for-two opportunity is presented at some point near or beyond the end of the TWP, the obvious choice for the beneficiary would be to volunteer. With all possible subsequent developments, the one-for-two makes beneficiaries at least as well off as under current law, because they could drop out of the experiment whenever it might be in their interest to do so, in particular to take advantage of the fast-track provided by EPE. But if this option is present, the POD experiment is really testing only the ability of beneficiaries to navigate options and choices even more complicated than those present in current law.

The architects of the POD apparently intend the demonstration to provide the basis for predicting what would happen if one-for-two became national policy. But in an experiment intended to support such a prediction, it is critical that the set-up creates for participants a "sense of environment" akin to what might be true if the innovation being tested were general practice. Then the predicted impact of a change from current policy to one-for-two would be based on comparing those volunteers selected by random assignment for one-for-two with those in a control group subject to current policy. The POD calls for explaining to people recovering from onset of major disability: (1) randomization; (2) how the current system works; (3) how one-for-two works; (4) the options for revocation if selected for participation; and (5) developments that might make volunteering for the demonstration, given the revocation option, the best "bet" for themselves. The revocation option not only forces SSA to develop much more elaborate regulations for how revocation and the consequent transfer would occur, it also destroys any notion that the environment created experimentally can be considered similar to a real-world POD.

It could well be that offering one-for-two to beneficiaries at the end of their TWP will lead to more employment than is observed among a control group subject to current practice. But even if the difference were statistically significant and in the desired direction, the results would have no external validity—and thus no relevance for policy—because the experience the demonstration creates would be quite different from what beneficiaries would respond to *if* something like the POD one-for-two were to become national policy.

Back to the BOND

The BOND evaluation mentioned earlier offers volunteer participants one-for-two reduction benefit offset as earnings increase, similar to the POD's one-for-two incentive. But in BOND the offset threshold is SGA, and offset begins only after the trial work and grace periods are completed. Most other aspects of the SSDI program are unchanged. The experiment was carefully thought out, and the evaluation design appears appropriate to gaining reliable insight into the consequences of eliminating

the "cliff."[6] While the experiment is not yet concluded, the interim results raise additional doubts about the utility of another offset experiment such as the POD.

BOND grew out of The *Ticket to Work and Work Incentives Improvement Act of 1999*, which mandated that SSA experiment with a one-for-two offset above a specific level determined by the SSA Commissioner. SSA contracted with four states for a Benefit Offset Pilot Demonstration (BOPD) from 2005 through 2009. Experience with these pilots contributed to plans for the more general offset experiment, the BOND, which began benefit delivery in January 2011. The project was operated in ten locations in an effort to satisfy a requirement that the sample be "nationally representative." More than 980,000 SSDI beneficiaries were assigned to either experimental or control groups.

The BOND benefit offset, which is applied only after use of the TWP and grace months, begins with earnings above SGA. In the BOND, as with the POD, benefits are reduced to zero at different earnings levels, depending on benefit amount. In the previous example of a beneficiary with the 2014 mean benefit, benefits reach zero at $3,400 under the BOND, compared to $3,142 under the POD. Reaching zero benefits under the BOND leads to benefits suspension, but not to termination of SSDI eligibility (as is required under the POD).

The BOND contains two "stages" of experimentation. The Stage 1 group was selected at random from the SSDI beneficiary population. Those in the experimental group were informed of the one-for-two offset to which they would be subject for five years. No volunteering was necessary, because the offset had no negative consequences. The impact of the offset is the difference between earnings of the group with the offset and those of the controls subject to current practice. In an effort to focus part of the research on beneficiaries who expressed interest in gaining the offset (and thus were likely to return to work, if not already working), the Stage 2 experiment recruited participants and further divided those randomly selected for offset receipt into two groups—one receiving standard Work Incentives Counseling (WIC), the other an "enhanced" counseling package. The second-stage design enabled assessment of both the impact of the one-for-two offset and the impact of giving participants more detailed information on how the offset works. The experiment also implemented an annualized calculation of the offset, to facilitate administration and to simulate likely procedures for benefit calculation and adjustment should the offset become law.

For participants, the BOND offset will endure for five years from the point of project selection. Over the entire experimental period, work beyond SGA (if it occurs) will not be considered in assessing on-going eligibility. The consequence is that, if implemented as designed, the BOND

[6] For background see Stapleton et al. (2010). For critical commentary, see SSAB (2013) and SSA Office of the Inspector General (SSA-OIG) (2015).

completely eliminates the benefits cliff for the experimental group.

Contractors manage both delivery of the BOND program and its on-going evaluation. The SSA makes payments and adjusts them. Both Stage 1 and Stage 2 proved difficult to implement.[7] Contractors had to establish credibility, explain the experiment and offset, and ensure payments accuracy. Use of the offset was initially very low. An interim report from Stage 1 after three years found: (1) no detectable effect on beneficiary earnings, but (2) increased program cost because benefits were paid to people whose benefits otherwise would have been suspended (Wittenburg et al. 2015). Results for Stage 2 are at this writing only available for 2012; they indicate small positive impacts of offset eligibility on earnings and employment (Gubits, et al. 2014). This "snapshot" occurs early in the participation process. The effect of the offset may grow over time. Recall these are effects for a subset of SSDI recipients who were drawn to the offset opportunity to volunteer for the experiment—they are a "select" subgroup of SSDI recipients. Nevertheless the initial outcome suggests that ultimately BOND will provide useful information on the effects of eliminating the cliff. Conduct of the BOND and its evaluation is expected to ultimately cost over $150 million (SSA-OIG 2015).

The BOND experience already provides important lessons for the POD. First, elimination of the cliff is not in and of itself the key to increasing employment among SSDI recipients. Despite incorporating a far more generous offset than proposed for the POD, the Stage 1 evaluation has yet to show significant impact on the likelihood that SSDI recipients become employed or retain jobs once they get them. The Stage 2 results are more promising than those of Stage 1, but may apply only to people already motivated to work. At this point, it is hard to detect the gain to be reaped from another, less generous and more complicated offset experiment—i.e., the POD—would provide more useful information on this front, without substantial alteration in the way the innovation is implemented and explained to participants. The BOND can provide clues about the strategy for such alteration after careful study of the full BOND experience, or at least more of it.

A second lesson is that innovations like the one-for-two offset that involve several facets of SSDI—ranging from continuing disability review through payments calculation and beneficiary relations—are difficult and complex to implement. Missteps in implementation can completely undermine the utility of demonstration results as basis for inference concerning possible effects of introducing the change more broadly. The more complex the message that must be conveyed to participants, the more likely it is that the innovation will be incorrectly described by SSA staff or their surrogates, and/or incorrectly understood by target participants. Communications issues posed serious problems for the BOND. Explaining the POD would be much more difficult.

[7] See Derr et al. (2015) for an implementation review.

Conclusions

It would be prudent to suspend implementation of the POD, for three reasons. First, the benefit offset procedure incorporated in the POD is questionable as a model for national policy. If ever implemented generally, it would lead to inequities that would be very difficult to justify. Second, the revocation option specified in the law for the POD leads to a system quite different from that envisioned in the demonstration mandate. As a result, the POD "test" will not yield information useful for Congress in future consideration of more universal application of a one-for-two offset. Third, the BOND is already directly measuring the impact of a one-for-two offset. While implementation of the BOND proved problematic, it is providing information that is useful, even if it has revealed no work response. More positively, it provides important clues on what to do and what not to do to implement any offset policy. Another one-for-two experiment should be delayed until the final details of BOND problems and results are in and fully digested.

None of the foregoing diminishes the importance of searching for strategies to promote return to work by SSDI beneficiaries capable of employment. These efforts should continue. At this point, however such a search might best be pursued by: (1) focusing on the eligibility process; and (2) developing (and experimenting with) programs built on the presumption that, for at least some workers experiencing onset of work-threatening medical conditions, eventual return to work is feasible and to be expected, given appropriate supports (possibly including transitional benefits). Stapleton, Ben-Shalom and Mann (2016) (SBM) propose a nationwide system of "Employment/Eligibility Services (EES)" that integrates early intercept and service support for those at risk with a triage-based SSDI eligibility system. The proposed new system would divert some workers from SSDI (and SSI) altogether. For others, award of long-term SSDI benefits would be postponed, and possibly made unnecessary, by a period of intensive return-to-work services provided by public and private organizations and managed through a single, state-operated gateway.

The SBM proposal involves major changes in institutions; to ease the transition, the authors include a plan of gradual learning-by-doing implementation across states. Innovations like EES, because they are intended to change the entire landscape of disability support, are not candidates for random assignment evaluation. But they do provide a vision of the appropriate direction of disability policy, and can be used to guide experimentation with the building blocks needed for ambitious structural reform. A fundamental problem with the POD is lack of any conceptual plan that justifies any more evaluation of the effects of adding a one-for-two offset incentive component to the SSDI program.

References

Bureau of Labor Statistics, U.S. Department of Labor. 2015. *Persons with a Disability: Labor Force Characteristics—2014*. Washington: The Agency.

Derr, Michelle, Denise Hoffman, Jillian Berk, Ann Person, David Stapleton, Sarah Croake, Christopher Jones, and Jonathan McCay. 2015. *BOND Implementation and Evaluation: Process Study Report*. Baltimore, Maryland: Social Security Administration, Office of Research, Demonstrations and Employment Supports.

Gubits, Daniel, Winston Lin, Stephen Bell, and David Judkins. 2014. *BOND Implementation and Evaluation First- and Second-Year Snapshot of Earnings and Benefit Impacts for Stage 2*. Baltimore, Maryland: U.S. Social Security Administration, Office of Research, Demonstrations, and Employment Support.

McCrery, Jim, and Earl Pomeroy, editors. 2016. *SSDI Solutions: Ideas to Strengthen the Social Security Disability Insurance Program*. Washington: Committee for a Responsible Federal Budget.

Owens, Patricia. 2016. "An Overview of Social Security Disability Insurance (SSDI)." Chapter 2 in McCrery and Pomeroy (2016).

Romig, Kathleen. 2016. "Demonstrations to Promote Work among Disability Beneficiaries Likely to Produce Limited Results." Washington: Center for Budget and Policy Priorities.

Social Security Administration. 2015. *Annual Statistical Report on the Social Security Disability Insurance Program, 2014*. Baltimore, Maryland: The Agency.

Social Security Administration, Office of the Inspector General (SSA-OIG). 2015. *Oversight of the Benefit Offset National Demonstration Project*. Report A-04-14-14078 (September). Baltimore, Maryland: The Agency.

Social Security Advisory Board (SSAB). 2013. *The Case for Terminating the Benefit Offset National Demonstration*. Position Paper. Washington: The Agency.

Stapleton, David, Stephen Bell, David Wittenberg, Brian Sokol, and Debi McInnis. 2010. *BOND Implementation and Evaluation: BOND Final Design Report*. Baltimore, Maryland: U.S. Social Security Administration, Office of Program Development and Support.

Stapleton, David, Yonatan Ben-Shalom, and David Mann. 2016. "The Employment/Eligibility Service System: A New Gateway for Employment Supports and Social Security Disability Benefits." Chapter 3 in McCrery and Pomeroy (2016).

Wittenburg, David, David R. Mann, David Stapleton, Daniel Gubits, David Judkins, and Andrew McGuirk. 2015. *BOND Implementation and Evaluation: Third-Year Snapshot of Earnings and Benefit Impacts for Stage 1*. Baltimore, Maryland: U.S. Social Security Administration, Office of Research, Demonstrations, and Employment Support.