Removing Obstacles to Employment and Increased Financial Independence through Improved Choices:

Making DI Work Better for Beneficiaries

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Presented By:

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My name is John Kregel and I am a professor at Virginia Commonwealth University (VCU) and Principal Investigator of the Work Incentive Planning and Assistance National Training Center at VCU. The Center provides training and technical assistance to over 500 community-based work incentive coordinators who support Social Security Disability beneficiaries every day in all 50 states to pursue their employment goals and reduce or eliminate their dependence on Social Security benefits.

Thank you for this opportunity to discuss ways in which the Social Security Disability Insurance (DI) program can work better to assist DI beneficiaries to obtain and maintain employment, improve their financial independence, and decrease their reliance on federal benefits. My testimony will address four major areas:

1. DI beneficiaries make employment decisions based on their financial situation, health, and other personal factors;
2. DI beneficiaries frequently identify the current DI program rules as a major disincentive to pursuing stable, long-term employment;
3. DI beneficiaries must comply with rules that are complex, difficult, time consuming, and too often result in unnecessary overpayments and unexpected benefit suspension; and
4. Future improvements to the DI program rules should eliminate the “all or nothing” aspect of a DI beneficiaries’ decision to return to work and promote long-term beneficiary engagement with the program.

Throughout my testimony I will be referring to beneficiaries who only receive DI benefits and will not address issues related to concurrent beneficiaries or other Title II disability beneficiaries.

Demographic and Employment Characteristics of DI Beneficiaries

The number of workers with disabilities receiving DI has risen steadily over the past 15 years, from 4.9 million beneficiaries in 1999 to 8.4 million beneficiaries in 2014. A number of factors account for the rapid rise, including the increase in the retirement age in 2003, the aging of the “boomer” population, and changes in the overall economy. In 2014, federal expenditures for the DI program exceeded $140 billion. The major demographic and employment characteristics of the DI population are summarized below.

The DI program primarily supports an older population of individuals who have (1) experienced a major trauma in their lives, such as an accident, disease, or condition, and (2) are not able to meet the “substantial gainful activity” earning threshold of $1,090 per month, which serves as the basis of DI eligibility. The average age of DI beneficiaries is 53 years old. As described in the table below, over 70 percent of all DI beneficiaries are over the 50 years of age, with only 10 percent of beneficiaries under 40 years old. Most DI beneficiaries have extensive work records that they have acquired over decades of employment.
### Age of DI Population

**December 2013**

<table>
<thead>
<tr>
<th>Age Category</th>
<th>Percentage of DI Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 30 years</td>
<td>2.3%</td>
</tr>
<tr>
<td>30 – 39 years</td>
<td>8.0%</td>
</tr>
<tr>
<td>41 – 49 years</td>
<td>17.4%</td>
</tr>
<tr>
<td>50 – 59 years</td>
<td>40.8%</td>
</tr>
<tr>
<td>60 years and over</td>
<td>31.5%</td>
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**DI Payment Amount** - DI payments serve as a partial wage replacement program for beneficiaries with a prior work history that are unable to work at a level above the substantial gainful activity threshold due to a medically determined impairment that results from an injury or serious medical condition. For the majority of beneficiaries, DI are able to replace 40 to 50 percent of their benefit earnings levels.

SSA determines the monthly payment for DI beneficiaries through a complex formula that involves an individual’s age and prior earnings record. In January 2015, the average monthly DI payment was $1,165 per month, or $13,980 per year. The $13,980 annual total represents about 118% of the 2015 federal poverty level of $11,770 for a single individual. In 2015, most beneficiaries receive a DI payment between $700 and $1,700 per month. The maximum payment for DI beneficiaries in 2015 is $2,633 per month.

The table below illustrates how a beneficiary’s age dramatically affects his or her monthly DI payment. For example, monthly payments to beneficiaries under the age of 25 were $588 in 2013, whereas individuals 55 – 59 years of age received over $1,202 per month. The table below illustrates the very low payments made to younger beneficiaries and the comparatively higher payments made to beneficiaries close to the retirement age.

### DI Mean Monthly Payment Amount by Age

**December 2013**

<table>
<thead>
<tr>
<th>Age Category</th>
<th>Mean Monthly Payment</th>
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<tbody>
<tr>
<td>Under 25 years</td>
<td>$558</td>
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<tr>
<td>25 – 29 years</td>
<td>$727</td>
</tr>
<tr>
<td>30 – 34 years</td>
<td>$840</td>
</tr>
<tr>
<td>35 – 39 years</td>
<td>$921</td>
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<tr>
<td>40 – 44 years</td>
<td>$989</td>
</tr>
<tr>
<td>45 – 49 years</td>
<td>$1,044</td>
</tr>
<tr>
<td>50 – 54 years</td>
<td>$1,113</td>
</tr>
<tr>
<td>55 – 59 years</td>
<td>$1,202</td>
</tr>
<tr>
<td>60 – 64 years</td>
<td>$1,289</td>
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**Type of Disability** - The Social Security Disability programs classify beneficiaries’ medically determined impairment into multiple diagnostic categories. Four categories account for 80 percent of all beneficiaries, including:

1. **Mental Disorders** – Psychiatric disorders and intellectual disabilities;
2. **Musculoskeletal Disorders** – Spinal injuries and disorders, arthritis, amputations, and others;
3. **Neurological and Sensory Disorders** – Epilepsy, multiple sclerosis, ALS, vision, hearing and others; and
4. **Cardiovascular and Circulatory System Disorders** – Various types of heart disease, arterial disease and others.

The table below describes the percentage of beneficiaries in the four major diagnostic categories for individuals in two age groups: (1) under age 50 and (2) 50 – 64 years. Beneficiaries under the age of 50 are far more likely to have a mental disorder than those in the older group. Similarly, beneficiaries in the 50 – 64 age groups were much more likely to have a musculoskeletal or circulatory system disorder than individuals in the younger group.

<table>
<thead>
<tr>
<th>Disability Category</th>
<th>Age</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>All Ages</td>
<td>Under Age 50</td>
<td>50 – 64 Years</td>
<td></td>
</tr>
<tr>
<td><strong>Mental Disorders</strong></td>
<td>31.4%</td>
<td>48.1%</td>
<td>25.0%</td>
<td></td>
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<tr>
<td><strong>Musculoskeletal Disorders</strong></td>
<td>30.5%</td>
<td>17.9%</td>
<td>35.4%</td>
<td></td>
</tr>
<tr>
<td><strong>Neurological and Sensory Disorders</strong></td>
<td>9.3%</td>
<td>11.0%</td>
<td>8.6%</td>
<td></td>
</tr>
<tr>
<td><strong>Circulatory System Disorders</strong></td>
<td>8.3%</td>
<td>3.9%</td>
<td>10.0%</td>
<td></td>
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</tbody>
</table>

**Poverty** – Many DI beneficiaries currently live below the poverty level. Livermore & Bardos\(^1\) estimated that 28 percent of DI beneficiaries live in households with income below the Federal Poverty Level. In comparison to other beneficiaries, DI beneficiaries living in poverty differed from those living above the poverty level in a number of ways, including:

1. Beneficiaries living in poverty received smaller DI payments and were less likely to receive other federal benefits;
2. Beneficiaries living in poverty were less likely to have completed high school and more likely to be individuals with mental health and intellectual disabilities;

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3. Nearly half (47 percent) of beneficiaries living in poverty reported that their current health was poor or very poor; and
4. Beneficiaries living in poverty were more likely to report that they had looked for work in the past month and that they currently faced multiple obstacles to employment.

Those DI beneficiaries with annual earned and unearned income totaling less than the $11,770 federal poverty level for households of one are likely to receive smaller benefits, be less educated, in poor health, but more likely to have sought employment in the recent past.

**Employment** – The employment rate for DI beneficiaries varies based on whether we measure a beneficiary’s work at a specific time, during the course of a year, or across a period of a number of years\(^2\). Generally, researchers have found that at any one time approximately 10 percent of DI beneficiaries are currently employed. Research has also shown that there are major differences in DI beneficiary employment participation rates across states, with some states as low as seven percent and others as high as 23 percent.

If the employment rates are viewed from a longitudinal perspective, a very different pattern emerges. Tracking the employment experiences of a cohort of newly enrolled DI beneficiaries over a 10 year period of time, researchers found that 28 percent of the individuals worked during the ten year period\(^5\) (Liu & Stapleton, 2011). In addition, nearly 7 percent had their benefits either suspended or terminated for at least 1 month because of work and 3.7 percent had their benefit checks terminated due to earnings over the allotted amount. These findings illustrate that for many DI beneficiaries, their return to work requires several years of rehabilitation and adaption in which they may return to their former career in a part-time or full-time basis, or start a new career very different than their former occupation.

**Summary** – The DI program provides wage replacement payments for 8.4 million beneficiaries. The program primarily supports individuals over the age of 50 (72 percent) with only 10 percent of beneficiaries under 40 years of age. The average benefit is $1,165 per month, which varies considerably across individual beneficiaries based on the earnings record. Individuals with Mental and Musculoskeletal disorders account for over 60 percent of all beneficiaries. Over


one-fourth of beneficiaries live in poverty, many of whom are in poor health and face multiple obstacles to employment. Only 10 percent of beneficiaries are employed in any given year only 1.0-3.0 percent earn sufficient wages to eliminate their need for benefits.

The fact that very few DI beneficiaries subsequently return to employment at a level that entirely eliminates their need for benefits creates a major challenge for our country. Long-term dependence on benefits limits the financial independence of beneficiaries and their families and places additional pressures on the Disability Trust Fund. It is particularly unfortunate that some DI beneficiaries who desire to go to work face a serious risk of losing their entire DI benefit if their cancer moves out of remission, their diabetes progresses, or they need additional surgery. Our DI program rules force beneficiaries to choose between the safety of keeping their current benefits and the reward of working and earning a sufficient amount to meet the needs of themselves and their families.

Employment Aspirations and Work Activity of DI Beneficiaries

Americans with disabilities who are DI beneficiaries are frequently viewed as unemployable, or has having no desire to work, when in reality millions of DI beneficiaries have clear goals to enter the workforce and reduce their reliance on disability benefits. In terms of the likelihood for engaging in employment or reentering the workforce, the 8 million beneficiaries can be divided into two main groups: individuals with no immediate plans for employment and individuals employed or seeking employment.

Individuals with No Immediate Plans for Employment (Approximately 5 Million Beneficiaries)
- Many DI beneficiaries are gravely ill and are currently battling life-threatening diseases or medical conditions, or are living with serious, long-term health impairments that preclude their ability to work at this time. One out five males and one out of four female die within five years of initial DI enrollment. For these individuals, DI benefits provide a crucial safety net that provides assistance with their basic needs. They do not see themselves as working in the immediate future, although their goals could change should their health condition improve and employment opportunities expand.

Individuals Employed or Seeking Employment (Approximately 3 Million Beneficiaries) - Many DI beneficiaries desire to work despite their current health conditions and the significant obstacles they face when attempting to secure employment. Yet this group, which comprises 40 per cent of all DI beneficiaries, are "work oriented" individuals who (1) have a clear goal to enter or reenter the workforce, or (2) have engaged in employment related activities in the past 12 months.

Translated into actual numbers, it is estimated that 1.5 million beneficiaries have work goals or aspirations, and an additional 1.5 million beneficiaries have the same ambitions and have also been employed or looked for work in the prior 12 months. There are two implications that result from this research. First, we should focus SSA’s employment and work incentive initiatives on the 3 million beneficiaries who express a desire to maintain employment and have taken actions to obtain employment in the recent past. Second, we should work to expand the
number of SSA beneficiaries who currently face many obstacles to employment and yet wish to pursue work as a viable career option.

**Obstacles to Employment for DI Beneficiaries**

DI beneficiaries seeking employment are attempting to work after acquiring a medically determined impairment, such as a severe injury, debilitating illness, or progressive condition. Extensive research over the past two decades has repeatedly documented the specific barriers to employment and financial independence that limit work opportunities for beneficiaries. These individuals face complex, multiple challenges that can be grouped into two main categories: (1) Disincentives to employment in SSA’s current benefit programs; and (2) Lack of beneficiary access to education, vocational training, and employment services.

**Disincentives to Employment** - DI beneficiaries who are capable and desire employment are far too often choosing not to work, restricting their earnings so as not to jeopardize their entire DI payment, or leaving employment in the face of disruptive overpayments or benefit termination. SSA’s work incentive programs can and must assist beneficiaries to overcome the demoralizing disincentives to employment that exist in our current policies and regulations. Major disincentives include fear of losing benefits, fear of overpayments, and lack of confidence in SSA’s ability to accurately administer beneficiary payments.

**Fear of Losing Benefits** – Over one fourth of DI beneficiaries currently live below the federal poverty level. Most of these individuals depend on their SSA benefits to meet their basic needs and would benefit tremendously from working. Currently, these individuals will lose their entire benefit if their earnings exceed a specific threshold over a nine month period of time. For beneficiaries with significant health problems struggling to meet their basic needs, many are seriously concerned that they will be left without any resources if their health deteriorates and/or they are unable to maintain employment. Fear of losing benefits leads them to unnecessarily choose not to work or to needlessly restrict their work hours and earnings.

**Fear of Overpayments** – DI beneficiaries are required to report their earnings to SSA on a regular basis. If the earnings are not quickly and accurately processed by local SSA Field Offices, an overpayment may result. The complexity of the rules in the DI may result in an overpayment to a beneficiary who had complied with all program rules. These unexpected and disruptive overpayments may cause tremendous financial burden for the individual and often lead beneficiaries to abandon their hopes for long-term employment by resigning their job or reducing their work hours.

**Lack of Confidence in SSA’s Administration of the Program** – Many DI beneficiaries have experienced difficulties with SSA processing of Impairment Related Work Expenses and other applicable work incentives. Others have expressed frustration with SSA’s recognition of their past work activities that affect their Trial Work Period and subsequent Extended Period of Eligibility. The DI program is extremely complex and
future changes to the program must recognize the necessity of accurate and timely program administration.

**Need for Employment Services and Supports** - In addition to barriers to employment created by the disincentives in the DI program regulations, beneficiaries also face other challenges as they attempt to enter or reenter the workforce. Many DI beneficiaries present unique challenges to employment service providers because they have been separated from the workforce for an extended period of time. Many possess chronic health conditions that require specialized employment supports. Lack of training and support services are frequently cited by beneficiaries as major obstacles to employment.

**Lack of Education and Training** - Efforts to promote access for DI beneficiaries who need additional training or education to launch a new career or who need specialized employment services have achieved mixed results. Employment services for these individuals must be based on proven, research-based practices.

**Lack of Job Opportunities and Employer Support** – DI beneficiaries often express the concern that there are no jobs in their community that they can perform, employers are reluctant or concerned that they unable to supervise the beneficiary, or there is no agency in their community to help them locate and adjust to the job. Many become quickly discouraged when they attempt to locate jobs on their own. Sufficient service capacity and employer supports must be available to maximize beneficiaries' opportunity for long-term, stable employment.

SSA has designed a set of work incentives and program provisions to incentivize beneficiaries who desire to return to work and increase their financial independence. The effectiveness of these work incentives has been established, but some work incentives are not widely used. The current situation clearly indicates that more basic program reforms should be considered.

**The Complexity of Returning to Work for DI Beneficiaries**

DI beneficiaries face many challenges as they attempt to return to work and maintain long-term employment. Many have gone through a long period of poor health and are not sure they can meet the demands of full-time employment. Others may be unable to return to their prior jobs and face the prospect of moving into a new area of employment. Their uncertain employment status and the potential loss of benefits after a period of time may lead them to question whether employment is a responsible choice for themselves and their family.

SSA program rules allow beneficiaries to work for a period of time (nine months) without any loss of benefits and potentially continue to receive benefits for an additional 36 months. The complete process for returning to work for DI beneficiaries is represented in the figure below. The process begins with the Trial Work Period (TWP).
**Trial Work Period** - The first time after entitlement that a DI beneficiary goes to work, they may access a work incentive called the Trial Work Period (TWP). The TWP effectively suspends the “able to perform Substantial Gainful Activity” part of the disability definition so that the beneficiary may attempt to work without immediately losing their cash benefits.

The TWP provides beneficiaries an opportunity to test their work skills while maintaining full benefit checks, no matter how much they may earn. Each year, Social Security sets a monthly amount to use as a guideline for determining use of TWP months. Currently, the TWP level is $780. If a beneficiary (1) has pre-tax wages of more than the $780 guideline; or, (2) works over 80 hours in self-employment during a month, that month counts as a Trial Work Service Month.

The TWP ends only when a beneficiary performs nine months of work over the Trial Work Period guideline within a rolling period of 60 consecutive months. The TWP service months do not have to be consecutive to be counted. If individuals work above the threshold for a period of six months, and then have a 36 month lapse in employment, and then work for another 3 months, they will have completed the trial work period. Once the TWP is used, it is gone. Beneficiaries are only afforded one TWP during a period of entitlement.
During the TWP, no other work incentives apply. A beneficiary does not need to utilize any deductions during the TWP since they can have unlimited earnings without penalty to their benefit amount. Work incentives cannot be applied to reduce earnings below the TWP guideline amount. The TWP is a stand-alone work incentive that does not permit deductions from gross earnings and does not interface with any other work incentive.

**Substantial Gainful Activity** – After a beneficiary has completed the TWP, SSA will conduct a Substantial Gainful Activity (SGA) review. For each month in which the beneficiary has gross earnings over the $1,090 SGA threshold amount, the beneficiary does not receive a benefit payment. Determining SGA is a multi-step process that relies on accurate earnings reporting by beneficiaries and timely and accurate processing by SSA. An entirely separate process is used to determine whether a self-employed beneficiary is working at SGA. If the beneficiary does not provide necessary information or SSA fails to accurately process the information, it is highly likely that the beneficiary may receive an overpayment.

**Cessation Month and Grace Period** - As long as the beneficiary continues to have a disability, the first time that SGA level work could affect payment of benefits is after the Trial Work Period ends. When a beneficiary performs sustained SGA level work for the first time after the TWP, this first month where this pattern begins is called the “cessation month.” Social Security allows a payment to be made in this month and the two succeeding months, called the “Grace Period,” for a total of three months before benefits are terminated.

**Other Work Incentives** – Beneficiaries are allowed to use several work incentive provisions to reduce their gross income and affect the SGA determination process. The most frequently used work incentives include Impairment Related Work Expenses (e.g. personal assistant services, assistive technology, or transportation), Subsidies, and Unsuccessful Work Attempts.

**Extended Period of Eligibility (EPE)** – The DI program rules provide a reinstatement period for beneficiaries who complete the nine month TWP and continue to have a medically determined impairment. The Extended Period of Eligibility (EPE), allows a beneficiary to be re-entitled to benefits any time during a 36-month period, if their work activity falls below the SGA level. The EPE reinstatement period begins with the month immediately following completion of the trial work period and ends 36 months later.

If the beneficiary earns less than the SGA threshold of $1,090 during an EPE month, the individual is entitled to receive their DI payment level for that month. If a beneficiary’s payments are “ceased” after the Trial Work Period, and the person needs to receive benefits again during the 36-month reinstatement period of the Extended Period of Eligibility, they do not have to file an application. Instead, they must simply establish with Social Security that their work activity is below SGA and provide a work activity report and necessary documentation.

**Expedited Reinstatement (EXR)** - EXR is a way to return more quickly to Social Security disability benefits when work is significantly reduced or stopped because of an individual’s
original disabling condition. The individual’s prior entitlement must have been terminated due to work activity, not medical recovery or any other reason. For DI beneficiaries, this means the individual was determined to have engaged in SGA.

The individual must be unable to perform SGA due to the same disability (or a related disability) that entitled the beneficiary to payments previously. If this is not the case, the individual must reapply for benefits and begin the process over again. The EXR provision allows an individual to receive up to six months of provisional (temporary) cash benefits while Social Security conducts a medical review to determine whether the individual can be reinstated to benefits.

Making the DI Program Work Better for Beneficiaries

Under current program rules, DI beneficiaries who return to work will have their benefit payment eliminated in each month they earn over SGA after completing their 9 month TWP and 3 month grace period. DI beneficiaries who return to work are under the threat of job loss for purely market-driven reasons, just as all workers are, and are under the additional threat of job loss due to a change or worsening of their health or disabling condition. The risk of losing all income based on a decision to return to work is a very high-stake risk. DI beneficiaries may be understandably afraid of losing both their DI benefit and their employment wages after a short return-to-work attempt. The fear of losing all income as a result of a decision to return to work likely prevents some potentially work-capable individuals from attempting work.

Extensive research has been done to understand how individuals make financial decisions by examining the risks and rewards of their potential actions. Some individuals are more risk averse than others. We know that individuals who are not in good health, who are not employed, or who have fewer resources may be more risk averse than individuals who are in good health, who are employed, or who have more resources. Individuals who rely on DI income are, by definition, not in good health, not employed, and have relatively few resources. Individuals who rely on DI may avoid work based on the very real risk that a failed work attempt will leave them with little or no income and no way to meet their basic financial needs.

Research also shows that a person is more likely to choose what is certain or established over what is possible, even if the possible event would be a much better circumstance. A DI beneficiary attempting to pursue their employment goals may choose to avoid the risk of losing all income with a short failed work attempt and instead to retain the certainty of DI benefits. The high stakes nature of returning to work for DI beneficiaries reduces the likelihood that a potentially work-capable individual will attempt work. Unfortunately, the perceived high risk nature of their employment decision too often leads to beneficiaries unnecessarily restricting their earnings below the SGA level, referred to as “parking under the cash cliff”.

DI beneficiaries would benefit from a change in the DI program rules that would provide a gradual reduction in benefit payments as the individual advances in their career and avoids the abrupt, total loss of payments after the completion of the TWP. This change would allow beneficiaries to pursue their employment goals while moderating the high risk choices that are inherent in the current program rules.
The opportunities for DI beneficiaries under a more gradual benefit offset are illustrated below through three case studies provided by Ms. Jolene Wanek and her at Employment Resources, Inc. (ERI) in Madison, Wisconsin. ERI provides work incentive counseling to DI beneficiaries in southeastern Wisconsin.

Case Study 1 - “Steve” is 52 years old and was a successful business owner before he ended up hospitalized with mental health issues. He ended up applying for and getting approved for DI benefits. When his mental health stabilized, he decided to start working again. He completed his Trial Work Period and was able to earn over SGA during most of his nine months. After his ninth month, he decreased his hours/earnings in order to remain eligible for his payment and the auxiliary payments that he gets for his daughters. He would not be able to replace the DI monies through his business and is financially better off working part-time and continuing to receive the DI. He would be very likely to work more, if he would have access to an offset of his payment instead of losing it completing by earning over SGA. He is also uncertain of his mental health status and worries that he could have a setback at any time. Due to this, he is fearful of letting go of the DI completely.

Case Study 2 - “Reed” is 42 years old and has an $1800 DI payment and $900 in auxiliary payments for his two young children – a $2600 total family benefit. He really wants to work, and had an offer for a well-paid position that would give him between 20 and 40 hours per week. However, the company was unable to guarantee his hours. His earnings at 40 hours would have immediately terminated his DI (had previous cessation, and EPE long over), and that was fine with him because he would not have then had less total income. However, 20-30 hours per week would also terminate his DI but leave him worse off financially. So, he felt that he needed to decline the job – too risky for his family financially. It seemed clear to the Employment Resources Inc. (ERI) staff that one of two things would have caused him to take the job: the assurance by the company of enough earnings after taxes to fully replace his DI, or an DI rule change that would have allowed him to keep a reduced DI payment in months that his earnings were above SGA but below the level that would leave him no worse off for working.

Case Study 3 - “Kathy” is 47 years old and has an $880 per month DI payment, and a job where she earns about $1000 per month. She really wants to be off of Social Security and not seen as “disabled”, and has been working hard on her recovery plan (she has a serious and persistent mental illness). Currently, and for the past two years, she has been in a position to earn a bit more by increasing her hours somewhat – enough to end her DI (even using her 10% subsidy), but not enough to replace the benefit. In order to become more independent, it is important for Kathy to gradually increase her work, as she has repeatedly done for the past 8 years. However, the next “gradual” increase will cause her to immediately be terminated from DI. The Work Incentive Coordinator at ERI has known Kathy for 15 years, and has no doubt that if she were allowed to gradually earn more and gradually decrease her DI payment, she would jump at the opportunity. She would be able to continue increasing her earnings until her DI payment finally ended.
Mr. Chairman, thank you again for the opportunity to share information on potential changes to the DI program that would enable beneficiaries to pursue employment opportunities, better meet their basic financial needs, and reduce their dependence on federal benefits.