



Lessons from SSA Demonstrations for Disability Policy and Future Research

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Overview

Over the past several decades, the Social Security Administration has tested many new policies and programs to improve work outcomes for Social Security Disability Insurance beneficiaries and Supplemental Security Income recipients. These demonstrations have covered most aspects of the programs and their populations. The demonstrations examined family supports, informational notices, changes to benefit rules, and a variety of employment services and program waivers.

A “State of the Science Meeting,” sponsored by the Social Security Administration and held on June 15, 2021, commissioned papers and discussion by experts to review the findings and implications of those demonstrations.

A subsequent volume—*Lessons from SSA Demonstrations for Disability Policy and Future Research*—collects the papers and discussion from that meeting to synthesize lessons about which policies, programs, and other operational decisions could provide effective supports for disability beneficiaries and recipients who want to work. This PDF is a selection from that published volume. References from the full volume are provided.

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Chapter 5

Demonstration Evidence of Early Intervention Policies and Practices

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Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) are important components of our nation’s social safety net for individuals with disabilities. They provide benefits for individuals whose disability precludes them from (substantial) gainful employment. However, if policies or practices for individuals who have a disability or who experience a disabling injury or illness can be implemented effectively that allow them to maintain or to achieve meaningful employment and earnings and forgo applying for benefits, then both they and taxpayers will benefit—a win-win situation! These policies and practices aimed at keeping individuals from entering the SSDI or SSI programs prematurely include transition assistance for youth (ages 16–24) and “early intervention” policies or practices targeting the population of adults (ages 25–64) with disabilities. This chapter focuses on the latter.

The Social Security Administration (SSA), which administers SSDI and SSI, would benefit from an effective early intervention, but it has limited ability to implement one. As with any agency, its goal is to be as efficient as possible; that is, to use its limited resources to provide benefits to individuals with disabilities. It should be noted that other agencies provide training, education, or other support services to these individuals.

In 2019, SSA received approximately 2 million applications for SSDI from workers and about 1.3 million applications for SSI from individuals ages 18–64. However, only around one-third of the SSDI and SSI applicants have been or will be approved for benefits.¹ If an early intervention were implemented that would effectively stem the inflow of applications, especially those likely to be denied, SSA could save costs: reduced operational costs from processing fewer applications, as well as reduced benefit payments. An enigma for SSA, however, is that it has very limited interaction with individuals who experience a disabling event until they apply for benefits. So SSA has limited opportunity to affect the behavior of individuals prior to their applying for benefits for the first time.

Besides attempting to reduce the inflow of first-time applications, SSA could find it beneficial to facilitate the return to work of individuals whose applications for

¹ The final award rate for disabled-worker applicants has varied over time, averaging 32 percent for claims filed from 2009 through 2018 (SSA 2020b, 155).

benefits have been denied.² If individuals do return to work, revenue from the payroll tax will increase, and the likelihood of later, repeated applications would likely decrease. Again, however, the ability of SSA to affect these individuals is limited as they are neither receiving benefits nor actively pursuing an application.

If effective early interventions were to stem the inflow of new or repeated applications that are likely to be denied, then another group of individuals who would benefit is future eligible applicants. These individuals would likely receive more timely decisions.

Despite limitations in being able to interact with individuals before they apply for benefits or after their application has been denied, SSA has used and is using its demonstration authority to test early intervention initiatives, often in collaboration with other agencies. This chapter provides analyses of the evidence that has been or is being generated by these demonstrations and other ideas that have been implemented or put forward for early intervention programs or policies.

To be successful, early interventions will increase the potential applicant's productivity through supports that will enhance their human capital. The early intervention demonstrations or reforms described in this chapter are intended to increase individuals' productivities and effective wage rates through the provision of Vocational Rehabilitation (VR) services or other types of training, through provision of assistive technologies or other work accommodations, by intervening as soon as possible after the medical event, by providing the services of a workforce counselor, through transitional jobs that will increase worker human capital, or by standardizing the eligibility determination process making it less manipulable to varying diagnoses from local/personal medical staff.

The first section of this chapter describes the context for early intervention strategies and characterizes the target populations for such strategies. The second section of the chapter is the heart of the discussion. It reviews the SSA demonstrations and reforms that have taken place. The review places particular emphasis on the empirical evidence that has been gathered to date. The third and fourth sections, respectively, complement the review of demonstrations by discussing international experiences and by presenting early intervention strategies suggested in the literature that have not been tested or implemented. Those sections are followed by a presentation of the lessons about early intervention policies and practices that can be drawn from the empirical evidence or suggestions in the literature. The sixth section offers an idea about a potential demonstration of an early intervention targeted at individuals age 50 and older that SSA might consider implementing. The final section offers concluding remarks.

² A focus of this chapter is on denials, but effective early interventions may reduce the inflow of (approved) beneficiaries, as well. Maestas, Mullen, and Strand (2013) estimate that 18 percent of new SSDI beneficiaries are able to engage in substantial gainful activity within two years, but only 5 percent do.

CONTEXT

Individuals' Pathways to Benefit Application or Employment

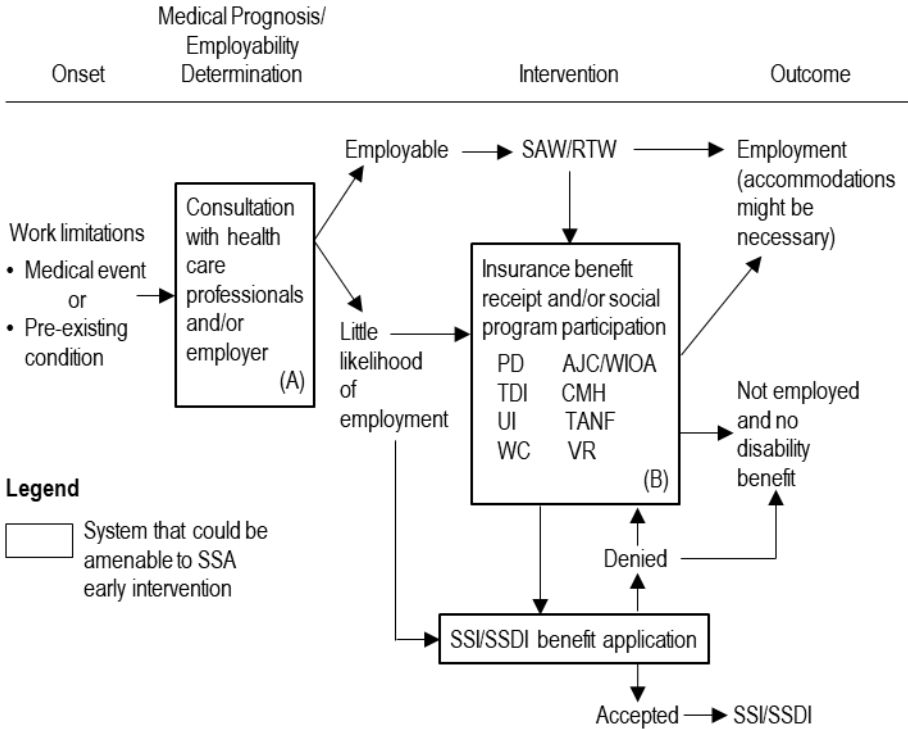
Though the circumstances of individuals with disabilities can vary considerably, the decision to apply for disability benefits (SSDI or SSI) essentially involves four steps, as shown in Exhibit 5.1 below. The steps are onset, medical prognosis and employability determination, intervention, and outcome. The onset, as displayed in Exhibit 5.1, occurs when an individual experiences a job-threatening injury or illness or when they decide that a medical condition that they have had for a long time affects their ability to work. Then, in consultation with one or more medical professionals and/or their employer (box A), the individual will learn of their medical prognosis, from which they will be able to ascertain their likely employability. In the US health care system, this step is highly decentralized and individual driven. Some providers might encourage employment; others might be more circumspect. Based on the information the individual receives, they will perceive themselves as (or might be told that they are) employable or not likely to be employable.

Individuals who perceive themselves to be employable and who are interested in obtaining or retaining employment will seek stay-at-work (SAW) or return-to-work (RTW) interventions. In some cases, the individual and their employer will agree to continued employment with accommodations such as job redesign, reduced time, assistive devices, or other practices that allow the individual to continue to be able to productively do their job. In most other cases, in which job separation has or will occur, interventions will usually involve an insurer that will provide short-term financial assistance (left column of box B in the exhibit) and a social program that will provide assistance such as financial aid, occupational training, job search services, or other types of support aimed at the goal of re-employment (right column of box B). These individuals compose the target population for early interventions.

Individuals who perceive themselves as having little likelihood of re-employment might receive insurance benefits and participate in social programs, but they are likely to also successfully apply for disability benefits, especially if their condition is on the SSA Listing of Impairments–Adult Listings (Part A).³ It is possible that these individuals become gainfully employed, but because the likelihood is low, they are excluded from the target population for early intervention interventions in the exhibit.

³ The listing of impairments for adults is available at <https://www.ssa.gov/disability/professionals/bluebook/AdultListings.htm>.

Exhibit 5.1. Pathway to Benefit Application



Key: AJC/WIOA=American Job Centers/Workforce Innovation and Opportunity Act agency. CMH=community mental health. PDI=private disability insurance. RTW=Return to Work. SAW=Stay at Work. TANF=Temporary Assistance for Needy Families. TDI=state-mandated temporary disability insurance. UI=Unemployment Insurance. VR=Vocational Rehabilitation. WC=workers' compensation.

The possible outcomes in the exhibit are employment, in which accommodations might be necessary, neither employed nor on benefits, and receipt of SSDI/SSI. The outcomes are not mutually exclusive. The programs and supports that SSA provides to SSDI beneficiaries and SSI recipients to encourage employment, such as the Ticket to Work program, result in some individuals whose outcomes are both employment and benefit receipt.

Exhibit 5.1 depicts the two systems along the pathways to benefit application that could be amenable to an SSA early intervention strategy—boxes A and B. What is striking is that both of these systems are extremely decentralized, which makes any sort of SSA collaboration extremely difficult. Box A, in which the Retaining Employment and Talent after Injury/Illness Network (RETAIN) demonstration described below is encapsulated, comprises thousands of health care professionals in independent practices. Box B comprises the social assistance system described in some detail below, with several programs that are operated independently and that have state

and local autonomy. The Supported Employment Demonstration (SED) described below is a collaboration between SSA and one of the agencies within this second system.

Size and Characteristics of the Target Populations

Size

Two independent methods have been employed for estimating the size of the target population for whom early intervention(s) could be effective. First, the number of adults ages 25–64 who experience a serious on- or off-the-job injury or illness in a year is estimated.⁴ Second, the number of SSDI or SSI applicants in a year who were denied benefits because they were determined to be employable is estimated.⁵ These estimates suggest that the target population for early interventions was between 1.1 and 2.0 million individuals in 2019.

The starting point for the initial estimate of the flow of individuals for whom early interventions might be targeted is individuals who experience a disabling medical event—*injury or illness*—on the job. The Bureau of Labor Statistics (BLS 2020b) reported that approximately 890,000 nonfatal work-related injuries and illnesses that resulted in the loss of at least one day of work occurred in private industry and approximately 220,000 in state and local government enterprises in 2019. The BLS provides worker characteristics and number of days away from work for the private industry occurrences. These data indicate that approximately 220,000 cases resulted in 31 or more days away from work for workers ages 25–64. Assuming that the severity and characteristics of the injuries and illnesses for workers in state and local government enterprises are similar to those in private industry adds approximately 50,000 cases. The BLS data do not include the federal workforce, however. According to Hill (2020), the civilian federal workforce is slightly less than 20 percent the size of the state and local workforce, so federal workers might add another 10,000 cases. In short, approximately 280,000 adult workers in the United States suffered an on-the-job injury or illness in 2019 for which they missed at least 31 days of work.

To round out the estimate, non-occupational injuries or illnesses are added. According to the National Safety Council (2020), more than three times as many injuries requiring medical attention occur off the job than on the job. Indeed,

⁴ This estimate undercounts the target population because it does not include the number of individuals who have not applied for SSDI but who have congenital or other pre-existing disabilities or illnesses that occurred in prior years who might be employable. On the other hand, it overcounts the number of individuals experiencing a serious disability or illness in a given year who might apply for benefits, as SSA rules require the medical condition to last or be expected to last 12 months or end in death, and very little data exist on the duration of injuries or illness that occur in a year.

⁵ SSA could presumably generate the precise number, but it is not easily producible from public data.

Neuhauser (2016) estimates that non-occupational injuries and illnesses could be six times as common as occupational ones. If these factors are applied to the on-the-job lost-time injury data, then an estimate of 1.1 to 2.0 million individuals who experienced a work-threatening medical event in 2019 either on or off the job is derived.

As a check on that estimate, the number of individuals who apply for SSDI or SSI but who have been or will be denied because of a determination that they are employable is estimated. Whereas around 3.3 million applications for SSDI or SSI were received from adults in 2019, many individuals applied for both. Of these, approximately 2.4 million adults applied for one or for both programs in 2019.⁶ With an ultimate approval rate of 35 percent⁷ and under the assumption that the 2.4 million is a steady-state estimate of individuals who apply for benefits, then it can be estimated that approximately 840,000 of the adults who experienced a disability in 2019 will ultimately be approved for SSDI or SSI. (Note that in 2018, there were about 500,000 SSDI allowances and 460,000 SSI awards to individuals ages 18–64, so an estimate of 840,000 adults seems reasonable.) The share of the SSDI or SSI applications that will be ultimately denied is about 65 percent, or about 1.56 million adults.

Data presented in Wixon and Strand (2013) show that approximately two-thirds of applications for SSDI or SSI were denied because the individuals were determined to be capable of work.⁸ Assuming that two-thirds also holds for individuals who applied for benefits in 2019, then the size of the population of individuals who have been or will be denied benefits who are capable of working is about 1.0 million individuals. Maestas, Mullen, and Strand (2013) estimate that 18 percent of new SSDI beneficiaries are able to engage in Substantial Gainful Activity (SGA) within two years, but only 5 percent do. If 18 percent of the allowed beneficiaries in 2019 were able to engage in SGA within two years, then approximately 130,000 individuals should be added to the number of individuals denied benefits due to a capability of working, in order to finalize the second estimate of the annual population who could

⁶ Computed from data provided at “SSA State Agency Monthly Workload Data,” <https://www.ssa.gov/disability/data/ssa-sa-mowl.htm> (accessed May 7, 2021).

⁷ Ultimate award rates averaged 34.2 percent between 2009 to 2015 (SSA 2020b, chart 11; accessed May 7, 2012, at https://www.ssa.gov/policy/docs/statcomps/di_asr/2019/charts-text.html#chart11). In the years 2012 to 2015, the data show less than 1.0 percent with the final decision pending. Years after 2015 had at least 2.4 percent pending.

⁸ Wixon and Strand (2013) display the Disability Determination Services codes for applications to SSDI (Table 1) and SSI (Table 2). For the former, 67.0 percent of the denials have codes of H1, H2, G1, G2, J1, or J2, which denote capacity for SGA. For SSI applicants, 70.5 percent of the denials have codes of 31, 42, 32, or 43, which denote capacity for SGA. In an analysis of the individuals eligible for the SED demonstration (denied SSDI or SSI applicants, as discussed below), Taylor et al. (2020) report that the mean of their WORKPOTENTIAL variable, which is defined as having a denial code of N32, which is ability to earn above the SGA level in any job, is 37.2 percent (Table 6-5), which compares to 43.3 percent for code 32 in Table 2 of Wixon and Strand (2013).

benefit from SAW/RTW supports; that is, a bottom line of approximately 1.2 million individuals.⁹

Thus, two independent estimates suggest that the target population is between 1.1 and 2.0 million individuals. This estimate accords with the discussion presented by Hollenbeck (2015). Using estimates from the Census Bureau's Survey of Income and Program Participation and its Current Population Survey, he reports that more than 2 million individuals annually leave the labor force, at least temporarily, due to a disability.

Characteristics

The above discussion derives an estimate of the size of the target population, but very little data are available to characterize it. BLS (2020b) provides selected characteristics for private industry workers who experienced an on-the-job injury or illness that caused at least 31 days of work. Men, workers older than age 45, workers of color, and workers engaged in a few unskilled or semi-skilled occupations are overrepresented. It should be noted that it is not clear how representative the characteristics of individuals with work-related impairments will be of the full target population. Hollenbeck's study finds similar characteristics for individuals who left the labor force because of a disability, except for gender:

Individuals who exit the labor force because of a disability are disproportionately female and non-white; they are less likely to have attended college and their average age is over 45. In particular, among the individuals who reported disability onset at some point in the eight months' worth of [Current Population Survey] data we examined, about 20 percent did not have a high school diploma, and only about 22 percent had a bachelor's degree or higher; in the labor force overall, these percentages were about 10 percent and 33 percent, respectively. (2015, 3)

As Exhibit 5.1 above notes, individuals with disabilities participate in a number of different social insurance or social assistance programs prior to or coincident with applying for disability benefits from SSA. Any early intervention project or policy that gets implemented is likely to interact with one or more of these policies or programs. To frame the context for early intervention policies, the next subsection briefly describes the history of those programs and denotes their interactions with SSA.

⁹ Autor et al. (2015) suggest that the percentage of beneficiaries able to engage in SGA is considerably underestimated in Maestas, Mullen, and Strand's (2013) study because it took into account only the effect of receiving benefits on recipients' labor supply, whereas there is an additional impact caused by the delay in processing. This finding suggests that the number of 2019 beneficiaries capable of earning SGA might be twice as large as the estimate of 130,000, making the bottom line estimate around 1.5 million.

US Policies and Programs for Disabled Adults

This subsection describes the policy and programmatic environment for disabled adults in the United States within which the SSDI and SSI programs operate.¹⁰ It is likely that successful early interventions will involve collaborative efforts with some of these programs.

Workers' Compensation (WC)

In 1911, Wisconsin was the first state to mandate that employers maintain workers' compensation insurance. Gradually, WC became required in all states.¹¹ Although there is wide cross-state variation in the program's regulations and benefits, the basic tenet underlying this insurance is that workers who are injured, or in some states who become ill, while on the job would have their medical expenses paid and would receive compensation for loss of time, in return for waiving the right to sue their employer. This insurance provides an important economic safety net for a subset of disabled adults—those whose disability occurred in the workplace. Most workplace injuries do not involve lost time; but if a worker does lose time, WC will include benefit payments, which in most cases are time limited. In general terms, the earnings replacement rate for WC is around 60 percent.

SSDI interacts with WC in two ways. SSDI beneficiaries might have received WC prior to receiving benefits from SSA; and in some cases, individuals are receiving both. Nichols et al. (2020) find that WC can be a “touchpoint” for individuals with disabilities prior to receiving SSDI or SSI benefits, although the percentages are relatively small. In their analysis, 10 percent of a national sample of nonelderly individuals with a work disability received WC, and 19 percent of them received disability benefits within 20 months of their earnings loss. O’Leary et al. (2012) analyzed a comprehensive data set of WC claims matched to SSA administrative data from one state. They report that about 10 percent of individuals with a compensable lost-time injury received SSDI within 10 years of the injury, a major share of whom were permanent total disability cases. The Social Security Act was amended in 1965 to require an offset in WC or SSDI benefits if they were being received at the same time and exceeded a threshold.

Given the decentralized nature of funding for and rules and regulations for WC, any collaborative effort by SSA to implement an early intervention strategy would likely require interactions with all 50 states and the District of Columbia.

¹⁰ This discussion is limited to civilian benefits. For a discussion of benefits available to veterans, see “VA Disability Compensation,” US Department of Veteran Affairs (<http://www.va.gov/disability/>) and further links on that page.

¹¹ Texas does not require private sector employers to provide WC, although public sector employers are required to carry it. Private employers may buy voluntary WC insurance.

Vocational Rehabilitation (VR)

VR provides services—training, education, counseling, and so on—that will enable individuals with disabilities to obtain employment. Not long after Wisconsin enacted the first state WC law, the Smith-Fess Act of 1920 established the VR program for individuals with physical disabilities. A little more than two decades after the original act, in 1943, the Barden-Lafollette Act expanded VR eligibility to individuals with mental impairments or psychiatric issues. The Rehabilitation Act Amendments of 1992 emphasized presumptive employability—individuals with disabilities should be assumed to be employable unless proven otherwise—as the primary goal of VR.

Individuals with disabilities who are interested in employment are eligible for VR.¹² Depending on the individual’s circumstances, cost sharing could be required from the participant. The services that are provided are wide ranging: medical and psychological assessment, vocational evaluation and planning, career counseling and guidance, training and education after high school, job-site assessment and accommodations, job placement, job coaching, on-the-job training, supported employment, assistive technology and devices, and time-limited medical and/or psychological treatment.

It should be noted that under the VR Cost Reimbursement program, SSA reimburses VR agencies for the service costs of SSI recipients or SSDI beneficiaries who become employed for at least nine months and earn at least the level of SGA (currently \$1,310 per month for disabled individuals and \$2,190 per month for individuals who are blind). SSA reimbursed the training costs for almost 18,000 individuals in FY 2020 (SSA, “State,” n.d.).¹³

Community Mental Health

The Community Mental Health Centers Act of 1963 was an initiative of President John Kennedy. The main focuses of the Act were to provide medical and other services to individuals with long-term and disabling illnesses and to deinstitutionalize individuals with mental impairments. At the federal level, funding for community mental health agencies comes from the Substance Abuse and Mental Health Services Administration within the US Department of Health and Human Services. States provide supplemental funding. Though much of the emphasis of the community agencies is on treatment, supported employment and employment counseling services are also provided. As noted below, a large-scale early intervention demonstration

¹² The severity of the disability will affect eligibility in the state agencies under “order of selection.” These states must prioritize individuals with the most severe disabilities.

¹³ In fact, state VR agencies are the only programs authorized by law and automatically approved to provide services to beneficiaries under the Ticket to Work program without becoming an Employment Network. Whenever a beneficiary receives services from a state VR agency, SSA considers the individual to be using their ticket (https://www.ssa.gov/work/vocational_rehab.html, accessed May 7, 2021).

(SED) is being conducted in collaboration with community mental health agencies. Given the federal funding and administrative base of the community mental health program, it would seem possible for SSA to implement a training cost reimbursement intervention similar to the one it has with VR. However, employment training that results in earnings that exceed the SGA level might be less of a primary goal of these agencies than in VR. For example, the Mental Health Treatment Study (MHTS) found that the intervention that was tested improved the labor market and mental health outcomes for SSDI beneficiaries but had virtually no effect on the number of individuals with earnings that exceeded the SGA level.¹⁴

Private Disability Insurance (PDI)

Short- and long-term disability insurance plans, typically provided and financed by employers, replace some of the pay workers lose when they cannot work because of an injury or illness that is not related to their job. According to the BLS (2020a), 42 percent of private industry workers had access to short-term disability insurance plans and 34 percent to long-term plans. Some 26 percent of state and local government workers had access to short-term and 38 percent to long-term coverage. Long-term disability benefits are often set at 60 percent of prior earnings, and they are paid until the individual recovers, until retirement, or for a specified number of months. Benefits are typically coordinated with SSDI benefits. For example, plans may require beneficiaries to apply for SSDI and may reduce the benefit by some or all of the SSDI benefit received.

Autor and Duggan (2010) suggest that legislatively mandating PDI coverage could be an effective early intervention. Nichols et al. (2020) find that as with WC (discussed above), PDI can be a “touchpoint” for disabled individuals with disabilities prior to receiving SSDI or SSI benefits, although the percentages are relatively small. In their analysis, 9 percent of a national sample of nonelderly persons with a work disability received PDI, and 37 percent of those individuals received disability benefits within 20 months of their earnings loss.

¹⁴ The following comes from the MHTS final report (Frey et al. 2011): “Eight percent of the study participants showed average earnings over the 24-month study period that exceeded the current level of SGA. Beneficiaries in the treatment group did not experience an increase in work that SSA considers SGA when compared to participants in the control group. Neither did participants in the treatment group experience a reduction in benefit payments when compared to participants in the control group” (EX-9).

State-Mandated Temporary Disability Insurance (TDI)

Five states mandate insurance programs that partially compensate workers for the loss of wages caused by a temporary disability not related to their job.¹⁵ In 1946, Congress amended the Federal Unemployment Tax Act to permit states where employees make contributions to the Unemployment Insurance (UI) program to use some or all of these contributions to pay disability benefits (but not administrative costs). Rhode Island had already enacted this program in 1942. It was followed by California (1946), New Jersey (1948), New York (1949), and Hawaii (1969). Rhode Island has an exclusive state fund; in the other states, employers may buy group insurance or self-insure. The plans vary across states, but in general, benefits are approximately 50 percent of earnings and have maximum durations of 26 or 52 weeks.

Other Programs

Programs that serve sizeable numbers of adults with disabilities but do not directly target that population include Temporary Assistance for Needy Families (TANF), workforce development programs operated under Title I of the Workforce Innovation and Opportunity Act (WIOA), UI, and the Supplemental Nutrition Assistance Program. Barden (2013) notes that depending on the definition of disability that is used, between 10 and 40 percent of TANF recipients could be characterized as having a disability. WIOA performance data report that in Program Year 2019 approximately 34,000 exiters (6.4 percent) from Title I WIOA Adult or Dislocated Worker programs were individuals with disabilities (DOL, “WIOA,” n.d.). According to BLS (2019), about 61,000 of the 947,000 individuals (6.4 percent) who received UI benefits in 2018 self-reported a disability. In 2019, almost 12 percent of Supplemental Nutrition Assistance Program benefits went to households with an individual with a disability.

EARLY INTERVENTION DEMONSTRATIONS

This section of the chapter will review the early intervention demonstrations that have been administered or supported by SSA. The discussion proceeds in chronological order.

¹⁵ Recently, two states (MA, WA) and the District of Columbia passed family and medical leave mandates. Not targeting solely individuals with disabilities, these programs include coverage for temporary disabilities. The Massachusetts program is described at <https://www.mass.gov/info-details/paid-family-and-medical-leave-pfml-fact-sheet> (accessed May 12, 2021); Washington State at <https://paidleave.wa.gov/> (accessed May 12, 2021); and the District of Columbia at <https://does.dc.gov/page/dc-paid-family-leave> (accessed May 12 2021).

Demonstration to Maintain Independence and Employment (DMIE)

Authorized under the Ticket to Work and Work Incentives Improvement Act of 1999 (Ticket Act), the purpose of DMIE was to see whether early intervention of medical assistance and employment supports could delay or prevent reliance on SSDI or SSI and loss of employment. The Centers for Medicare and Medicaid Services provided funding to Medicaid agencies in Texas, Minnesota, Kansas, and Hawaii to develop, implement, and evaluate interventions under DMIE.

Whalen et al. (2012) report on an experimental evaluation of interventions developed under DMIE in those four states that served individuals between 2006 and 2009. Eligibility requirements for individuals to participate in the demonstrations were ages 18–62, working at least 40 hours per month, and not receiving SSI or SSDI. The states varied widely with respect to the medical conditions targeted and to the medical benefits provided to the treatment group participants. Texas targeted individuals with behavioral issues and provided enhanced and expedited mental health services. Minnesota also targeted individuals with behavioral health issues and provided medical transportation and a health club membership. Kansas enrolled individuals with a wide range of physical and mental conditions from a high-risk insurance pool. Enrollees from Kansas were provided with physical therapy and home health visits. Hawaii enrolled workers with diabetes and provided medical therapy management, diabetes education, and nutrition counseling. Three of the four states provided career counseling to treatment participants (Kansas was the exception).

The evaluations analyzed three sets of outcomes: health and functional outcomes, employment and earnings, and application and receipt of SSDI or SSI. Two limitations of the evaluation should be kept in mind in interpreting the findings. First, the follow-up period was only 24 months, which is arguably a short time frame to observe substantial changes. Second, the analytical sample sizes were quite modest, so outcome differences between treatment and control groups had to be fairly sizeable to be statistically significant. The outcomes that were measured with SSA administrative data—earnings and SSDI/SSI application and receipt—have the largest analytical samples whereas the sample sizes for the other outcomes were reduced substantially because of missing data. Within the SSA administrative data, Texas had the largest analysis sample—approximately 900 in the treatment group and about 700 in the control group. Minnesota had approximately 900 in the treatment group and about 270 in the control group.

Among health and functional outcomes, the DMIE interventions improved physical health and reduced functional activity limitations only in Hawaii (with undetectable impacts in the other states). In Minnesota, mental health improved. No states saw changes in any of the employment outcomes, which is not too surprising given that the treatments were primarily of a medical nature and an eligibility criterion was being employed at least 40 hours a month. The latter implies that the individuals receiving the DMIE treatments had jobs, so any employment impact would have been

through number of hours worked or through job changes, which seem unlikely given the focus of the DMIE interventions.¹⁶

The DMIE interventions lowered disability benefit applications and receipt in Texas, but did not have an impact in the other three states.¹⁷ About 12 percent of the treatment group participants in Texas applied for SSDI or SSI within two years after DMIE enrollment, compared to 14.5 percent for controls. This 2.5 percentage point impact represents a relative impact of about 17 percent, weakly statistically significant at the 80 percent level. When the percentages of individuals who received benefits within one year were analyzed, the reduction in Texas SSI recipients from 3.3 to 1.7 percent was statistically significant (at the 95 percent level). The reduction in SSDI recipients was not statistically significant, however.

TANF-SSI Disability Transition Project (TSDTP)

Launched in October 2008 in collaboration with the Administration for Children and Families (ACF) within the US Department of Health and Human Services, the TSDTP attempted to gauge the extent to which individuals with disabilities who were receiving TANF were also receiving SSI or were planning to apply for SSI. As noted above, TANF serves many families with individuals with disabilities; in some instances, the disabilities exempt TANF recipients from its work requirements. From an early intervention perspective, the project shed light both on whether TANF was a gateway to SSI and on whether an intervention could be offered that enhanced the employability of TANF recipients, thereby decreasing the likelihood of their applying for SSI.

The project comprised two phases: in the first phase, administrative data were analyzed and field visits were conducted in seven sites across five states; in the second phase, programmatic interventions were pilot-tested in three counties. The analyses conducted in the first phase (Farrell and Walter 2013) concluded the following:

- Only a small percentage of SSI applicants had received TANF in the year prior to application.
- TANF staff were, in general, not familiar with the SSA disability determination process.
- TANF recipients who applied for SSI were equally likely to be awarded benefits as were SSI applicants not receiving TANF.

¹⁶ Whalen et al. (2012) note a limitation in their measure of employment: “Using positive hours worked as a measure of employment may overestimate the number of people who are employed. Based on this definition, a person working only one hour a week is considered to be employed” (46).

¹⁷ Whalen et al. (2012) present disability application and receipt outcomes for the joint sample of Texas and Minnesota, but the results are mainly driven by the Texas impacts.

These conclusions suggest that at least at the time of the project, TANF was not a gateway that led to a large number of SSI applications or participants.

In the second phase of the project (Farrell et al. 2013), interventions were assessed in three different counties: Ramsey County, MN; Los Angeles County, CA; and Muskegon County, MI. This discussion focuses on the Ramsey County experience and touches on the experience in Muskegon County. The purpose in the Los Angeles County intervention was to improve the quality and timeliness of SSI applications, and hence should not be regarded as an early intervention demonstration.

Ramsey County piloted an intervention titled Families Achieving Success Today (FAST), comprising co-location of mental health services, health care services, and employment services, emulating the Individual Placement and Support (IPS) model.¹⁸ In addition to the co-location of services, the intervention implemented case management and motivational interviewing. The target population for FAST was families receiving TANF benefits who were determined to not be making meaningful progress on TANF work requirements. Eligible individuals were randomly assigned to a treatment (FAST participation) or control group. To be eligible, the head of the family had to be between ages 22 and 59 and at least one member of the household had a disability.

Farrell et al. (2013) report outcomes that are characterized as exploratory for two reasons. First, the sample size for the FAST pilot was modest; 241 individuals in the treatment group and 148 in the control group. Second, only 63 percent of the treatment group received FAST services. Nevertheless, using TANF administrative data and wage record data, the evaluators found a slight reduction in TANF receipt (statistically significant for the first two quarters after enrollment) and a large statistically significant increase in average quarterly earnings. Unfortunately, there is no reported impact on SSI applications or receipt in the project report.

The Muskegon County program was intended to expedite the medical review used in TANF by relying on the SSI/SSDI Outreach, Access, and Recovery (SOAR) model¹⁹ and to provide motivational interviewing and employment services to

¹⁸ The IPS model is individual (client) driven, with services provided by a team usually within a mental health agency. When a client expresses interest in working, an employment specialist begins to meet with the client and to develop potential jobs. The client specifies whether the health issue should be disclosed. If employment is arranged, appropriate supports are continuously provided. The model has been shown in several randomized control trial studies to have statistically significant impacts on employment rates for individuals with severe mental illness. The IPS website (<https://ipsworks.org/index.php/evidence-for-ips/>, accessed May 12, 2021) enumerates 28 such studies of IPS impact. Among these, two recent studies (Baller et al. 2020; Hoffmann et al. 2014) document positive long-term employment impacts. Bond, Drake, and Pogue (2019) review studies that show that IPS improves employment outcomes for populations other than those with severe mental illness.

¹⁹ SOAR is evaluated by Kauff et al. (2016).

individuals who were determined to be work ready with limitations. During the year-long pilot, only 68 individuals went through the SOAR-inspired medical review, and about one-third of the individuals determined to be work ready with limitations received employment services.

Supported Employment Demonstration (SED)

SED began in August 2016 and is scheduled to operate through August 2022 when final impact and benefit-cost analyses are due. The purpose of the demonstration is to see whether the IPS model can be effective in improving the labor market attachment of individuals with mental health conditions who applied for SSI or SSDI benefits and received initial denials or can reduce the number of their re-applications.²⁰

The design of the demonstration is to randomly assign to one of two treatment groups or a control group 3,000 participants ages 18–49 recruited from the catchment areas of 30 community mental health centers. The demonstration's sites are geographically dispersed and vary by urban/rural characterization. The sites are in 21 states; 20 of the sites are urban and 10 are an urban/rural mix.

The treatment groups are designated as Full-Service and Basic-Service. Individuals assigned to the Full-Service treatment group receive the IPS employment services, services of a nurse care coordinator, systematic medication management, and assistance with cost sharing for medications and for behavioral health and work-related expenses for 36 months. Individuals in the Basic-Service treatment group receive the IPS employment services and cost-sharing assistance for behavioral health and work-related expenses for the same length of time, but do not receive the services of the nurse care coordinator or systematic medication management. Individuals assigned to the control group seek services as they normally would (or would not) in their community. Furthermore, at the time of randomization, each control group member received a comprehensive manual describing mental health and employment services in their local community, as well as state and national resources.

Enrollment for SED began in November 2017 and has been completed (Taylor et al. 2020). There have been no published impact analyses to date, but the final enrollment analysis report contains findings that could be relevant for early interventions. The enrollment procedure was complex, proceeding through the following steps: (1) SSA provided contact information for individuals in the appropriate catchment areas who applied for SSI or SSDI and were denied in the medical screening ($N=73,512$); (2) individuals determined to be ineligible for the demonstration were screened out ($N=26,505$); (3) a random sample of the remaining individuals was chosen to be contacted ($N=21,003$); (4) contact was made with about 65 percent of these individuals ($N=13,375$); (5) about 2,000 individuals were screened

²⁰ It should be noted that some of the individuals in the demonstration were denied SSDI because they had earnings that exceeded the SGA level. Thus, these individuals were attached to the labor market.

out for various reasons, leaving “potential enrollees” ($N=11,307$); and (6) approximately 26 percent of the potential enrollees enrolled in the SED demonstration ($N=2,960$).

Taylor et al. (2020) estimated an enrollment model using logistic regression. Assuming that the evaluation sample represents the target population, the estimates from this model give an indication of the characteristics of individuals who are most likely to take up a SED-like intervention. Among personal characteristics, men, individuals with higher educational achievement, and individuals with more limited work experience or earnings were more likely to enroll. Application denials due to evidence that the applicant could find alternative work in the national economy were strongly predictive of enrollment. Finally, two characteristics of the local labor market were associated with higher likelihoods of enrolling: higher unemployment rates and greater average wage growth.²¹

Retaining Employment and Talent after Injury/Illness Network (RETAIN)

Jointly with the US Department of Labor (DOL), SSA is administering the RETAIN demonstration. Its purpose is to test promising interventions that increase the labor force participation and potentially reduce the future need for disability benefits of individuals with recent serious injuries or illnesses. The project is largely based on a program operating in Washington State—Centers of Occupational Health & Education (COHE). The COHE program primarily addresses WC cases, whereas RETAIN extends the approaches used in Washington State to anyone in the labor force (not just WC cases) who has experienced an occupational or non-occupational injury or illness.

The RETAIN demonstration is being conducted in two phases. In the first phase, in summer 2019, eight states were awarded 18-month grants to launch pilot studies. In the second phase, five of the Phase 1 projects are being funded for full implementation and will be evaluated using an experimental design randomizing on individual participants in four states and a clustered random assignment design in the other state. Some states participating in Phase 1 of RETAIN target non-occupational injuries or illnesses only (KY, OH, WA), whereas others include work- and nonwork-related events (CA, CT, KS, MN, VT).

The RETAIN evaluation contractor is charged with implementing evaluations of the Phase 2 programs. To facilitate the design of the Phase 2 interventions, Anderson et al. (2020) documented the substantial state-level and county-level variation in SSDI and SSI application rates (applications as a percentage of estimated eligible individuals). From a national perspective, an interesting finding in this document is

²¹ The COVID pandemic is having some effects on the demonstration. Services are continuing, although in most instances they are being provided online. Some participants have lost employment due to the pandemic, whereas others have gained employment (William Frey, pers. comm., October 2020).

the existence of a “belt” of states (mostly in the Southeast) that are estimated to have relatively high SSDI application rates. Early interventions might be expected to have the biggest impacts in these states.

As of now, there are no plans to report impacts/outcomes from the Phase 1 projects, which were intended to test the evaluability and program readiness of the smaller-scale projects. However, some evidence from COHE gives an indication of potential outcomes.²² Funded by the Washington State Department of Labor and Industries, COHE provides early intervention and RTW services for individuals with work-related health conditions. There are six centers across the state, most of them housed in large medical systems. Injured workers effectively choose whether to use COHE services by receiving their care from a COHE-affiliated provider.

Health service coordinators (HSCs) are integral to the success of the COHE model.²³ HSCs work directly with injured workers, employers, health care providers, and other program participants to coordinate care and RTW activities for the injured workers. They monitor real-time data on all COHE cases and perform triage to identify cases that are likely to be long term or appear at risk of falling short of RTW goals. For cases needing assistance, they frequently contact injured workers, employers, providers, WC agency staff, and other stakeholders to facilitate the RTW process and to identify barriers to returning to work and resources for resolving them. The RTW activities they coordinate can include functional assessments, referrals to existing training and employment services, and setting appropriate RTW expectations. In the RETAIN demonstration, states’ RTW coordinators fulfill this role with an increased emphasis on employment services. The coordination role is critical, as the program is based on the MacColl Chronic Care Model,²⁴ which asserts that a proactive system focused on keeping a person as healthy as possible will achieve greater success in that regard than will a reactive system.

An evaluation of the COHE pilot, which began in the early 2000s, showed promising results. COHE participants were less likely to be off work and on WC disability benefits one year after the initial WC claim, and combined medical and disability costs were reduced. The magnitude of these reductions was greater for back sprain cases, a common occupational injury, which likely influenced some of the RETAIN Phase 1 states to focus on musculoskeletal injuries. Franklin et al. (2015) report that at the eight-year mark, 2.5 percent of the COHE participants were receiving SSDI benefits, compared to 3.4 percent of the comparison group. This reduction is small in magnitude, but it is statistically significant.

²² The description of COHE and its evaluation that follows above is excerpted from the funding opportunity announcement for the Phase 1 RETAIN grants (DOL/ODEP 2018).

²³ According to a reviewer of this chapter, COHE staff also identify the existence of a centralized data base that is easily accessible by stakeholders as a major driver of that program’s success.

²⁴ For a description of the model, see <https://maccollcenter.org/resources/chronic-care-model> (accessed May 12, 2014).

Promoting Work through Early Interventions Project (PWEIP)

PWEIP is a funding collaboration between SSA and ACF. ACF has initiated two projects targeting low-income individuals with little or no work history, with current or foreseeable disabilities, who have not applied for SSI. The two projects are Building Evidence on Employment Strategies for Low-Income Families (BEES) and Next Generation of Enhanced Employment Strategies (NextGen).

BEES

The BEES project will test various strategies designed to improve the labor market outcomes of individuals with low incomes and barriers to work. The primary employment barriers that the BEES project targets:

- Substance and opioid use disorder;
- Criminal justice involvement; and
- Mental health and disability issues.

According to ACF's Office of Planning, Research, and Evaluation (HHS/ACF/OPRE 2020), BEES has identified eight sites for further study or evaluation: Addiction Recovery Care (KY), Breaking Barriers San Diego (CA), Central City Concern (OR), IPS within Federal Qualified Health Centers (IL, NH), The Journey (OH), Substance Use Disorder Sites (multiple states), Two-Generation Residential Mobility Demonstration (IL), and WorkAdvance (multiple states).

Breaking Barriers San Diego appears to be a continuation of data collection from a DOL Workforce Innovation Fund (WIF) project that was evaluated using random assignment, as documented by Freedman, Elkin, and Millenky (2019). That project embedded the IPS model in a workforce setting as opposed to the mental health setting for which the IPS model was developed. Besides the effort in San Diego, another BEES site started random assignment in 2019 but has curtailed enrollment due to COVID.²⁵

The BEES project will continue to work with states to identify effective interventions targeted on families with low incomes (HHS/ACF/OPRE 2020). When interventions have been identified, ACF and its contractors will implement the most rigorous evaluation approaches, focusing on random assignment where possible.

NextGen

The second project is planning to evaluate interventions at nine sites. The intended interventions will target individuals with current or foreseeable disabilities who have limited work histories and are at risk of applying for SSI. Because it has been recognized that employer involvement is a key element in successful job training,

²⁵ K. Martinson, email with the author, December 2020.

NextGen will attempt to include interventions that involve employers or are market-oriented approaches. To date, five interventions have been selected to participate in NextGen: Bridges from School to Work (eight urban areas); Families Achieving Success Today (Ramsey County, MN); IPS for Individuals with Justice Involvement (pending at selected mental health centers); Work Success (Utah Department of Workforce Services); and Wellness, Comprehensive Assessment, Rehabilitation, and Employment (New York, NY) (HHS/ACF/OPRE 2020). Findings on the effectiveness of these interventions are likely to be released beginning in 2023.

INTERNATIONAL EXPERIENCE

Several European countries have enacted policies aimed at reducing expenditures on disability benefits.²⁶ The following section provides brief descriptions of the policies and, as available, their outcomes. The lessons learned from the experiences could be instructive in considering early intervention policies and practices in the United States.

The Netherlands

The Dutch government responded to rapidly growing rolls and costs of the country's disability insurance system in the 1980s and 1990s by having employers bear some of the costs borne by the system when their workers made disability claims. Starting in 1994, the government required all employers to finance the first six weeks of their employees' sickness benefits.

Two years later, the government lengthened the time to one full year. These reforms continued in 2002 with the introduction of the "Gatekeeper Protocol," which required the employer, worker, and a consulting physician to jointly draft a return-to-work plan within eight weeks of a disability claim and appoint a case manager to coordinate this process. In 2004, mandatory employer-paid sickness benefits were extended from one year to two years, as was the mandatory waiting period for access to public disability benefits. Thus, employers retained full financial responsibility for their employees' sickness benefits for two full years.

After these two changes were implemented, along with the full phase-in of experience-rated disability insurance premiums,²⁷ the inflow of participants into the Dutch disability program fell by 40 percent from 2002 to 2004 and by another 50 percent from 2004 to 2006. Whether the changes caused the drops is unknown. A likely downside to the Dutch reforms is the inadvertent reduced likelihood of hiring

²⁶ Main sources for this section are Burkhauser et al. (2014) and SSA (2018b).

²⁷ "Experience rating" an insurance program means that employers with fewer workers entering the program would pay a lower premium, and those with more workers entering the program would pay a higher premium.

individuals with a disability because of the potential employer responsibility for benefits (Hullegie and Koning 2015).

Sweden

In 2003, the Swedish government merged its sickness benefits and disability systems and began a series of changes to standardize and enforce the administration of this now joint system. Most notable among the changes was the centralization of screening processes. Until then, many doctors and regional disability gatekeepers had focused the support that they provided to injured individuals on providing income support, rather than work retraining. By centralizing the process and developing standardized protocols for granting cash benefits, policymakers were better able to regulate the gatekeepers and enforce a strategy of promoting participation in work before offering cash benefits. In addition to standardizing the screening process, employers were required to meet with disability administrators to create a rehabilitation plan. And administrative gatekeepers were given the power to demand that employers provide certification about the types of accommodations they made for the worker.

In 2008, the Swedish government further reformed the sickness benefits program, which reduced the flow of applicants to the long-term disability system. Frequent checkpoints were established that included work capacity assessments, and cash benefits were reduced for those who did not return to work. Earlier checkpoints provided rehabilitation, counseling, and assessment much closer to the onset of an impairment, when return to work was more likely.

The reforms increased the return to work of new sickness program entrants and reduced their time on the program. In contrast, few of those already on the sickness program when the new reforms were initiated ever returned to work. When their sickness benefits ended, they simply moved onto other social assistance programs. These findings provide empirical evidence that early intervention matters.

Great Britain

A period of rapid growth in disability receipt rates came to an abrupt end in 1995 with a set of major reforms that ended the Invalidity Benefit (IVB) program and replaced it with the Incapacity Benefit (IB) program for all new beneficiaries. IB was less generous than IVB, and medical screening was now carried out by government doctors working for the relevant agency rather than by family doctors. The bar was also set higher, moving to an assessment of the claimant's capacity to carry out *any* work rather than work in their usual occupation.

Great Britain piloted a work-first reform called Pathways to Work in 2003 and rolled it out nationally in 2005. It made movement onto the disability benefits program conditional on attendance at work-focused interviews, introduced a "back to work"

bonus payment, and provided additional in-work supports for those returning to employment.

In 2008, the Employment and Support Allowance (ESA) program replaced IB. A new tougher Work Capability Assessment (WCA) with few exemptions was a feature of the ESA, which is an insurance-based benefit for those with sufficient work history. The WCA was also required of individuals without sufficient work history who received the pre-existing means-tested social assistance benefit. The WCA triages ESA applicants into groups identified as Fit for Work, Work-Related Activity Group, and Support Group. Members of the first group do not receive disability benefits. Members of the last group are individuals with severely limiting disabilities, and they receive a full disability benefit. Members of the Work-Related Activity Group are assessed as having limited capability for work; they receive a time-limited benefit that is approximately three-fourths of the benefit received by the Support Group members. Even though the ESA and tougher WCA were substantial reforms, they have not achieved the government's benefit receipt reduction goals nor had success in helping people with disabilities stay in or enter the labor force (Inanc and Mann 2019).

EARLY INTERVENTION STRATEGIES SUGGESTED IN THE LITERATURE

To add to the modest amount of evidence available from demonstration initiatives and from the policies pursued in other countries, this section of the chapter presents and critiques a number of early intervention strategies that have been suggested in papers but have not been implemented in a demonstration or policy.

Reforms Suggested Post–Great Recession (2010–2013)

Autor and Duggan (2010) proposed requiring employers to provide disability insurance, in the same way that employers are mandated to fund the UI and WC programs. In particular, they argue for universal, experience-rated PDI coverage with minimum standardized benefits. The benefits would include VR services, workplace accommodations, and partial wage replacement. Autor and Duggan provide a detailed analysis of such a proposal that includes the suggestion that the cost to employers would not be prohibitive. However, mandating PDI is well beyond the purview of SSA. Accomplishing this reform would require federal legislation or legislation in all states, neither of which is likely to happen. Also, the findings of Stepler (2019) offer a concern. They indicate the take-up of short-term disability insurance leads to increased usage of long-term disability insurance.

Burkhauser and Daly (2011) propose a system of experience-rating the SSDI portion of the FICA payroll tax for employers, as well as devolving SSI back to the states. They argue these differential rates would encourage employers to do more to retain workers at risk of becoming disabled, including work accommodations, rehabilitation services, and return-to-work efforts. Like the Autor and Duggan (2010)

proposal, their suggested reforms are structural and would require substantial legislative action.

Liebman and Smalligan (2013) propose three less ambitious initiatives that they suggest could be implemented by SSA as demonstration programs. The first is to offer a package of benefits to SSDI applicants who have been determined through a screening process to be work ready if provided supports, in exchange for their suspending their application. The benefits would include targeted vocational and health interventions, an Earned Income Tax Credit–like wage subsidy, and potentially, a few months of an emergency cash diversion grant. The cost-effectiveness of this idea would depend on the effectiveness of the screening in targeting supports to applicants who would otherwise receive SSDI. The proposal is silent, however, on how this screening would be accomplished. Furthermore, the offer of a cash diversion grant might induce individuals to apply who otherwise would not do so.

The second initiative would be to allow states to reorganize the federal share of existing social program funding streams (VR, TANF, community mental health, Medicaid) to target populations that are likely to end up receiving a lifetime of SSI or SSDI benefits in the absence of assistance. Further, states could receive incentive funding if they demonstrated success at reducing participation in SSDI and SSI. This proposal attempts to fund a demonstration out of existing program funding, which would presumably be replaced with incentive funding from SSA if the state’s interventions are shown to reduce SSDI or SSI costs. It is not clear why the state-level administrators of the programs from which funding is taken would benefit from this demonstration, and why they would risk losing funding if the demonstration is not successful.

The third would be to provide a tax credit against employers’ disability insurance payroll tax for firms that can reduce the disability incidence of their employees by at least 20 percent. The authors themselves raise the possibility that financial incentives to employers might result in discriminatory hiring against workers with disabilities. They suggest that it would be worthwhile to conduct a demonstration in order to learn about such a practice.

McCrery-Pomeroy SSDI Solutions Initiative (2016)

An activity of the Committee for a Responsible Federal Budget, the McCrery-Pomeroy SSDI Solutions Initiative commissioned several studies that offered reform ideas for various aspects of the SSDI program. Among these were four studies that offered early intervention strategies, described briefly here.

Stapleton, Ben-Shalom, and Mann (2016) propose a new institution that they have named the Employment/Eligibility Service (EES) that would integrate workforce supports with SSDI eligibility determination. They envision the EES as the organization that an individual who experiences an employment-threatening injury or illness would contact. For individuals who have reached insured eligibility, an adjudicator would assess the likelihood that the individual could return to work with

available supports. If not likely, the individual would be awarded SSDI (contingent on SSA review). If likely, then supports would be offered that might include development of a work plan, health care services, rehabilitation, accommodations, assistive technologies, transportation assistance, personal assistance, trial or gradual return to work, employer incentives, and cash assistance.

Christian, Wickizer, and Burton (2016) also propose a new institution that they name the Health & Work Service (HWS) that would respond quickly when individuals are having difficulty coping with a work-threatening impairment. Like COHE and RETAIN, the HWS would employ a coordinator who will:

facilitate communications and problem solving among the key parties; identify issues that require attention; refer outside for special expertise or outside resources; coordinate care and services as needed; and provide positive support for the affected individuals, guiding them toward functional restoration so they can stay at or return to work. (94)

The HWS would intervene with evidence-based services within 12 weeks of the medical episode.

Kerksick, Riemer, and Williams (2016) propose piloting a transitional jobs initiative for potential SSDI applicants as well as for beneficiaries. The initiative would be administered by an intermediary that would become the “employer of record” for individuals who are placed in a transitional job. Such jobs would be subsidized (up to \$10 per hour), wage-paying, full- or part-time jobs, typically in the private sector. The jobs would be available to individuals who have been out of work four weeks or longer and would last up to six months or 1,040 hours. While holding the transitional job, individuals would interact with a job counselor, who would help place the individuals at unsubsidized jobs. In addition to the transitional jobs initiative, these authors propose an expanded Earned Income Tax Credit and regular access to a work incentives counselor.

Manchester (2019) suggests that states should carefully analyze the medical records of SSDI beneficiaries and SSI recipients to see where early intervention initiatives might be targeted. She shows that states vary considerably in their share of those with mental disorders or substance use disorders. Accordingly, early interventions aimed at these disorders are likely to be most efficacious in states with high incidences.

Ekman (2016) formally critiques the first three papers. She suggests that the new institutions being suggested by Stapleton, Christian, and their colleagues will not be affordable and will be radical changes that will not be accepted by disability advocates or existing program staff. She furthermore argues that the cost savings assumptions in the Stapleton et al. paper are not achievable. Her critique of the Christian proposal is that it is mainly guided by WC program experiences and that it doesn’t adequately address medical conditions that develop over time. Her suggestion for the Kerksick

transitional jobs initiative is that it be bolstered by a refundable credit for impairment-related work expenses.

Over and above the critiques offered by Ekman, a number of elements suggested by these papers seem to raise questions as to their viability as early interventions. The EES proposed by Stapleton, Ben-Shalom, and Mann seems to be addressed to SSDI, and it is not clear how SSI applicants would be handled. Furthermore, the underlying assumption behind the proposal is that a new institution that integrates workforce supports with SSDI eligibility determination would be more effective at getting SAW/RTW services delivered than the current “system” is. This seems like a strong assumption that is essentially untested and relies on integrating two functions that to date have not been housed together.

The RETAIN demonstration is essentially testing the idea of a coordinator of services advocated by Christian and colleagues, although RETAIN is not going as far as forming an entirely new institution. As Ekman alludes to, a question that needs to be addressed for the proposed new institution as well as for RETAIN is how individuals who experience a medical event that is not work related or that develops over time would be brought into the system. The transition jobs notion in the Kerksick et al. paper is perhaps novel for assisting individuals with disabilities, but it is silent on the source of the overall funding for this proposal and how the proposal would be administered. It relies on identifying intermediary organizations that would develop the jobs and would be the employers of record. The intermediary organizations would need to monitor and enforce provisions that prohibit employers from displacing existing staff or replacing workers in labor disputes. Furthermore, given that the transitional jobs will last no more than six months, it is not clear whether a large number of such jobs could be developed in the private sector, especially if workplace accommodations are necessary.

Finally, the Manchester paper identifies a useful source of information to guide policymakers in terms of geographic locations for early interventions, but it does not provide suggestions for what early interventions might be implemented.

WHAT HAVE WE LEARNED?

Ekman (2016) makes the following statement: “There is neither completed research nor an evidence base upon which to enact nationwide early intervention or work support programs” (134). This chapter’s review suggests that this statement still holds, although the rigorous demonstrations in progress and some evidence from completed demonstrations and from the international arena have yielded lessons. Furthermore, a number of analysts have proffered thoughtful ideas about early interventions that merit further consideration and testing.

To date, only two experimental evaluations have reported the impact of early intervention strategies on SSDI or SSI applications or benefits. The DMIE evaluation showed a statistically significant reduction in applications and benefits in one of its sites (TX), and the Breaking Barriers San Diego site, funded by a WIF grant, had no

detected impact. Though it was not experimental, the COHE evaluation reported a reduction in SSDI beneficiaries over an eight-year period. As noted above, the reduction was small in magnitude and the program covered only WC beneficiaries. Despite this paucity of evidence, there are some findings from the descriptive or evaluation analyses conducted within the demonstrations to date or from the international experiences that point to promising principles. These findings are enumerated in the following section.

Elements of Early Interventions

*Coordinator/Case Manager*²⁸

Evidence suggests that a key element for an early intervention initiative is the assignment of the coordination of activities to an individual. The two-phased RETAIN demonstration is following up on successful SAW/RTW initiatives conducted in Washington State. In particular, COHEs have operated and have been evaluated there. Analyses show that the COHE model statistically significantly reduced SSDI beneficiaries among individuals injured on the job. Integral to the COHE model is a health services coordinator who coordinates care for the injured individual. The coordinator acts as a case manager and interacts with the individuals with injuries or disabilities, employers, health care providers, and other parties as appropriate. RETAIN has required sites to engage an RTW coordinator to fulfill this role. The Dutch Gatekeeper Protocol, in which a case manager is required, also suggests that having a coordinator matters. Although its results will not be known for several years, the RETAIN demonstration will provide SSA and DOL with evidence of the effectiveness of the projects designed by the participating states. These projects are loosely based on the COHE model principles. A consistent element across RETAIN's state projects is the active involvement of a return-to-work coordinator to facilitate continued employment.

Timely Intervention

Much of the SAW/RTW literature emphasizes intervening after a work-threatening medical event as quickly as possible because the likelihood of returning to work decreases meaningfully with time. The RETAIN demonstration requires early communication to all stakeholders to return the worker to the workplace as soon as possible. The Dutch Gatekeeper Protocol requires the employer, worker, and a consulting physician to jointly draft a return-to-work plan within eight weeks of a disability claim. In Sweden, when reforms set up early checkpoints in its sickness benefits program, new beneficiaries had much higher return-to-work rates than the

²⁸ Chapter 8 in this volume provides additional discussion about the role of coordinators/case managers.

beneficiaries who were already in the program when the reforms were introduced, a finding that reinforces the importance of early intervention.

Individual Placement and Support (IPS)

The IPS model, which was developed for individuals with mental health conditions and which has been found to be quite successful at improving labor market outcomes, has been implemented in two demonstrations discussed in this chapter. One of the demonstrations (SED) is evaluating the efficacy of IPS in a number of sites, but that demonstration is in process and there have not been any outcomes observed yet. In the TSDTP, Ramsey County (MN) implemented FAST, a version of IPS, and the published results from that demonstration indicate employment and earnings impacts, but no evidence on disability benefit receipt (Farrell et al. 2013). At least one of the sites identified for further study in PWEIP's BEES demonstration and two of the sites identified in its NextGen project are focused on IPS as the intervention.

It should be noted that the IPS model was shown to improve employment outcomes in the MHTS (Frey et al. 2011), but the treatment did not reduce SSDI benefits. The IPS intervention in the WIF-funded Breaking Barriers San Diego site found no statistically significant differences in any of the main outcomes—not in employment or earnings, nor in the share of participants receiving SSI or SSDI (Freedman et al. 2019).

Employer Responsibility

Several European countries that were experiencing burgeoning disability benefit rolls and costs enacted reforms that seemed to reverse the trends. In the Netherlands and in Sweden, reforms placed more responsibility for financing sickness or disability benefits on the shoulders of employers, giving them a greater incentive to assist workers in staying at or returning to work. The Dutch require employers to maintain the payment of virtually 100 percent of an injured/disabled worker's earnings for up to two years, and these payments are experience rated. Sweden passed similar reforms. It is notable that the NextGen project is attempting to find early interventions that involve employers.

Moving to a system in which employers bear more responsibility, such as has been done in the Dutch and Swedish cases and as is being suggested with experience rating SSDI in the United States, has issues to confront. As noted, the Dutch experience resulted in reduced hiring of individuals with disabilities. Furthermore, whereas experience rating WC addresses work-related disabilities or illnesses, it is not clear that employers should shoulder the costs of disabilities resulting from nonwork-related events.

Using Data to Identify Likely Effectiveness of Early Interventions

Analyses of data from demonstrations or administrative sources may help to identify effective early interventions. Taylor et al. (2020) provide descriptive analyses of the characteristics of individuals who chose to enroll in the SED after being given an overview of the intervention. Assuming that this decision is analogous to the decision to participate in an early intervention for individuals with mental health conditions, it suggests that the following personal characteristics increase the likelihood of participation: men, individuals with higher educational achievement, and individuals with more limited work experience or earnings. Application denials due to evidence that the applicant could find alternative work in the national economy were strongly predictive of enrollment. Two characteristics of the local labor market were associated with higher likelihoods of enrolling: higher unemployment rates and greater average wage growth.

If SSA were to implement an early intervention, it would want that initiative to be as target efficient as possible. That is, the agency would not want to spend resources on individuals who were unlikely to apply for benefits in any case. For example, evidence suggests that targeting early intervention strategies *by state* could make sense. Anderson et al. (2020) document the existence of a “belt” of states (mostly in the Southeast) that is estimated to have relatively high SSDI application rates. This finding suggests that to the extent that regional variation arises in an early intervention strategy, then these states might represent where biggest impacts could be expected. Similarly, Manchester (2019) used medical records data to show variation by state in the share of SSDI beneficiaries and SSI recipients with mental disorders or substance use disorders.

Stapleton et al. (2015) document characteristics of the target population for which evidence of early intervention effectiveness has been shown. In a review of studies, they summarize the characteristics of individuals for whom the studies indicated early intervention(s) had positive employment outcomes. These characteristics include individuals with musculoskeletal conditions, especially lower back pain; individuals with mental health conditions; individuals with chronic conditions for which adherence to treatment is critical; and individuals who remain attached to an employer. They also cite a Dutch study in which male workers ages 40–58 had more positive outcomes than did younger men.

Caveats

To date, the evidence base is extremely thin. The ideal situation in implementing an early intervention would be having evidence from rigorous evaluations of multiple, externally valid demonstrations. The RETAIN, SED, and PWEIP demonstrations are arguably important strides in the right direction of filling our knowledge gaps about the effectiveness of potential early interventions. Their impacts on SSDI or SSI

application rates will not be identified for several years, however. So we need to consider the lessons learned to date in the following light:

- The experiences in European countries might not translate to the United States because of different employment relationships, institutions, demography, politics, economy, and other international variations.
- DMIE was conducted in just a few states, with variation in the treatments and at a time when the economy was strong.
- The findings about the IPS model presented in this chapter have limitations. The WIF-funded Breaking Barriers San Diego program, which found insignificant impacts for labor market and disability program benefits, was conducted at a time (2016–2019) and in a single metropolitan area with a strong economy. Furthermore, the IPS treatments that were tested in that program and in Ramsey County (MN) in TSDTP were situated in a workplace setting rather than a mental health setting, where studies have found more robust findings.

FUTURE DIRECTIONS: A PROPOSED DEMONSTRATION

In considering what has been learned to date, there seems to be an area in which SSA might consider conducting an early intervention demonstration. The idea is to conduct a demonstration that targets individuals age 50 or older who are denied benefits. In other words, this would be a SED-like demonstration for older applicants. Such applicants are going to have two barriers to overcome if they choose to search for re-employment: age and disability. Furthermore, it could be the case that these individuals have not actively searched for employment for many years.

The treatment in such a demonstration would be specific workforce development strategies for older workers. These would include job search assistance as well as job development. To implement such a demonstration, SSA could announce a funding opportunity for workforce agencies that serve older adults for specific projects that would serve individuals with disabilities. Interventions and supports might include case management, career counseling, job search assistance, training, or job development that might even include transition jobs as proposed by Kerksick, Riemer, and Williams (2016). The types of agencies that might be interested in developing disability-targeted approaches for seniors include agencies administering the DOL-funded Senior Community Service Employment Program, the AARP Foundation's Back to Work 50+ program, or VR agencies.

Agencies chosen by SSA would receive contact information for individuals older than age 49 whose applications for SSI or SSDI have been denied. Those individuals would be contacted and given the choice to participate in the demonstration. The individuals who volunteered to participate would receive information about programs in the area serving seniors and would be randomly assigned to treatment or control groups.

Developing employment opportunities for older individuals with disabilities is challenging. However, a study of the Senior Community Service Employment Program, which served individuals older than age 55, found an employment rate of 52 percent for the total population served and 37 percent for individuals with disabilities (Kogan et al. 2012). Unfortunately, that study did not include any sort of control or comparison group, so achieving an employment rate of 37 percent for individuals with disabilities age 55+ could have been quite a success. At a minimum, setting up a rigorous evaluation for this demonstration to learn what workforce development strategies can or cannot work for seniors would be extremely valuable. It would also be important to track the disability re-application rates to determine the efficacy of this type of early intervention.

CONCLUSIONS

In the United States, there seem to be two options on the menu of early interventions. The RETAIN approach attempts to standardize and coordinate the SAW/RTW activities at a regional level, whereas the IPS model places responsibility on the individual. These options are not in opposition to nor mutually exclusive of each other. RETAIN serves occupational and non-occupational medical events that involve physical or mental disabilities. The IPS model has been shown to be effective in improving labor market outcomes for individuals with mental disabilities. Two large-scale demonstrations of these approaches are in process—RETAIN and SED—with impact results available in a few years. Under the PWEIP umbrella, the BEES and NextGen projects are getting underway, and they will be testing employment strategies such as IPS aimed at overcoming barriers to quality jobs that some individuals may face, such as mental health issues, substance use disorders, or other barriers.

Some European countries have had success in stemming the inflow of disability benefit applicants by requiring employers to bear the costs of sickness/disability benefits. Presumably, this incents employers to assist employees in staying at work after major medical events. Furthermore, these countries as well as some US reform ideas suggest that employer costs be experience-rated. However, given the labor market institutions and political sway of the employer community in the United States, these sorts of cost shifting seem unlikely here. Furthermore, shifting costs to employers could exacerbate discrimination against workers with disabilities; one European study found this result.

Similarly, the reform ideas involving mandated (short- or long-term) disability insurance schemes seem unlikely to be accepted in the United States. Employer mandates that might arguably increase costs are unlikely to find advocates and are usually political nonstarters, although, of course, political winds are subject to change. On the other hand, it should be noted that there are five states with mandatory temporary disability insurance programs, and it is probably the case that promulgating mandatory UI or WC could have seemed infeasible when they were initiated.

While we wait for impact results from the large-scale early intervention demonstrations that are ongoing, there are some incremental lessons to heed. Early interventions should:

- Take place as soon as possible after a work-threatening injury or illness occurs;
- Be case managed/coordinated;
- Involve health care professionals who have been trained in and accept staying at work or returning to work as a desirable treatment outcome; and
- Target individuals/regions with characteristics that data suggest are likely to succeed.

Waiting will take patience that will be rewarded with solid evidence about the effectiveness of the strategies being demonstrated.

Contributor

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Chapter 5

Comment

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Let me begin by complimenting Kevin Hollenbeck for writing an excellent chapter (“Demonstration Evidence of Early Intervention Policies and Practices”). To synthesize such a wide range of past and ongoing evaluations in such an insightful manner is quite impressive.

Let me also observe how terrific it is to see the Social Security Administration (SSA) conducting so many innovative demonstrations and partnering with other federal agencies on many of them. As Hollenbeck notes, by the time SSA encounters a Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI) applicant, the ideal time to intervene may well have passed. So it is important for SSA to be working with other agencies that might encounter future applicants further upstream and who have deep expertise in the health and employment aspects of interventions. These initiatives show our federal government at its best as a learning and continuously improving organization, one that is capable of breaking down agency silos to provide better services.

That said, I have two concerns about SSA’s early intervention learning agenda.

UNDERPOWERED EXPERIMENTS

Hollenbeck notes that sample sizes for some of the experiments have been “modest.” When experiments are too small, it is hard to learn anything conclusive from them. This is especially true if one does the correct adjustments of confidence intervals for the fact that there are multiple outcomes being measured, with results often presented separately for different sites. Sometimes one needs to make the tough call and not go forward with a 5- or 10-year experiment, no matter how innovative, if at the end of the day budget constraints or sample recruitment challenges mean that the results are almost certainly going to be inconclusive. Of course, the best solution to this problem is to provide SSA with the resources necessary to do experiments with adequate statistical power.

Relatedly, a challenge in developing successful early intervention programs is that the population of people with work-limiting disabilities is quite heterogeneous. Intervention strategies will often need to vary by health impairment and occupation. Given sample size limitations, we are likely to make more progress on SSA’s learning agenda if we develop focused interventions for some of the most common health impairments and job types, rather than developing broad strategies and then trying to estimate subgroup impacts. For this reason, Hollenbeck’s suggestion that SSA develop an initiative targeted specifically for workers in their 50s is sensible. In addition to representing a large portion of disability insurance applicants, such workers have

enough potential remaining years of employment to produce a stream of benefits that exceeds the upfront intervention costs.

UNCLEAR MOTIVATION

We need to be clearer about what is motivating us to do early intervention. One view is that we are trying to increase economic output, and therefore our nation's standard of living, by putting more people to work. Another view is that we are trying to reduce government spending by diverting people from claiming benefits. A third view is that we are trying to improve the well-being of people who are struggling with both health impairments and labor market challenges by helping them get back on their feet.

If our primary motivation is either of the first two, we are likely destined to fail. The labor market prospects of people on the margin between receiving and not receiving SSDI and SSI benefits are not all that great, even in the best of circumstances; often the number of extra years in the labor force that can be expected even if someone returns to work is not all that high; the interventions are expensive; and if one does the benefit-cost analysis properly and subtracts the workers' disutility of effort from the output gains, it is very unlikely we will design an intervention with social benefits that exceed costs.

The same is true if our motivation is government finances. Early intervention programs typically serve many people per person diverted from benefit receipt, so it is difficult for an intervention to fully pay for itself. Moreover, given that the target population consists largely of workers with low incomes struggling with health impairments and other challenges—people who deserve a high social welfare weight—we would have to believe the “leaky-bucket” of our income transfer system is very “leaky” in order to think we are doing good when we reduce benefit spending.

Thus, I would argue that the main reason we should be designing, implementing, and evaluating early intervention programs is to improve the well-being of those to whom we are providing services. This perspective has at least four important implications.

First, our primary outcome measures in these studies should be measures of well-being—pain levels, depression levels, substance use levels, divorce and domestic violence levels, happiness, and longevity, among others. Employment and benefit receipt may in some cases be useful proxy measures, but they should not be the main or only focus. In addition to being conceptually right, taking this approach to measuring a broader set of outcomes also makes it much more likely that we will find benefits of an intervention that are substantial enough to exceed costs.

Second, I think a lot of us, me included, have a presumption that when we help someone get back to work we are indeed doing something good for them. And conversely, that in telling someone we will give them lifetime benefits in exchange for never working again we may be in many cases consigning people to misery. But we really have not done the research necessary to know whether this is right on average,

much less for which subpopulations this is correct. Someone should fund a major study using the Maestas, Mullen, and Strand (2013) disability examiner instrumental variable to compare well-being impacts of receiving versus not receiving SSI and SSDI. Because the study would need to collect most of the outcome data directly from participants rather than by using administrative records, it would probably cost \$10 to \$20 million to do this right.

Third, in all of our early intervention studies (and indeed in most social experiments) we should have an extra experimental arm where we simply give people extra cash for a few years equal to the budgeted per capita amount it costs to deliver the intervention. In determining whether our interventions are effective, we should be held to the standard that not only do our interventions work, but that they work better than giving people the same amount of cash.

Fourth, we should test a guaranteed income approach to disability benefits. I am not a fan of giving a guaranteed income to everyone in the United States. The amount of extra taxes it would take to fund such a program is prohibitive. But a guaranteed income for low-earners with health impairments who are struggling in the labor market is much more appealing. We should take one state and provide SSI and SSDI benefits to a targeted set of low-earners meeting the standard qualifications for the programs—but free of any limits on subsequent employment and with ongoing health insurance guaranteed, as well. Doing so would almost certainly increase benefit applications. If it improved well-being and caused applications in the target population to double, I personally would think we had done a good thing. If it caused applications to rise 10-fold or if it led to more people in despair because of lack of purpose, I would think it was a disaster. Only an evaluation can help us determine which is more likely.²⁹

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²⁹ Such an evaluation cannot be done under SSA's current demonstration authority. It would require new authority and funding from Congress.

Chapter 5

Comment

Jennifer Sheehy

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The chapter authored by Hollenbeck (“Demonstration Evidence of Early Intervention Policies and Practices”) is an excellent summary of the state of the science on early intervention. He cites evidence for strategies to improve stay-at-work or return-to-work outcomes with early interventions, but concludes that there is no one-size-fits-all solution. Hollenbeck describes five US-based early intervention demonstration programs that have been administered or supported by the Social Security Administration (SSA), as well as relevant international efforts. Early intervention programs can take many forms, and the programs described differed in terms of services offered, intervention timing, and participant characteristics.

Summarizing lessons learned from past demonstrations, early interventions should:

- take place as soon as possible after a work-threatening injury or illness occurs,
- include case management and coordination,
- involve health care professionals who have been trained in and accept staying at work or returning to work as a desirable treatment outcome, and
- serve individuals/regions with characteristics that data suggest are likely to succeed.

Because the exiting evidence base is thin (Ben-Shalom et al. 2017), we are all looking forward to findings of ongoing early intervention demonstrations, especially Retaining Employment and Talent after Injury/Illness Network (RETAIN), the new demonstration conducted by the Office of Disability Employment Policy in collaboration with the Department of Labor’s Employment and Training Administration and being evaluated and partially funded by SSA.

RETAIN provides early coordination of health care and employment services through an integrated network of partners. Its goals include improving the employment outcomes of newly injured or ill workers and reducing the need for Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI). RETAIN will develop evidence on the effectiveness of early intervention stay-at-work and return-to-work efforts. The programs are modeled after Washington State’s Centers of Occupational Health & Education (COHE), but seek a broader target population that

³⁰ The views expressed in this chapter are those of the author and do not necessarily represent the views of the Department of Labor or the US federal government.

includes those with non-occupational injuries/illnesses and provide a more expansive set of services to injured and ill workers.

Hollenbeck describes RETAIN as primarily operating among health care providers and employers and, though these stakeholders play critical roles in RETAIN, many insurers and social programs listed by Hollenbeck also play key roles. Each RETAIN grantee has a workforce partner, which enables the coordination of health care and employment services; and many state RETAIN programs serve individuals who are receiving insurance benefits through workers' compensation, private disability insurance, and others.

The theory of change for RETAIN is based on evidence that the probability of returning to work after missing 12 weeks of work drops dramatically (IAIABC 2016). RETAIN is targeting individuals with a connection to the workforce, with the goal of providing services within 12 weeks of work disability onset. Further, RETAIN participants may not have applied for or be receiving SSDI or SSI benefits. This means effective services for people out of work for extended periods may differ from services offered as part of RETAIN. Though RETAIN was initially focused on workers with musculoskeletal conditions, most programs have expanded to serve workers with any condition that inhibits their work.

That the probability is low of returning to work after missing 12 weeks of work suggests the early stages after work disability onset shape the trajectory of the worker's outcome. Health care professionals play critical roles in the early stages, though they are typically not trained in occupational health best practices and may not be thinking of work as a positive health outcome (Denne, Kettner, and Ben-Shalom 2015). To address this, RETAIN programs train health care providers in occupational health best practices and incentivize the providers to adopt those best practices.

The systems that serve individuals at risk of dropping out of the labor force and/or applying for SSDI/SSI are fragmented and typically do not coordinate. Workers may receive wage-replacement benefits from insurers, services from health care or rehabilitation providers that treat their health condition; employers may provide job accommodations or stay-at-work/return-to-work services; and workers may seek education and training to perform a new job. These interactions influence a worker's ability to stay in their current job or return to the workforce, but each stakeholder has its own goals and incentives which are not always aligned with the goal of keeping individuals in the workforce (Epstein et al. 2020). RETAIN is seeking to align stakeholder incentives around the goal of helping injured and ill workers recover and return to the workforce.

The target population is diverse and challenging to reach (Nichols et al. 2020), so RETAIN is engaging employers and establishing policies to integrate key networks to help workers stay at or return to the workforce after injury or illness. Other potential approaches include integrating stay-at-work/return-to-work services into paid family and medical leave policies and providing targeted stay-at-work/return-to-work information to workers, employers, and medical professionals. RETAIN also includes

longitudinal survey and administrative data analysis to learn more about this diverse population, but more analysis is needed to understand how best to serve people struggling to get back to the workforce after experiencing an injury or illness. By providing holistic care that focuses on work as a positive health outcome, effective early intervention services may help people with the ability and desire to continue working.

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Volume References

- Abraham, Katharine G., and Melissa S. Kearney. 2020. "Explaining the Decline in the US Employment-to-Population Ratio: A Review of the Evidence." *Journal of Economic Literature* 58 (3): 585–643.
- Administration for Community Living. 2020. "Community Integrated Health Networks." https://acl.gov/sites/default/files/common/BA_roundtable_workgroup_paper_2020-03-01-v3.pdf.
- Aizer, Anna, Nora E. Gordon, and Melissa S. Kearney. 2013. *Exploring the Growth of the Child SSI Caseload in the Context of the Broader Policy and Demographic Landscape*. Cambridge, MA: National Bureau of Economic Research.
- Almond, Douglas, and Janet Currie. 2011. "Killing Me Softly: The Fetal Origins Hypothesis." *Journal of Economic Perspectives* 25 (3): 153–172.
- Anderson, Mary A., Gina Livermore, AnnaMaria McCutcheon, Todd Honeycutt, Karen Katz, Joseph Mastrianni, and Jacqueline Kauff. 2018. *Promoting Readiness of Minors in Supplemental Security Income (PROMISE): ASPIRE Process Analysis Report*. Washington, DC: Mathematica Policy Research.
- Anderson, Catherine, Ellie Hartman, and D. J. Ralston. 2021. "The Family Empowerment Model: Improving Employment for Youth Receiving Supplemental Security Income." Washington, DC: US Department of Labor, Office of Disability Employment Policy.
- Anderson, Catherine A., Amanda Schlegelmilch, and Ellie Hartman. 2019. "Wisconsin PROMISE Cost-Benefit Analysis and Sustainability Framework." *Journal of Vocational Rehabilitation* 51 (2): 253–261.
- Anderson, Michael, Yonatan Ben-Shalom, David Stapleton, and David Wittenburg. 2020. *The RETAIN Demonstration: Practical Implications of State Variation in SSDI Entry*. Report for Social Security Administration. Washington, DC: Mathematica Policy Research.
- Angrist, Joshua D., Guido W. Imbens, and Donald B. Rubin. 1996. "Identification of Causal Effects Using Instrumental Variables." *Journal of the American Statistical Association* 91 (434): 444–455.
- Arnold Ventures. 2020, December 15. "National RCT of 'Year Up' Program Finds Major, Five-Year Earnings Gains for Low-Income, Minority Young Adults." Straight Talk on Evidence. <https://www.straighttalkonevidence.org/2020/12/15/national-rct-of-year-up-program-finds-major-five-year-earnings-gains-for-low-income-minority-young-adults/>.
- Ashenfelter, O., and M. W. Plant. 1990. "Nonparametric Estimates of the Labor-Supply Effects of Negative Income Tax Programs." *Journal of Labor Economics* 8 (1): S396-S415.

- Athey, Susan, and Guido Imbens. 2016. "Recursive Partitioning for Heterogeneous Causal Effects." *Proceedings of the National Academy of Sciences* 113 (27): 7353–7360.
- Autor, David H., and Mark G. Duggan. 2000. "The Rise in Disability Rolls and the Decline in Unemployment." *Quarterly Journal of Economics* 118 (1): 157–205.
- Autor, David H., and Mark G. Duggan. 2006. "The Growth in the Social Security Disability Rolls: A Fiscal Crisis Unfolding." *Journal of Economic Perspectives* 20 (3): 71–96.
- Autor, David, H., and Mark G. Duggan. 2007. "Distinguishing Income from Substitution Effects in Disability Insurance." *American Economic Review* 97 (2): 119–124.
- Autor, David H., and Mark Duggan. 2010. *Supporting Work: A Proposal for Modernizing the US Disability Insurance System*. Washington, DC: Center for American Progress and the Hamilton Project.
- Autor, David H., Mark G. Duggan, Kyle Greenberg, and David S Lyle. 2016. "The Impact of Disability Benefits on Labor Supply: Evidence from the VA's Disability Compensation Program." *American Economic Journal: Applied Economics* 8 (3): 31–68.
- Autor, David H., Nicole Maestas, Kathleen J. Mullen, and Alexander Strand. 2015. *Does Delay Cause Decay? The Effect of Administrative Decision Time on the Labor Force Participation and Earnings of Disability Applicants*. Cambridge, MA: National Bureau of Economic Research.
- Autor, David, Nicole Maestas, and Richard Woodberry. 2020. "Disability Policy, Program Enrollment, Work, and Well-Being among People with Disabilities." *Social Security Bulletin* 80 (1): 57.
- Bailey, Michelle Stegman, Debra Goetz Engler, and Jeffrey Hemmeter. 2016. "Homeless with Schizophrenia Presumptive Disability Pilot Evaluation." *Social Security Bulletin* 76 (1): 1–25.
- Bailey, Michelle Stegman, and Jeffrey Hemmeter. 2015. "Characteristics of Noninstitutionalized DI and SSI Program Participants, 2013 Update." *Social Security Administration Research and Statistics Notes*. No. 2015-02. Social Security Administration. <https://www.ssa.gov/policy/docs/rsnotes/rsn2015-02.html>.
- Bailey, Michelle Stegman, and Robert R. Weathers II. 2014. "The Accelerated Benefits Demonstration: Impacts on Employment of Disability Insurance Beneficiaries." *American Economic Review: Papers & Proceedings* 104 (5): 336–341.
- Baller, Julia B., Crystal R. Blyler, Svetlana Bronnikov, Haiyi Xie, Gary R. Bond, Kai Filion, and Thomas Hale. 2020. "Long-Term Follow-up of a Randomized Trial of Supported Employment for SSDI Beneficiaries with Mental Illness." *Psychiatric Services* 71 (3): 243–249.

- Banerjee, Abhijit, Rukmini Banerji, James Berry, Esther Duflo, Harini Kannan, Shobhini Mukerji, Marc Shotland, and Michael Walton. 2017. "From Proof of Concept to Scalable Policies." *Journal of Economic Perspectives* 31 (4): 73–102.
- Banerjee, Abhijit V., and Esther Duflo. 2009. "The Experimental Approach to Development Economics." *The Annual Review of Economics* 1 (1):151–178.
- Barden, Bret. 2013. *Assessing and Serving TANF Recipients with Disabilities*. OPRE Report 2013–56. Washington, DC: US Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research, and Evaluation.
- Barnow, Burt S. 1976. "The Use of Proxy Variables When One or Two Independent Variables Are Measured with Error." *American Statistician* 30 (3): 119–121.
- Barnow, Burt S., and David Greenberg. 2015. "Do Estimated Impacts on Earnings Depend on the Source of the Data Used to Measure Them? Evidence from Previous Social Experiments." *Evaluation Review* 39 (2): 179–228.
- Barnow, Burt S., and David Greenberg. 2019. "Special Issue Editors' Essay." *Evaluation Review* 43 (5): 231–265.
- Barnow, Burt S., and David H. Greenberg. 2020. "Conducting Evaluations Using Multiple Trials." *American Evaluation Journal* 41 (4): 529–546.
- Bell, Stephen H., and Laura R. Peck. 2016a. "On the Feasibility of Extending Social Experiments to Wider Applications." *Journal of MultiDisciplinary Evaluation* 12 (27): 93–112.
- Bell, Stephen H., and Laura R. Peck. 2016b. "On the 'How' of Social Experiments: Experimental Designs for Getting Inside the Black Box." In *Social Experiments in Practice: The What, Why, When, Where, and How of Experimental Design & Analysis*, edited by Laura R. Peck, 97–109. Hoboken, NJ: Jossey-Bass.
- Ben-Shalom, Yonatan, Steve Bruns, Kara Contreary, and David Stapleton. 2017. *Stay-at-Work/Return-to-Work: Key Facts, Critical Information Gaps, and Current Practices and Proposals*. Washington, DC: Mathematica Policy Research.
- Ben-Shalom, Yonatan, Jennifer Christian, and David Stapleton. 2018. "Reducing Job Loss among Workers with New Health Problems." In *Investing in America's Workforce: Improving Outcomes for Workers and Employers*, edited by Carl E. Van Horn, 267–288. Kalamazoo, MI: W. E. Upjohn Institute for Employment Research.
- Benítiz-Silva, Hugo, Moshe Buchinsky, and John Rust. 2010. "Induced Entry Effects of a \$1 for \$2 Offset in SSDI Benefits." Mimeo. https://editorialexpress.com/jrust/crest_lectures/induced_entry.pdf.
- Berkowitz, E. D. 2013. *The Other Welfare: Supplemental Security Income and US Social Policy*. Ithaca, IL: Cornell University Press.
- Berkowitz, Edward D. 2020. *Making Social Welfare Policy in America: Three Case Studies since 1950*. Chicago: University of Chicago Press.

- Berkowitz, Edward D., and Larry DeWitt. 2013. *The Other Welfare: Supplemental Security Income and US Social Policy*. Ithaca, NY: Cornell University Press.
- Bernanke, Ben. 2012. “The Federal Reserve and the Financial Crisis: Origins and Mission of the Federal Reserve, Lecture 1.” Lecture presented at The George Washington University School of Business, Washington, DC, March 20. <https://www.federalreserve.gov/mediacenter/files/chairman-bernanke-lecture1-20120320.pdf>.
- Bezanson, Birdie J. 2004. “The Application of Solution-Focused Work in Employment Counseling.” *Journal of Employment Counseling* 41 (4): 183–191.
- Biden, J. 2021. *Executive Order on Advancing Racial Equity and Support for Underserved Communities through the Federal Government*. EO 13985. Washington, DC: The White House.
- Bitler, Marianne, P., Jonah B. Gelbach, and Hilary W. Hoynes. 2006. “What Mean Impacts Miss: Distributional Effects of Welfare Reform Experiments.” *American Economic Review* 96 (4): 988–1012.
- Black, Dan, Kermit Daniel, and Seth Sanders. 2002. “The Impact of Economic Conditions on Participation in Disability Programs: Evidence from the Coal Boom and Bust.” *American Economic Review* 92 (1): 27–50.
- Bloom, Howard S. 1984. “Accounting for No-Shows in Experimental Evaluation Designs.” *Evaluation Review* 8 (2): 225–246.
- Bloom, Howard S. 1995. “Minimum Detectable Effects: A Simple Way to Report the Power of Experimental Designs.” *Evaluation Review* 19 (5): 547–566.
- Bloom, Howard S. 2009. *Modern Regression Discontinuity Analysis*. New York: MDRC.
- Bloom, Howard S., Carolyn J. Hill, and James A. Riccio. 2003. “Linking Program Implementation and Effectiveness: Lessons from a Pooled Sample of Welfare-to-Work Experiments.” *Journal of Policy Analysis and Management* 22 (4): 551–575.
- Bloom, Howard S., Larry L. Orr, Stephen H. Bell, George Cave, Fred Doolittle, Winston Lin, and Johannes M. Bos. 1997. “The Benefits and Costs of JTPA Title II-A Programs: Key Findings from the National Job Training Partnership Act Study.” *Journal of Human Resources* 32 (3): 549–576.
- BLS (Bureau of Labor Statistics), US Department of Labor. 2019. “Characteristics of Unemployment Insurance Applicants and Benefit Recipients – 2018.” News Release USDL-19-1692. <https://www.bls.gov/news.release/pdf/uisup.pdf>.
- BLS (Bureau of Labor Statistics), US Department of Labor. 2020a. “Employee Access to Disability Insurance Plans.” *The Economics Daily*. <https://www.bls.gov/opub/td/2018/employee-access-to-disability-insurance-plans.htm>.

- BLS (Bureau of Labor Statistics), US Department of Labor. 2020b. "Employer Reported Workplace Injuries and Illnesses – 2019." News Release USDL-20-2030. https://www.bls.gov/news.release/archives/osh_11042020.pdf.
- Blustein, Jan. 2005. "Toward a More Public Discussion of the Ethics of Federal Social Program Evaluation." *Journal of Policy Analysis and Management* 24 (4): 824–846.
- Board of Trustees, Federal Old-Age and Survivors Insurance and Federal Disability Insurance Trust Funds. 2014. *The 2014 Annual Report of the Board of Trustees of the Federal Old-Age and Survivors Insurance and Federal Disability Insurance Trust Funds*. <https://www.ssa.gov/OACT/TR/2014/>.
- Board of Trustees, Federal Old-Age and Survivors Insurance and Federal Disability Insurance Trust Funds. 2019. *The 2019 Annual Report of the Board of Trustees of the Federal Old-Age and Survivors Insurance and Federal Disability Insurance Trust Funds*. Washington, DC: Author. <https://www.ssa.gov/oact/tr/2019/tr2019.pdf>.
- Board of Trustees, Federal Old-Age and Survivors Insurance and Federal Disability Insurance Trust Funds. 2021. *The 2021 Annual Report of the Board of Trustees of the Federal Old-Age and Survivors Insurance and Federal Disability Insurance Trust Funds*. Social Security Administration. <https://www.ssa.gov/OACT/TR/2021/tr2021.pdf>.
- Boat, Thomas F., Stephen L. Buka, and James M. Perrin. 2015. "Children with Mental Disorders Who Receive Disability Benefits: A Report from the IOM." *Journal of the American Medical Association* 314 (19): 2019–2020.
- Bond, Gary R. 1998. "Principles of the Individual Placement and Support Model: Empirical Support." *Psychiatric Rehabilitation Journal* 22 (1): 11–23.
- Bond, G. R., D. R. Becker, and R. E. Drake. 2011. "Measurement of Fidelity of Implementation of Evidence-Based Practices: Case Example of the IPS Fidelity Scale." *Clinical Psychology: Science and Practice* 18: 126–141.
- Bond, Gary R., Robert E. Drake, and Deborah R. Becker. 2008. "An Updated on Randomized Control Trials of Evidence-Based Supported Employment." *Psychiatric Rehabilitation Journal* 31 (4): 280–290.
- Bond, Gary R., Robert E. Drake, and Deborah R. Becker. 2012. "Generalizability of the Individual Placement and Support (IPS) Model of Supported Employment Outside the US." *World Psychiatry* 11 (1): 32–39.
- Bond, Gary R., Robert E. Drake, Kim T. Mueser, and Eric Latimer. 2001. "Assertive Community Treatment for People with Severe Mental Illness." *Disease Management and Health Outcomes* 9 (3): 141–159.
- Bond, Gary R., Robert E. Drake, and Jacqueline A. Pogue. 2019. "Expanding Individual Placement and Support to Populations with Conditions and Disorders Other Than Serious Mental Illness." *Psychiatric Services* 70 (6): 488–498.

- Bound, John. 1989. "The Health and Earnings of Rejected Disability Insurance Applicants." *American Economic Review* 79 (3): 482–503.
- Bound, John. 1991. "The Health and Earnings of Disability Insurance Applicants: Reply." *American Economic Review* 81 (5): 1427–1434.
- Bound, John, and Richard V. Burkhauser. 1999. "Economic Analysis of Transfer Programs Targeted on People with Disabilities." In *Handbook of Labor Economics*, vol. 3, edited by Orley Ashenfelter and David Card, 3417–3528. Amsterdam, The Netherlands: Elsevier.
- Bound, John, Richard V. Burkhauser, and Austin Nichols. 2003. "Tracking the Household Income of SSDI and SSI Applicants." *Research in Labor Economics* 22: 113–158.
- Bound, John, Julie Berry Cullen, Austin Nichols, and Lucie Schmidt. 2004. "The Welfare Implications of Increasing Disability Insurance Benefit Generosity." *Journal of Public Economics* 88 (12): 2487–2514.
- Bound, John, Stephan Lindner, and Tim Waidmann. 2014. "Reconciling Findings on the Employment Effect of Disability Insurance." *IZA Journal of Labor Policy* 3 (1): 1–23.
- Boyer, Sara L., and Gary R. Bond. 1999. "Does Assertive Community Treatment Reduce Burnout? A Comparison with Traditional Case Management." *Mental Health Services Research* 1 (1): 31–45.
- Braitman, Alex, Peggy Counts, Richard Davenport, Barbara Zurlinden, Mark Rogers, Joe Clauss, Arun Kulkarni, Jerry Kymla, and Laura Montgomery. 1995. "Comparison of Barriers to Employment for Unemployed and Employed Clients in a Case Management Program: An Exploratory Study." *Psychiatric Rehabilitation Journal* 19 (1): 3–8.
- Brock, Thomas, Michael J. Weiss, and Howard S. Bloom. 2013. *A Conceptual Framework for Studying the Sources of Variation in Program Effects*. New York: MDRC.
- Brownson, Ross C., Amy A. Eyler, Jenine K. Harris, Justin B. Moore, and Rachel G. Tabak. 2018. "Getting the Word Out: New Approaches for Disseminating Public Health Science." *Journal of Public Health Management and Practice* 24 (2): 102–111.
- Bruyere, Susanne M., Thomas P. Golden, and Ilene Zeitzer. 2007. "Evaluation and Future Prospect of U.S. Return to Work Policies for Social Security Beneficiaries." *Disability and Employment* 59: 53–90.
- Burkhauser, Richard V., and Mary C. Daly. 2011. *The Declining Work and Welfare of People with Disabilities: What Went Wrong and a Strategy for Change*. Washington, DC: American Enterprise Institute Press.

- Burkhauser, Richard V., Mary C. Daly, Duncan McVicar, and Roger Wilkins. 2014. "Disability Benefit Growth and Disability Reform in the US: Lessons from other OECD Nations." *IZA Journal of Labor Policy* 3 (4): 1–30.
- Burstein, Nancy R., Cheryl A. Roberts, and Michelle L. Wood. 1999. *Recruiting SSA's Disability Beneficiaries for Return-to-Work: Results of the Project NetWork Demonstration: Final Report*. Bethesda, MD: Abt Associates.
- Burtless, Gary. 1995. "The Case for Randomized Field Trials in Economic and Policy Research." *The Journal of Economic Perspectives* 9 (2): 63–84.
- Burtless, Gary, and David Greenberg. 1982. "Inferences Concerning Labor Supply Behavior Based on Limited Duration Experiments." *The American Economic Review* 72 (3): 488–497.
- Caliendo, Marco, and Sabine Kopeinig. 2008. "Some Practical Guidance for the Implementation of Propensity Score Matching." *Journal of Economic Surveys* 22 (1): 31–72.
- Camacho, Christa Bucks, and Jeffrey Hemmeter. 2013. "Linking Youth Transition Support Services: Results from Two Demonstration Projects." *Social Security Bulletin* 73 (1). <https://www.ssa.gov/policy/docs/ssb/v73n1/v73n1p59.html>.
- Campbell, Frances A., Elizabeth P. Pungello, Shari Miller-Johnson, Margaret Burchinal, and Craig T. Ramey. 2001. "The Development of Cognitive and Academic Abilities: Growth Curves from an Early Childhood Educational Experiment." *Developmental Psychology* 37 (2): 231–242.
- Card, David, Jochen Kluge, and Andrea Weber. 2010. "Active Labour Market Policy Evaluations: A Meta-Analysis." *The Economic Journal* 120 (548): F452–F477.
- Carter, Erik W., Diane Austin, and Audrey A. Trainor. 2012. "Predictors of Postschool Employment Outcomes for Young Adults with Severe Disabilities." *Journal of Disability Policy Studies* 23 (1): 50–63.
- CBPP (Center on Budget and Policy Priorities). 2021. *Supplemental Security Income. Policy Basics*. Washington, DC: Author. https://www.cbpp.org/sites/default/files/atoms/files/PolicyBasics_SocSec-IntroToSSI.pdf.
- CEA (Council of Economic Advisers). 2016. *Economic Report of the President, Transmitted to the Congress February 2016 Together with the Annual Report of the Council of Economic Advisors*. Washington DC: Government Printing Office.
- CEP (Commission on Evidence-Based Policymaking). 2017. *The Promise of Evidence-Based Policymaking: Report of the Commission on Evidence-Based Policymaking*. Washington, DC: Author. <https://bipartisanpolicy.org/wp-content/uploads/2019/03/Full-Report-The-Promise-of-Evidence-Based-Policymaking-Report-of-the-Comission-on-Evidence-based-Policymaking.pdf>.
- Chambless, Cathy, George Julnes, Sara McCormick, and Anne Brown-Reither. 2009. *Utah SSDI \$1 for \$2 Benefit Offset Pilot Demonstration Final Report*. Salt Lake City, UT: State of Utah.

- Chambless, Catherine E., George Julnes, Sara T. McCormick, and Anne Reither. 2011. "Supporting Work Effort of SSDI Beneficiaries: Implementation of Benefit Offset Pilot Demonstration." *Journal of Disability Policy Studies* 22 (3): 179–188.
- Charles, Kerwin Kofi, Yiming Li, and Melvin Stephens, Jr. 2018. "Disability Benefit Take-Up and Local Labor-Market Conditions." *Review of Economics and Statistics* 100 (3): 416–423.
- Chetty, Raj. 2006. "A General Formula for the Optimal Level of Social Insurance." *Journal of Public Economics* 90 (10): 1879–1901.
- Chetty, Raj, David Grusky, Maximilian Hell, Nathaniel Hendren, Robert Manduca, and Jimmy Narang. 2017. "The Fading American Dream: Trends in Absolute Income Mobility since 1940." *Science* 356 (6336): 398–406.
- Chetty, Raj, Nathaniel Hendren, and Lawrence F. Katz. 2016. "The Effects of Exposure to Better Neighborhoods on Children: New Evidence from the Moving to Opportunity Experiment." *American Economic Review* 106 (4): 855–902.
- Chow, Shein-Chung, and Mark Chang. 2012. *Adaptive Design Methods in Clinical Trials*. 2nd ed. Boca Raton, FL: CRC Press.
- Christian, Jennifer, Thomas Wickizer, and A. Kim Burton. 2016. "A Community-Focused Health & Work Service (HWS)." In *SSDI Solutions: Ideas to Strengthen the Social Security Disability Insurance Program*, edited by Committee for a Responsible Federal Budget, The McCrery-Pomeroy SSDI Solutions Initiative, Ch. 4. Offprint. <https://www.crfb.org/sites/default/files/christianwickizerburton.pdf>.
- Committee for a Responsible Federal Budget, The McCrery-Pomeroy SSDI Solutions Initiative. 2016. *SSDI Solutions: Ideas to Strengthen the Social Security Disability Insurance Program*. West Conshohocken, PA: Infinity Publishing.
- Claes, Rita, and S. Antonio Ruiz-Quintanilla. 1998. "Influences of Early Career Experiences, Occupational Group, and National Culture on Proactive Career Behavior." *Journal of Vocational Behavior* 52 (3): 357–378.
- Cloutier, Heidi, Joanne Malloy, David Hagner, and Patricia Cotton. 2006. "Choice and Control over Resources: New Hampshire's Individual Career Account Demonstration Projects." *Journal of Rehabilitation* 72 (2): 4–11.
- Coldwell, Craig M., and William S. Bender. 2007. "The Effectiveness of Assertive Community Treatment for Homeless Populations with Severe Mental Illness: A Meta-Analysis." *American Journal of Psychiatry* 164 (3): 393–399.
- Committee for the Prize in Economic Sciences in Memory of Alfred Nobel. 2019. *Understanding Development and Poverty Alleviation*. Stockholm, Sweden: The Royal Swedish Academy of Sciences.

- Congressional Budget Office. 2012. *Policy Options for the Social Security Disability Insurance Program*. Washington, DC: Congress of the United States, Congressional Budget Office.
- Cook, Thomas D. 2018. “Twenty-Six Assumptions That Have to Be Met If Single Random Assignment Experiments Are to Warrant ‘Gold Standard’ Status: A Commentary on Deaton and Cartwright.” *Social Science & Medicine* 210: 37–40.
- Cook, Thomas D., William R. Shadish, and Vivian C. Wong. 2008. “Three Conditions under Which Experiments and Observational Studies Produce Comparable Causal Estimates: New Findings from Within-Study Comparisons.” *Journal of Policy Analysis and Management* 27 (4): 724–750.
- Cook, J., S. Shore, J. Burke-Miller, J. Jonikas, M. Hamilton, B. Ruckdeschel, et al. 2019. “Efficacy of Mental Health Self-Directed Care Financing in Improving Outcomes and Controlling Service Costs for Adults with Serious Mental Illness.” *Psychiatric Services* 70 (3): 191–201.
- Costa, Jackson. 2017. “The Decline in Earnings Prior to Application for Disability Insurance Benefits.” *Social Security Bulletin* 77(1). <https://www.ssa.gov/policy/docs/ssb/v77n1/v77n1p1.html>.
- Crepon, Bruno, Esther Duflo, Marc Gurgand, Roland Rathelot, and Philippe Zamora. 2013. “Do Labor Market Policies Have Displacement Effects? Evidence from a Clustered Randomized Experiment.” *Quarterly Journal of Economics* 1238 (2): 531–580.
- Cronbach, Lee J., Sueann Robinson Ambron, Sanford M. Dornbusch, Robert C. Hornik, D. C. Phillips, Decker F. Walker, and Stephen S. Winer. 1980. *Toward Reform of Program Evaluation*. San Francisco: Jossey-Bass.
- Cunha, Flavio, and James J. Heckman. 2007. “The Evolution of Inequality, Heterogeneity, and Uncertainty in Labor Earnings in the US Economy.” NBER Paper No. 13526. Cambridge, MA: National Bureau of Economic Research.
- Cunha, Flavio, and James J. Heckman. 2008. “Formulating, Identifying, and Estimating the Technology of Cognitive and Noncognitive Skill Formation.” *Journal of Human Resources* 43 (4): 738–782.
- Cunha, Flavio, James J. Heckman, Lance Lochner, and Dimitriy V. Masterov. 2006. “Interpreting the Evidence on Life Cycle Skill Formation.” NBER Paper No. 11331. Cambridge, MA: National Bureau of Economic Research.
- Davies, Paul S., Kalman Rupp, and David Wittenburg. 2009. “A Life-Cycle Perspective on the Transition to Adulthood among Children Receiving Supplemental Security Income Payments.” *Journal of Vocational Rehabilitation* 30 (3): 133–151.
- Deaton, Angus, and Nancy Cartwright. 2018. “Understanding and Misunderstanding Randomized Controlled Trials.” *Social Science & Medicine* 210: 2–21. <https://doi.org/10.1016/j.socscimed.2017.12.005>.

- Decker, Paul T., and Craig V. Thornton. 1995. "The Long-Term Effects of Transitional Employment Services." *Social Security Bulletin* 58 (4): 71–81.
- Delin, Barry S., Ellie C. Hartman, and Christopher W. Sell. 2012. "The Impact of Work Outcomes: Evidence from Two Return-to-Work Demonstrations." *Journal of Vocational Rehabilitation* 36 (2): 97–107.
- Delin, Barry S., Ellie C. Hartman, Christopher W. Sell, and Anne E. Brown-Reither. 2010. *Testing a SSDI Benefit Offset: An Evaluation of the Wisconsin SSDI Employment Pilot*. Menomonie, WI: University of Wisconsin-Stout.
- Denne, Jacob, George Kettner, and Yonatan Ben-Shalom. 2015. *Return to Work in the Health Care Sector: Promising Practices and Success Stories*. Report for US Department of Labor, Office of Disability Employment Policy. Washington, DC: Mathematica Policy Research.
- 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*. Washington, DC: Mathematica Policy Research.
- Deshpande, Manasi. 2016a. "Does Welfare Inhibit Success? I Long-Term Effects of Removing Low-Income Youth from the Disability Rolls." *American Economic Review* 106 (11): 3300–3330.
- Deshpande, Manasi. 2016b. "The Effect of Disability Payments on Household Earnings and Income: Evidence from the SSI Children's Program." *Review of Economics and Statistics* 98 (4): 638–654.
- Deshpande, Manasi. 2020. "How Disability Benefits in Early Life Affect Long-Term Outcomes." Center Paper NB20-05. Cambridge, MA: National Bureau of Economic Research.
- Deshpande, Manasi, and Rebecca Dizon-Ross. 2020. *Improving the Outcomes of Disabled Youth through Information*. Cambridge, MA: National Bureau of Economic Research. <https://grantome.com/grant/NIH/R21-HD091472-02>.
- DiClemente, Carlo C., James O. Prochaska, Scott K. Fairhurst, Wayne F. Velicer, Mary M. Velasquez, and Joseph S. Rossi. 1991. "The Process of Smoking Cessation: An Analysis of Precontemplation, Contemplation, and Preparation Stages of Change." *Journal of Consulting and Clinical Psychology* 59 (2): 295–304.
- DiNardo, John, Jordan Matsudaira, Justin McCrary, and Lisa Sanbonmatsu. 2021. "A Practical Proactive Proposal for Dealing with Attrition: Alternative Approaches and an Empirical Example." *Journal of Labor Economics* 39 (S2): S507–S541.
- Dixon, Lisa. 2000. "Assertive Community Treatment: Twenty-Five Years of Gold." *Psychiatric Services* 51 (6): 759–765.

- Doemeland, Doerte, and James Trevino. 2014. "Which World Bank Reports Are Widely Read?" World Bank Policy Research Working Paper No. 6851. Washington, DC: The World Bank. <http://documents1.worldbank.org/curated/en/387501468322733597/pdf/WPS6851.pdf>.
- DOL (US Department of Labor). 2015 [updated 2019]. *CLEAR Causal Evidence Guidelines, Version 2.1*. Washington, DC: US Department of Labor, Clearinghouse for Labor Evaluation and Research. <https://clear.dol.gov/reference-documents/causal-evidence-guidelines-version-21>.
- DOL (US Department of Labor). n.d. "Employment First Presents 10 Critical Areas for Improving Competitive Integrated Employment Based on the WIOA Advisory Committee Report." Accessed December 10, 2020. <https://www.dol.gov/sites/dolgov/files/odep/topics/employmentfirst/ef-presents-10-critical-areas-for-improving-cie-based-on-the-wioa-advisory-committee-report-full.pdf>.
- DOL (US Department of Labor). n.d. "RETAIN Initiative." Accessed September 24, 2021. <https://www.dol.gov/agencies/odep/initiatives/saw-rtw/retain>.
- DOL (US Department of Labor). n.d. "WIOA Title I and III Annual Report Data: Program Year 2019." Workforce Performance Results, Employment and Training Administration. Accessed May 12, 2021. <https://www.dol.gov/agencies/eta/performance/results>.
- DOL (US Department of Labor), ODEP (Office of Disability Employment Policy). 2018. "Notice of Availability of Funds and Funding Opportunity Announcement for: Retaining Employment and Talent after Injury/Illness Network Demonstration Projects." Issued May 24, 2018. <https://www.dol.gov/sites/dolgov/files/odep/topics/saw-rtw/docs/foa-odep-18-01-published-on-grants.gov.pdf>.
- Dong, Nianbo, and Rebecca Maynard. 2013. "PowerUp! A Tool for Calculating Minimum Detectable Effect Sizes and Minimum Required Sample Sizes for Experimental and Quasi-Experimental Design Studies." *Journal of Research on Educational Effectiveness* 6 (1): 24–67.
- Duggan, Mark, and Scott A. Imberman. 2009. "Why Are the Disability Rolls Skyrocketing? The Contribution of Population Characteristics, Economic Conditions, and Program Generosity." In *Health at Older Ages*, edited by David M. Cutler and David A. Wise, 337–380. Chicago: University of Chicago Press.
- Duggan, Mark G., and Melissa S. Kearney. 2007. "The Impact of Child SSI Enrollment on Household Outcomes." *Journal of Policy Analysis and Management* 26 (4): 861–885.
- Duggan, Mark, Melissa S. Kearney, and Stephanie Rennane. 2015. "The Supplemental Income (SSI) Program." NBER Working Paper No. 21209. Cambridge, MA: National Bureau of Economic Research.

- Duggan, Mark, Melissa S. Kearney, and Stephanie Rennane. 2016. "The Supplemental Security Income Program." In *Economics of Means-Tested Transfer Programs in the United States*, Vol. 2, edited by Robert A. Moffitt, 1–58. Chicago: University of Chicago Press.
- Durlak, Joseph A., and Emily P. DuPre. 2008. "Implementation Matters: A Review of Research on the Influence of Implementation on Program Outcomes and the Factors Affecting Implementation." *American Journal of Community Psychology* 41 (3): 327–350.
- Eeckhoudt, Louis, and Miles Kimball. 1992. "Background Risk, Prudence, and the Demand for Insurance." In *Contributions to Insurance Economics*, edited by Georges Dionne, 23–54. Boston: Kluwer Academic Publishers.
- Eichengreen, Barry. 1996. *Golden Fetters: The Gold Standard and the Great Depression, 1919–1939*. New York: Oxford University Press.
- Ekman, Lisa D. 2016. "Discussion of Early Intervention Proposals." In *SSDI Solutions: Ideas to Strengthen the Social Security Disability Insurance Program*, edited by Committee for a Responsible Federal Budget, The McCrery-Pomeroy SSDI Solutions Initiative, Ch. 3. Offprint. <https://www.crfb.org/sites/default/files/stapletonbenshalommann.pdf>.
- Ellenhorn, Ross. 2005. "Parasuicidality and Patient Careerism: Treatment Recidivism and the Dialectics of Failure." *American Journal of Orthopsychiatry* 75 (2): 288–303.
- Ellison, Marsha Langer, E. Sally Rogers, Ken Sciarappa, Mikal Cohen, and Rick Forbess. 1995. "Characteristics of Mental Health Case Management: Results of a National Survey." *The Journal of Mental Health Administration* 22 (2): 101–112.
- Epstein, Diana, and Jacob Alex Klerman. 2012. "When Is a Program Ready for Rigorous Impact Evaluation? The Role of a Falsifiable Logic Model." *Evaluation Review* 36 (5): 375–401.
- Epstein, Z., M. Wood, M. Grosz, S. Prenovitz, and A. Nichols. 2020. *Synthesis of Stay-at-Work/Return-to-Work (SAW/RTW) Programs, Models, Efforts, and Definitions*. Cambridge, MA: Abt Associates.
- Farrell, Mary, Peter Baird, Bret Barden, Mike Fishman, and Rachel Pardoe. 2013. *The TANF/SSI Disability Transition Project: Innovative Strategies for Serving TANF Recipients with Disabilities*. OPRE Report 2013-51. Washington, DC: US Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research, and Evaluation.
- Farrell, Mary, and Johanna Walter. 2013. *The Intersection of Welfare and Disability: Early Findings from the TANF/SSI Disability Transition Project*. OPRE Report 2013-06. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, US Department of Health and Human Services.

- Feely, Megan, Kristen D. Seay, Paul Lanier, Wendy Auslander, and Patricia L. Kohl. 2018. "Measuring Fidelity in Research Studies: A Field Guide to Developing a Comprehensive Fidelity Measurement System." *Child and Adolescent Social Work Journal* 35 (2): 139–152.
- Fein, David, Samuel Dastrup, and Kimberly Burnett. 2021. *Still Bridging the Opportunity Divide for Low-Income Youth: Year Up's Longer-Term Impacts*. OPRE Report 2021-56. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, US Department of Health and Human Services. <https://www.acf.hhs.gov/sites/default/files/documents/opre/year-up-report-april-2021.pdf>.
- Finkelstein, Amy, and Nathaniel Hendren. 2020. "Welfare Analysis Meets Causal Inference." *Journal of Economic Perspectives* 34 (4): 146–67. <https://doi.org/10.1257/jep.34.4.146>
- Finkelstein, Amy, Sarah Taubman, Heidi Allen, Jonathan Gruber, Joseph P. Newhouse, Bill Wright, Kate Baicker, and Oregon Health Study Group. 2010. "The Short-Run Impact of Extending Public Health Insurance to Low Income Adults: Evidence from the First Year of the Oregon Medicaid Experiment. Analysis Plan." <https://www.nber.org/sites/default/files/2020-02/analysis-plan-one-year-2010-12-01.pdf>.
- Finkelstein, Amy, Sarah Taubman, Bill Wright, Mira Bernstein, Jonathan Gruber, Joseph P. Newhouse, Heidi Allen, Katherine Baicker, and Oregon Health Study Group. 2012. "The Oregon Health Insurance Experiment: Evidence from the First Year." *The Quarterly Journal of Economics* 127 (3): 1057–1106.
- Foster L., R. Brown, P. Phillips, J. Schore, and B. L. Carlson. 2003. "Improving the Quality of Medicaid Personal Assistance through Consumer Direction." *Health Affairs* 22 (Suppl 1). <https://doi.org/10.1377/hlthaff.w3.162>.
- Foster, Jared C., Jeremy M. G. Taylor, and Stephen J. Ruberg. 2011. "Subgroup Identification from Randomized Clinical Trial Data." *Statistics in Medicine* 30 (24): 2867–2880. <https://doi.org/10.1002/sim.4322>.
- Fraker, Thomas M., Peter Baird, Alison Black, Arif Mamun, Michelle Manno, John Martinez, Anu Rangarajan, and Debbie Reed. 2011. *The Social Security Administration's Youth Transition Demonstration Projects: Interim Report on Colorado Youth WIN*. Report for Social Security Administration, Office of Program Development and Research. Washington, DC: Mathematica Policy Research.
- Fraker, Thomas, Peter Baird, Arif Mamun, John Martinez, Debbie Reed, and Allison Thompkins. 2012. *The Social Security Administration's Youth Transition Demonstration Projects: Interim Report on the Career Transition Program*. Center for Studying Disability Policy. Washington, DC: Mathematica Policy Research.

- Fraker, Thomas, Alison Black, Joseph Broadus, Arif Mamun, Michelle Manno, John Martinez, Reanin McRoberts, Anu Rangarajan, and Debbie Read. 2011. *The Social Security Administration's Youth Transition Demonstration Projects: Interim Report on the City University of New York's Project*. Center for Studying Disability Policy. Washington, DC: Mathematica Policy Research.
- Fraker, Thomas M., Alison Black, Arif Mamun, Michelle Manno, John Martinez, Bonnie O'Day, Meghan O'Toole, Anu Rangarajan, and Debbie Reed. 2011. "The Social Security Administration's Youth Transition Demonstration Projects: Interim Report on Transition WORK". Report for Social Security Administration, Office of Program Development and Research. Washington, DC: Mathematica Policy Research.
- Fraker, Thomas, Alison Black, Arif Mamun, John Martinez, Bonnie O'Day, Meghan O'Toole, Anu Rangarajan, and Debbie Read. 2011. *The Social Security Administration's Youth Transition Demonstration Projects: Interim Report on the Transition Works Project*. Center for Studying Disability Policy. Washington, DC: Mathematica Policy Research.
- Fraker, Thomas, Erik Carter, Todd Honeycutt, Jacqueline Kauff, Gina Livermore, and Arif Mamun. 2014. *Promoting Readiness of Minors in SSI (PROMISE) Evaluation Design Report*. Washington, DC: Mathematica Policy Research.
- Fraker, Thomas M., Joyanne Cobb, Jeffrey Hemmeter, Richard G. Luecking, and Arif Mamun. 2018. "Three-Year Effects of the Youth Transition Demonstration Projects." *Social Security Bulletin* 78 (3): 19–41.
- Fraker, Thomas, Todd Honeycutt, Arif Mamun, Michelle Manno, John Martinez, Bonnie O'Day, Debbie Reed, and Allison Thompkins. 2012. *The Social Security Administration's Youth Transition Demonstration Projects: Interim Report on the Broadened Horizons, Brighter Futures*. Center for Studying Disability Policy. Washington, DC: Mathematica Policy Research.
- Fraker, Thomas M., Richard G. Luecking, Arif A. Mamun, John M. Martinez, Deborah S. Reed, and David C. Wittenburg. 2016. "An Analysis of 1-Year Impacts of Youth Transition Demonstration Projects." *Career Development and Transition for Exceptional Individuals* 39 (1): 34–46.
- Fraker, Thomas, Arif Mamun, Todd Honeycutt, Allison Thompkins, and Erin J. Valentine. 2014. *Final Report on the Youth Transition Demonstration*. Washington, DC: Mathematica Policy Research.
- Fraker, Thomas, Arif Mamun, Michelle Manno, John Martinez, Debbie Reed, Allison Thompkins, and David Wittenburg. 2012. *The Social Security Administration's Youth Transition Demonstration Projects: Interim Report on the West Virginia Youth Works Project*. Center for Studying Disability Policy. Washington, DC: Mathematica Policy Research.

- Fraker, Thomas, Arif Mamun, and Lori Timmins. 2015. *Three-Year Impacts of Services and Work Incentives on Youth with Disabilities*. Washington, DC: Mathematica Policy Research.
- Fraker, Thomas, and Anu Rangarajan. 2009. "The Social Security Administration's Youth Transition Demonstration Projects." *Journal of Vocational Rehabilitation* 30 (3): 223–240.
- Francesconi, Marco, and James J. Heckman. 2016. "Child Development and Parental Investment: Introduction." *The Economic Journal* 126 (596): F1–F27. <https://doi.org/10.1111/eoj.12388>.
- Frangakis, Constantine E., and Donald B. Rubin. 2002. "Principal Stratification in Causal Inference." *Biometrics* 58 (1): 21–29.
- Franklin, Gary M., Thomas M. Wickizer, Norma B. Coe, and Deborah Fulton-Kehoe. 2015. "Workers' Compensation: Poor Quality Health Care and the Growing Disability Problem in the United States." *American Journal of Industrial Medicine* 58 (3): 245–251.
- Freburger, Janet K., George M. Holmes, Robert P. Agans, Anne M. Jackman, Jane D. Darter, Andrea S. Wallace, Liana D. Castel, William D. Kalsbeek, and Timothy S. Carey. 2009. "The Rising Prevalence of Chronic Low Back Pain." *Archives of Internal Medicine* 169 (3): 251–258.
- Freedman, Lily, Sam Elkin, and Megan Millenky. 2019. "Breaking Barriers: Implementing Individual Placement and Support in a Workforce Setting." New York: MDRC.
- French, Eric, and Jae Song. 2014. "The Effect of Disability Insurance Receipt on Labor Supply." *American Economic Journal: Economic Policy* 6 (2): 291–337.
- Frey, William D., Robert E. Drake, Gary R. Bond, Alexander L. Miller, Howard H. Goldman, David S. Salkever, Steven Holsenbeck, Mustafa Karakus, Roline Milfort, Jarnee Riley, Cheryl Reidy, Julie Bollmer, and Megan Collins. 2011. *Mental Health Treatment Study: Final Report*. Rockville, MD: Westat.
- Fukui, Sadaaki, Rick Goscha, Charles A. Rapp, Ally Mabry, Paul Liddy, and Doug Marty. 2012. "Strengths Model Case Management Fidelity Scores and Client Outcomes." *Psychiatric Services* 63 (7): 708–710.
- GAO (US Government Accountability Office). 2002. *Program Evaluation: Strategies for Assessing How Information Dissemination Contributes to Agency Goals*. Report No. GAO-02-923. Washington, DC: Author.
- GAO (US Government Accountability Office). 2004. *Social Security Disability: Improved Processes for Planning and Conducting Demonstrations May Help SSA More Effectively Use Its Demonstration Authority*. Report No. GAO-05-19. Washington, DC: Author.

- GAO (US Government Accountability Office). 2005. *Federal Disability Assistance, Wide Array of Programs Needs to Be Examined in Light of 21st Century Challenges*. Report No. GAO-05-626. Washington, DC: Author.
- GAO (US Government Accountability Office). 2008. *Social Security Disability: Management Controls Needed to Strengthen Demonstration Projects*. Report No. GAO-08-1053. Washington, DC: Author.
- GAO (US Government Accountability Office). 2010. *Highlights of a Forum: Actions That Could Increase Work Participation for Adults with Disabilities*. Report No. GAO-10-812SP. Washington, DC: Author.
- GAO (US Government Accountability Office). 2012a. *Designing Evaluations: 2012 Revision*. Report No. GAO-12-208G. Washington, DC: Author.
- GAO (US Government Accountability Office). 2012b. *Employment for People with Disabilities: Little Is Known about the Effectiveness of Fragmented and Overlapping Programs*. Report No. GAO-12-677. Washington, DC: Author.
- GAO (US Government Accountability Office). 2012c. *Supplemental Security Income: Better Management Oversight Needed for Children's Benefits*. Report No. GAO-12-498SP. Washington, DC: Author.
- GAO (US Government Accountability Office). 2017. *Supplemental Security Income: SSA Could Strengthen Its Efforts to Encourage Employment for Transition-Age Youth*. Report No. GAO-17-485. Washington, DC: Author.
- GAO (US Government Accountability Office). 2018. *Medicaid Demonstrations: Evaluations Yielded Limited Results, Underscoring Need for Changes to Federal Policies and Procedures*. Report No. GAO-18-220. Washington, DC: Author.
- GAO (US Government Accountability Office). 2019. *Medicaid Demonstrations: Approvals of Major Changes Need Increased Transparency*. Report No. GAO-19-315. Washington, DC: Author.
- Gardiner, Karen N., and Randall Juras. 2019. *Pathways for Advancing Careers and Education: Cross-Program Implementation and Impact Study Findings*. OPRE Report 2019-32. Washington, DC: US Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research, and Evaluation.
- Gary, K. W., A. Sima, P. Wehman, and K. R. Johnson. 2019. "Transitioning Racial/Ethnic Minorities with Intellectual and Developmental Disabilities: Influence of Socioeconomic Status on Related Services." *Career Development and Transition for Exceptional Individuals* 42 (3): 158–167. <https://doi.org/10.1177/2165143418778556>.
- Gelber, Alexander, Timothy J. Moore, and Alexander Strand. 2017. "The Effect of Disability Insurance Payments on Beneficiaries' Earnings." *American Economic Journal: Economic Policy* 9 (3): 229–261.

- Gertler, Paul J., Sebastian Martinez, Patrick Premand, Laura B. Rawlings, and Christel M. J. Vermeersch. 2011. *Impact Evaluation in Practice*. Washington, DC: The International Bank for Reconstruction and Development, The World Bank.
- Geyer, Judy, Daniel Gubits, Stephen Bell, Tyler Morrill, Denise Hoffman, Sarah Croake, Katie Morrison, David Judkins, and David Stapleton. 2018. *BOND Implementation and Evaluation: 2017 Stage 2 Interim Process, Participation, and Impact Report*. Report for the Social Security Administration. Cambridge, MA: Abt Associates.
- Gimm, Gilbert, Noelle Denny-Brown, Boyd Gilman, Henry T. Ireys, and Tara Anderson. 2009. *Interim Report on the National Evaluation of the Demonstration to Maintain Independence and Employment*. Washington, DC: Mathematica Policy Research.
- Gingerich, Jade Ann, and Kelli Crane. 2021. *Transition Linkage Tool: A System Approach to Enhance Post-School Employment Outcomes*. Washington, DC: US Department of Labor, Office of Disability Employment Policy.
- Gokhale, Jagadeesh. 2013. "A New Approach to SSDI Reform." McCrery-Pomeroy SSDI Solutions Initiative Policy Brief. Washington, DC: Committee for a Responsible Federal Budget.
- Gokhale, Jagadeesh. 2015. "SSDI Reform: Promoting Return to Work Without Compromising Economic Security." *Wharton Public Policy Initiative* 3 (7): 1–6.
- Golden, Thomas P., Susan O'Mara, Connie Ferrell, and James R. Sheldon, Jr. 2000. "A Theoretical Construct for Benefits Planning and Assistance in the Ticket to Work and Work Incentive Improvement Act." *Journal of Vocational Rehabilitation* 14, (3): 147–152. <https://content.iospress.com/articles/journal-of-vocational-rehabilitation/jvr00076>.
- Golden, T. P., S. O'Mara, C. Ferrell, J. Sheldon, and L. Axton Miller. 2005. *Supporting Career Development and Employment: Benefits Planning, Assistance and Outreach (BPA&O) and Protection and Advocacy for Beneficiaries of Social Security (PABSS)*. SSA Publication No. 63-003. Social Security Administration. <https://hdl.handle.net/1813/89921>.
- Goss, Steven C. 2013. *Testimony by Chief Actuary from Social Security Administration before the House Committee on Ways and Means, Subcommittee on Social Security*. Washington, DC: Social Security Administration.
- Greenberg, David, Genevieve Knight, Stefan Speckesser, and Debra Hevenstone. 2011. "Improving DWP Assessment of the Relative Costs and Benefits of Employment Programmes." Working Paper No. 100. London, England: Department for Work and Pensions.
- Greenberg, David, Robert H. Meyer, and Michael Wiseman. 1993. *Prying the Lid from the Black Box: Plotting Evaluation Strategy for Welfare Employment and Training Programs*. Madison, WI: University of Wisconsin-Madison, Institute for Research on Poverty.

- Greenberg, David, Robert H. Meyer, and Michael Wiseman. 1994. "Multi-Site Employment and Training Evaluations: A Tale of Three Studies." *Industrial and Labor Relations Review* 47 (4): 679–691.
- GSA (General Services Administration), OES (Office of Evaluation Sciences). 2018. *Increasing SSI Uptake: Letters to Adults 65 and Older Increased SSI Awards by 340%*. Washington, DC: Authors. <https://oes.gsa.gov/assets/abstracts/1723-Increasing-SSI-Uptake.pdf>.
- GSA (General Services Administration), OES (Office of Evaluation Sciences). 2019a. *Communicating Employment Supports to Denied Disability Insurance Applicants*. <https://oes.gsa.gov/assets/abstracts/15xx-di.pdf>.
- GSA (General Services Administration), OES (Office of Evaluation Sciences). 2019b. *Encouraging SSI Recipients to Self-Report Wage Changes*. Washington, DC: Authors. <https://oes.gsa.gov/assets/abstracts/XXXX-ssi-wage-reporting-abstract.pdf>.
- GSA (General Services Administration), OES (Office of Evaluation Sciences). 2019c. "Encouraging SSI Recipients to Self-Report Wage Changes." <https://oes.gsa.gov/projects/ssi-wage-reporting/>.
- Gubits, Daniel, Rachel Cook, Stephen Bell, Michelle Derr, Jillian Berk, Ann Person, David Stapleton, Denise Hoffman, and David Wittenburg. 2013. *BOND Implementation and Evaluation: Stage 2 Early Assessment Report*. Rockville, MD: Abt Associates.
- Gubits, Daniel, Judy Geyer, Denise Hoffman, Sarah Croake, Utsav Kattel, David Judkins, Stephen Bell, and David Stapleton. 2017. *BOND Implementation and Evaluation: 2015 Stage 2 Interim Process, Participation, and Impact Report*. Report for Social Security Administration, Office of Program Development & Research. Cambridge, MA: Abt Associates; and Washington, DC: Mathematica Policy Research.
- Gubits, Daniel R., Judy Geyer, David Stapleton, David Greenberg, Stephen Bell, Austin Nichols, Michelle Wood, Andrew McGuirk, Denise Hoffman, Meg Carroll, Sarah Croake, Utsav Kattel, David R Mann, and David Judkins. 2018a. *BOND Implementation and Evaluation: Final Evaluation Report*, Vol. 1. Report for the Social Security Administration. Cambridge, MA: Abt Associates; and Washington, DC: Mathematica Policy Research.
- Gubits, Daniel R., Judy Geyer, David Stapleton, David Greenberg, Stephen Bell, Austin Nichols, Michelle Wood, Andrew McGuirk, Denise Hoffman, Meg Carroll, Sarah Croake, Utsav Kattel, David Mann, and David Judkins. 2018b. *BOND Implementation and Evaluation: Final Evaluation Report*. Vol. 2, *Technical Appendices*. Report for Social Security Administration. Cambridge, MA: Abt Associates; and Washington, DC: Mathematica Policy Research.

- Gubits, Daniel, Sarah Gibson, Michelle Wood, Cara Sierks, and Zachary Epstein. 2019. *Post-Entitlement Earnings Simplification Demonstration Technical Experts Panel Meeting: Final Report*. Rockville, MD: Abt Associates.
- Guldi, Melanie, Amelia Hawkins, Jeffrey Hemmeter, and Lucie Schmidt. 2018. "Supplemental Security Income and Child Outcomes: Evidence from Birth Weight Eligibility Cutoffs." NBER Working Paper No. 24913. Cambridge, MA: National Bureau of Economic Research. <https://www.nber.org/papers/w24913>.
- Hahn, Robert. 2019. "Building upon Foundations for Evidence-Based Policy," *Science* 364 (6440): 534–535.
- Hall, Jean P., Catherine Ipsen, Noelle K. Kurth, Sara McCormick, and Catherine Chambless. 2020. "How Family Crises May Limit Engagement of Youth with Disabilities in Services to Support Successful Transitions to Postsecondary Education and Employment." *Children and Youth Services Review* 118: 1–7.
- Hammermesh, Daniel S. 2007. "Viewpoint: Replication in Economics." *Canadian Journal of Economics* 40 (3): 715–733.
- Heckman, James J. 1992. "Randomization and Social Policy Evaluation." In *Evaluating Welfare and Training Programs*, edited by Charles F. Manski and Irwin Garfinkel. Cambridge, MA: Harvard University Press.
- Heckman, James J. 2011. "The Economics of Inequality: The Value of Early Childhood Education." *American Educator* 35, no. 1 (Spring): 31–47.
- Heckman, James, Lance Lochner, and Ricardo Cossa. 2003. "Learning-by-Doing versus On-the-Job Training: Using Variation Induced by the EITC to Distinguish between Models of Skill Formation." In *Designing Social Inclusion: Tools to Raise Low-End Pay and Employment in Private Enterprise*, edited by Edmund S. Phelps, 74–130. Cambridge, United Kingdom: Cambridge University Press.
- Heckman, James J., and Stefano Mosso. 2014. "The Economics of Human Development and Social Mobility." *Annual Review of Economics* 6 (1): 689–733.
- Heckman, James J., and Jeffrey A. Smith. 1995. "Assessing the Case for Social Experiments." *Journal of Economic Perspectives* 9 (2): 85–110.
- Heckman, James J., and Jeffrey A. Smith. 2004. "The Determinants of Participation in a Social Program: Evidence from a Prototypical Job Training Program." *Journal of Labor Economics* 22 (2): 243–298.
- Heckman, James, Jeffrey Smith, and Christopher Taber. 1998. "Accounting for Dropouts in Evaluations of Social Programs." *The Review of Economics and Statistics* 80 (1): 1–14.
- Heckman, J. J., and E. Vytlacil. 2005. "Structural Equations, Treatment Effects, and Econometric Policy Evaluation 1." *Econometrica*, 73 (3): 669–738.
- Hemmeter, Jeffrey. 2014. "Earnings and Disability Program Participation of Youth Transition Demonstration Participants after 24 Months." *Social Security Bulletin* 74 (1). <https://www.ssa.gov/policy/docs/ssb/v74n1/v74n1p1.html>.

- Hemmeter, Jeffrey. 2015. "Supplemental Security Income Program Entry at Age 18 and Entrants' Subsequent Earnings." *Social Security Bulletin* 75 (3): 35–53.
- Hemmeter, Jeffrey, and Michelle Stegman Bailey. 2016. "Earnings after DI: Evidence from Full Medical Continuing Disability Reviews." *IZA Journal of Labor Policy* 5 (1): 1–22.
- Hemmeter, Jeffrey, and Joyanne Cobb. 2018. *Youth Transition Demonstration: Follow-Up Findings*. Presentation at the Fall Research Conference of the Association for Public Policy Analysis & Management, Washington, DC, November 2018.
- Hemmeter, Jeffrey, Mark Donovan, Joyanne Cobb, and Tad Asbury. 2015. "Long Term Earnings and Disability Program Participation Outcomes of the Bridges Transition Program." *Journal of Vocational Rehabilitation* 42 (1): 1–15.
- Hemmeter, Jeffrey, Michael Levere, Pragya Singh, and David Wittenburg. 2021. "Changing Stays? Duration of Supplemental Security Income Participation by First-Time Child Awardees and the Role of Continuing Disability Reviews." *Social Security Bulletin* 81 (2): 17–41.
- Hemmeter, Jeffrey, David R. Mann, and David C. Wittenburg. 2017. "Supplemental Security Income and the Transition to Adulthood in the United States: State Variations in Outcomes Following the Age-18 Redetermination." *Social Service Review* 91 (1): 106–133.
- Hemmeter, Jeffrey, John Phillips, Elana Safran, and Nicholas Wilson. 2020. "Communicating Program Eligibility: A Supplemental Security Income Field Experiment." Office of Evaluation Sciences Working Paper. [https://oes.gsa.gov/assets/publications/1723%20-%20Hemmeter%20et%20al%20\(2021\)%20-%20Communicating%20Program%20Eligibility%20A%20Supplemental%20Security%20Income%20\(SSI\)%20Field%20Experiment.pdf](https://oes.gsa.gov/assets/publications/1723%20-%20Hemmeter%20et%20al%20(2021)%20-%20Communicating%20Program%20Eligibility%20A%20Supplemental%20Security%20Income%20(SSI)%20Field%20Experiment.pdf).
- Hemmeter, Jeffrey, and Michelle Stegman. 2015. "Childhood Continuing Disability Reviews and Age-18 Redeterminations for Supplemental Security Income Recipients: Outcomes and Subsequent Program Participation." *Research and Statistics Notes*. No. 2015-03. Social Security Administration. <https://www.ssa.gov/policy/docs/rsnotes/rsn2015-03.html>
- Hendra, R., James A. Riccio, Richard Dorsett, David H. Greenberg, Genevieve Knight, Joan Phillips, Philip K. Robins, Sandra Vegeris, Johanna Walter, Aaron Hill, Kathryn Ray, and Jared Smith. 2011. *Breaking the Low-Pay, No-Pay Cycle: Final Evidence from the UK Employment Retention and Advancement (ERA) Demonstration*. Research Report No 765. London, England: Department for Work and Pensions.
- Hendren, Nathaniel. 2016. "The Policy Elasticity." *Tax Policy and the Economy* 30 (1): 51–89.

- Hendren, Nathaniel. 2020. "Measuring Economic Efficiency Using Inverse-Optimum Weights." NBER Working Paper No. 20351. Cambridge, MA: National Bureau of Economic Research. <https://www.nber.org/papers/w20351>.
- Hendren, Nathaniel, and Ben Sprung-Keyser. 2019. "Unified Welfare Analysis of Government Policies." NBER WP No. 26144. <https://www.nber.org/papers/w26144>.
- Herd, Pamela, and Donald P. Moynihan. 2018. *Administrative Burden: Policymaking by Other Means*. New York: Russell Sage Foundation.
- Hernandez, Brigida, Mary J. Cometa, Jay Rosen, Jessica Velcoff, Daniel Schober, and Rene D. Luna. 2006. "Employment, Vocational Rehabilitation, and the Ticket to Work Program: Perspectives of Latinos with Disabilities." *Journal of Applied Rehabilitation Counseling* 37 (3): 13–22.
- HHS/ACF/OPRE (US Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research, and Evaluation). 2020. *Portfolio of Research in Welfare and Family Self-Sufficiency*. OPRE Report 2021-13. Washington, DC: Author.
- Higgins, Julian P.T., and Simon G. Thompson. 2004. "Controlling the Risk of Spurious Findings from Meta-Regression." *Statistics in Medicine* 23 (11): 1663–1682.
- Hill, Fiona. 2020. "Public Service and the Federal Government." *Policy 2020 Voter Vitals*. Washington, DC: Brookings Institution.
- Hirano, Kara A., Dawn Rowe, Lauren Lindstrom, and Paula Chan. 2018. "Systemic Barriers to Family Involvement in Transition Planning for Youth with Disabilities: A Qualitative Metasynthesis." *Journal of Child and Family Studies* 27 (11): 3440–3456.
- Hock, Heinrich, Michael Levere, Kenneth Fortson, and David Wittenburg. 2019. *Lessons from Pilot Tests of Recruitment for the Promoting Opportunity Demonstration*. Report for Social Security Administration, Office of Research, Demonstration, and Employment Support. Washington, DC: Mathematica Policy Research.
- Hock, Heinrich, Dara Lee Luca, Tim Kautz, and David Stapleton. 2017. *Improving the Outcomes of Youth with Medical Limitations through Comprehensive Training and Employment Services: Evidence from the National Job Corps Study*. Washington, DC: Mathematica Policy Research.
- Hock, Heinrich, David Wittenburg, and Michael Levere. 2020. "Memorandum: Promoting Opportunity Demonstration: Recruitment and Random Assignment Report." Washington, DC: Mathematica Policy Research.
- Hock, Heinrich, David Wittenburg, Michael Levere, Noelle Denny-Brown, and Heather Gordon. 2020. *Promoting Opportunity Demonstration: Recruitment and Random Assignment Report*. Washington, DC: Mathematica Policy Research.

- Hoffman, Denise, Sarah Croake, David R. Mann, David Stapleton, Priyanka Anand, Chris Jones, Judy Geyer, Daniel Gubits, Stephen Bell, Andrew McGuirk, David Wittenburg, Debra Wright, Amang Sukasih, David Judkins, and Michael Sinclair. 2017. *2016 Stage 1 Interim Process, Participation, and Impact Report*. Report for the Social Security Administration (contract deliverable 24c2.1 under Contract SS00-10-60011), Office of Program Development & Research. Cambridge, MA: Abt Associates; and Washington, DC: Mathematica Policy Research.
- Hoffman, Denise, Jeffrey Hemmeter, and Michelle S. Bailey. 2018. "The Relationship between Youth Services and Adult Outcomes among Former Child SSI Recipients." *Journal of Vocational Rehabilitation* 48 (2): 233–247.
- Hoffmann, Holger, Dorothea Jäckel, Sybille Glauser, Kim T. Mueser, and Zeno Kupper. 2014. "Long-Term Effectiveness of Supported Employment: 5-Year Follow-Up of a Randomized Controlled Trial." *American Journal of Psychiatry* 171 (11): 1183–1190.
- Holbrook, Allyson L., Timothy P. Johnson, and Maria Krysan. 2019. "Race- and Ethnicity-of-Interviewer Effects." In *Experimental Methods in Survey Research: Techniques That Combine Random Sampling with Random Assignment*, edited by Paul Lavrakas, Michael Traugott, Courtney Kennedy, Allyson Holbrook, Edith de Leeuw, and Brady West, 197–224. Hoboken, NJ: John Wiley & Sons.
- Hollenbeck, Kevin. 2015. *Promoting Retention or Reemployment of Workers after a Significant Injury or Illness*. Report for US Department of Labor, Office of Disability Employment Policy. Washington, DC: Mathematica Policy Research.
- Hollenbeck, K. 2021. *Demonstration Evidence of Early Intervention Policies and Practices*. Kalamazoo, MI: W. E. Upjohn Institute.
- Hollister, Robinson G., Peter Kemper, and Rebecca A Maynard. 1984. *The National Supported Work Demonstration*. Madison, WI: University of Wisconsin Press.
- Holt, Stephen, and Katie Vinopal. 2021. "It's About Time: Examining Inequality in the Time Cost of Waiting." *SSRN*. <https://doi.org/10.2139/ssrn.3857883>.
- Honeycutt, Todd, Kara Contreary, and Gina Livermore. 2021. *Considerations for the Papers Developed for the SSI Youth Solutions Project*. Report for the US Department of Labor, Office of Disability Employment Policy. Princeton, NJ: Mathematica. <https://www.mathematica.org/publications/considerations-for-the-papers-developed-for-the-ssi-youth-solutions-project>.
- Honeycutt, Todd, Brittney Gionfriddo, Jacqueline Kauff, Joseph Mastrianni, Nicholas Redel, and Adele Rizzuto. 2018. *Promoting Readiness of Minors in Supplemental Security Income (PROMISE): Arkansas PROMISE Process Analysis Report*. Washington, DC: Mathematica Policy Research.
- Honeycutt, Todd, Brittney Gionfriddo, and Gina Livermore. 2018. *Promoting Readiness of Minors in Supplemental Security Income (PROMISE): PROMISE Programs' Use of Effective Transition Practices in Serving Youth with Disabilities*. Washington, DC: Mathematica Policy Research.

- Honeycutt, Todd, and Gina Livermore. 2018. *Promoting Readiness in Minors in Supplemental Security Income (PROMISE): The Role of PROMISE in the Landscape of Federal Programs Targeting Youth with Disabilities*. Washington, DC: Mathematica Policy Research.
- Honeycutt, Todd, Eric Morris, and Thomas Fraker. 2014. *Preliminary YTD Benefit-Cost Analysis Using Administrative Data*. Princeton, NJ: Mathematica Policy Research.
- Honeycutt, T., and Stapleton, D. 2013. “Striking While the Iron Is Hot: The Effect of Vocational Rehabilitation Service Wait Times on Employment Outcomes for Applicants Receiving Social Security Disability Benefits.” *Journal of Vocational Rehabilitation* 39 (2): 137–152.
- Honeycutt, Todd, David Wittenburg, Kelli Crane, Michael Levere, Richard Luecking, and David Stapleton. 2018. *Supplemental Security Income Youth Formative Research Project: Considerations for Identifying Promising and Testable Interventions*. Washington, DC: Mathematica Policy Research.
- Honeycutt, Todd, David Wittenburg, Michael Levere, and Sarah Palmer. 2018. *Supplemental Security Income Youth Formative Research Project: Target Population Profiles*. Washington, DC: Mathematica Policy Research.
- Hotz, V. Joseph, and John Karl Scholz. 2001. “Measuring Employment Income for Low-Income Populations with Administrative and Survey Data.” In *Studies of Welfare Populations: Data Collection and Research Issues*, edited by M. V. Ploeg, R. A. Moffitt, and C. F. Citro, 275–315. Washington, DC: The National Academies Press.
- Hotz, V. J., and J. K. Scholz. 2003. “The Earned Income Tax Credit.” In *Means-Tested Transfer Programs in the United States*, edited by R. Moffitt, 141–198. Chicago: University of Chicago Press.
- Hoynes, H. W., and R. Moffitt. 1999. “Tax Rates and Work Incentives in the Social Security Disability Insurance Program: Current Law and Alternative Reforms.” *National Tax Journal* 52 (4): 623–654.
- Huggett, Mark, Gustavo Ventura, and Amir Yaron. 2011. “Sources of Lifetime Inequality.” *American Economic Review* 101 (7): 2923–2954.
- Hullegie, Patrick, and Pierre Koning. 2015. “Employee Health and Employer Incentives.” Discussion Paper No. 9310. Bonn, Germany: Institute for the Study of Labor.
- Hussey, Michael A., and James P. Hughes. 2007. “Design and Analysis of Stepped Wedge Cluster Randomized Trials.” *Contemporary Clinical Trials* 28 (2): 182–191.
- IAIABC (International Association of Industrial Accident Boards and Commissions), Disability Management and Return to Work Committee. 2016. *Return to Work: A Foundational Approach to Return to Function*. Madison, WI: Author.

- Ibarraran, Pablo, Laura Ripani, Bibiana Taboada, Juan Miguel Villa, and Brigida Garcia. 2014. "Life Skills, Employability, and Training for Disadvantaged Youth: Evidence from a Randomized Evaluation Design." *IZA Journal of Labor & Development* 3 (1): 1–24.
- Imai, K., D. Tingley, and T. Yamamoto. 2013. "Experimental Designs for Identifying Causal Mechanisms." *Journal of the Royal Statistical Society: Series A (Statistics in Society)* 176 (1): 5–51.
- Imbens, Guido W., and Thomas Lemieux. 2008. "Regression Discontinuity Designs: A Guide to Practice." *Journal of Econometrics* 142 (2): 615–635. <https://doi.org/10.1016/j.jeconom.2007.05.001>.
- Imbens, Guido W., and Donald B. Rubin. 2015. *An Introduction to Causal Inference in Statistics, Biomedical and Social Sciences*. New York: Cambridge University Press.
- Inanc, Hande, and David R. Mann. 2019. "Recent Changes and Reforms to the United Kingdom's Income Support Program for People with Disabilities." Center for Studying Disability Policy, Working Paper 2019-16. Washington, DC: Mathematica.
- Iwanaga, Kanako, Paul Wehman, Valerie Brooke, Lauren Avellone, and Joshua Taylor. 2021. "Evaluating the Effect of Work Incentives Benefits Counseling on Employment Outcomes of Transition-Age and Young Adult Supplemental Security Income Recipients with Intellectual Disabilities: A Case Control Study." *Journal of Occupational Rehabilitation* 31: 581–591.
- Johnson, George E. 1979. "The Labor Market Displacement Effect in the Analysis of the Net Impact of Manpower Training Programs." *Research in Labor Economics*, Supplement 1, 227–254.
- Johnson, George E., and James D. Tomola. 1977. "The Fiscal Substitution Effect of Alternative Approaches to Public Service Employment Policy." *Journal of Human Resources* 12 (1): 3–26.
- Kanter, Joel. 1989. "Clinical Case Management: Definition, Principles, Components." *Psychiatric Services* 40 (4): 361–368.
- Kapteyn, Arie, and Jelmer Y. Ypma. 2007. "Measurement Error and Misclassification: A Comparison of Survey and Administrative Data." *Journal of Labor Economics* 25 (3): 513–551.
- Karhan, Andrew J., and Thomas P. Golden. 2021. *Policy Considerations for Implementing Youth and Family Case Management Strategies across Systems*. Washington, DC: US Department of Labor, Office of Disability Employment Policy.
- Katz, Lawrence F. 1994. "Active Labor Market Policies to Expand Employment and Opportunity." In *Reducing Unemployment: Current Issues and Policy Options*, 239–290. Jackson Hole, WY: Federal Reserve Bank of Kansas City.

- Kauff, Jacqueline, Jonathan Brown, Norma Altshuler, and Noelle Denny-Brown. 2009. *Findings from a Study of the SSI/SSDI Outreach, Access, and Recovery (SOAR) Initiative*. Washington, DC: Mathematica Policy Research.
- Kauff, Jacqueline F., Elizabeth Clary, Kristin Sue Lupfer, and Pamela J. Fischer. 2016. "An Evaluation of SOAR: Implementation and Outcomes of an Effort to Improve Access to SSI and SSDI." *Psychiatric Services* 67 (10): 1098–1102.
- Kauff, Jacqueline, Elizabeth Clary, and Julia Lyskawa. 2014. *An Evaluation of SOAR: The Implementation and Outcomes of an Effort to Increase Access to SSI and SSDI*. Washington, DC: Mathematica Policy Research.
- Kauff, Jacqueline, Todd Honeycutt, Karen Katz, Joseph Mastrianni, and Adele Rizzuto. 2018. *Promoting Readiness of Minors in Supplemental Security Income (PROMISE): Maryland PROMISE Process Analysis Report*. Washington, DC: Mathematica Policy Research.
- Kennedy, Courtney, and Hannah Hartig. 2019. "Response Rates in Telephone Surveys Have Resumed Their Decline" (blog), *Pew Research Center*. February 27, 2019. <https://www.pewresearch.org/fact-tank/2019/02/27/response-rates-in-telephone-surveys-have-resumed-their-decline/>.
- Kennedy, Elizabeth, and Laura King. 2014. "Improving Access to Benefits for Persons with Disabilities Who Were Experiencing Homelessness: An Evaluation of the Benefits Entitlement Services Team Demonstration Project." *Social Security Bulletin* 74 (4): 45–55.
- Kerachsky, Stuart, and Craig Thornton. 1987. "Findings from the STETS Transitional Employment Demonstration." *Exceptional Children* 53 (6): 515–521.
- Kerachsky, Stuart, Craig Thornton, Anne Bloomenthal, Rebecca Maynard, and Susan Stephens. 1985. *Impacts of Transitional Employment on Mentally Retarded Young Adults: Results of the STETS Demonstration*. Washington, DC: Mathematica Policy Research.
- Kerksick, Julie, David Riemer, and Conor Williams. 2016. "Using Transitional Jobs to Increase Employment of SSDI Applicants and Beneficiaries." In *SSDI Solutions: Ideas to Strengthen the Social Security Disability Insurance Program*, edited by Committee for a Responsible Federal Budget, The McCrery-Pomeroy SSDI Solutions Initiative, Ch. 5. West Conshohocken, PA: Infinity Publishing.
- Kimball, Miles S. 1990. "Precautionary Saving in the Small and in the Large." *Econometrica* 58 (1): 53–73.
- King, Gary, and Richard Nielsen. 2019. "Why Propensity Scores Should Not Be Used for Matching" *Political Analysis* 27 (4): 435–454.
- Klerman, Jacob. 2020. "Findings from the (Experimental) Job Training Literature." Abt Associates. Mimeo.

- Kluge, Jochen, Susana Puerto, David Robalino, Jose Maunel Romero, Friederike Rother, Jonathan Stöterau, Felix Weidenkaff, and Marc Witte. 2016. "Do Youth Employment Programs Improve Labor Market Outcomes? A Systematic Review." IZA Discussion Paper, No. 10263. Bonn, Germany: Institute for the Study of Labor. <https://ftp.iza.org/dp10263.pdf>.
- Knaus, Michael C., Michael Lechner, and Anthony Strittmatter. 2020. "Heterogeneous Employment Effects of Job Search Programmes: A Machine Learning Approach." *Journal of Human Resources*. <https://doi.org/10.3368/jhr.57.2.0718-9615R1>.
- Ko, Hansoo, Renata E. Howland, and Sherry A. Glied. 2020. "The Effects of Income on Children's Health: Evidence from Supplemental Security Income Eligibility under New York State Medicaid." NBER Working Paper No. 26639. Cambridge, MA: National Bureau of Economic Research. <https://www.nber.org/papers/w26639>.
- Kogan, Deborah, Hannah Betesh, Marian Negoita, Jeffrey Salzman, Laura Paulen, Haydee Cuza, Liz Potamites, Jillian Berk, Carrie Wolfson, and Patty Cloud. 2012. *Evaluation of the Senior Community Service Employment Program (SCSEP) Process and Outcomes Study Final Report*. Report for US Department of Labor, Employment and Training Administration, Office of Policy Development and Research. Oakland, CA: Social Policy Research Associates.
- Kornfeld, Robert, and Kalman Rupp. 2000. "The Net Effects of the Project NetWork Return-to-Work Case Management Experiment on Participant Earnings, Benefit Receipt, and Other Outcomes." *Social Security Bulletin* 63 (1): 12–33.
- Kornfeld, Robert J., Michelle L. Wood, Larry L. Orr, and David A. Long. 1999. *Impacts of the Project NetWork Demonstration: Final Report*. Report for Social Security Administration. Bethesda, MD: Abt Associates.
- Kregel, John. 2006a. *Conclusions Drawn from the State Partnership Initiative*. Richmond, VA: Virginia Commonwealth University, Rehabilitation Research and Training Center, State Partnership Systems Change Initiative Project Office. <https://www.ssa.gov/disabilityresearch/documents/spiconclusions.pdf>.
- Kregel, John. 2006b. *Final Evaluation Report of the SSI Work Incentives Demonstration Project*. Richmond, VA: Virginia Commonwealth University, Rehabilitation Research and Training Center, State Partnership Systems Change Initiative Project Office. <https://www.ssa.gov/disabilityresearch/documents/spireport.pdf>.
- Kregel, John, and Susan O'Mara. 2011. "Work Incentive Counseling as a Workplace Support." *Journal of Vocational Rehabilitation* 35 (2): 73–83. <https://www.doi.org/10.3233/JVR-2011-0555>.

- Kunz, Tanja, and Marek Fuchs. 2019. "Using Experiments to Assess Interactive Feedback That Improves Response Quality in Web Surveys." In *Experimental Methods in Survey Research: Techniques that Combine Random Sampling with Random Assignment*, edited by Paul Lavrakas, Michael Traugott, Courtney Kennedy, Allyson Holbrook, Edith de Leeuw, and Brady West, 247–274. Hoboken, NJ: John Wiley & Sons.
- Larson, Sheryl A., and Judy Geyer. 2021. "Delaying Application of SSI's Substantial Gainful Activity Eligibility Criterion from Age 18 to 22." Washington, DC: US Department of Labor, Office of Disability Employment Policy.
- Lavrakas, Paul J., Jenny Kelly, and Colleen McClain. 2019. "Investigating Interviewer Effects and Confounds in Survey-Based Experimentation." In *Experimental Methods in Survey Research: Techniques that Combine Random Sampling with Random Assignment*, edited by Paul Lavrakas, Michael Traugott, Courtney Kennedy, Allyson Holbrook, Edith de Leeuw, and Brady West, 225–244. Hoboken, NJ: John Wiley & Sons.
- Leiter, Valerie, Michelle L. Wood, and Stephen H. Bell. 1997. "Case Managements at Work for SSA Disability Beneficiaries: Process Results of the Project NetWork Return-to-Work Demonstration." *Social Security Bulletin* 60: 29–48.
- Levere, Michael, Todd Honeycutt, Gina Livermore, Arif Mamun, and Karen Katz. 2020. *Family Service Use and Its Relationship with Youth Outcomes*. Washington, DC: Mathematica Policy Research.
- Levy, Frank. 1979. "The Labor Supply of Female Household Heads, or AFDC Work Incentives Don't Work Too Well." *Journal of Human Resources* 14 (1): 76–97.
- Liebman, Jeffrey B. 2015. "Understanding the Increase in Disability Insurance Benefit Receipt in the United States." *Journal of Economic Perspectives* 29 (2): 123–150.
- Liebman, Jeffrey B., and Jack A. Smalligan. 2013. "Proposal 4: An Evidence-Based Path to Disability Insurance Reform." In *15 Ways to Rethink the Federal Budget*, 27–30. Washington, DC: The Hamilton Project.
- Liu, Su, and David C. Stapleton. 2011. "Longitudinal Statistics on Work Activity and Use of Employment Supports for New Social Security Disability Insurance Beneficiaries." *Social Security Bulletin* 71 (3): 35–59.
- Livermore, Gina. 2011. "Social Security Disability Beneficiaries with Work-Related Goals and Expectations." *Social Security Bulletin* 71 (3): 61–82.
- Livermore, Gina A., and Nanette Goodman. 2009. *A Review of Recent Evaluation Efforts Associated with Programs and Policies Designed to Promote the Employment of Adults with Disabilities*. Princeton, NJ: Mathematica Policy Research.
- Livermore, Gina, Todd Honeycutt, Arif Mamun, and Jacqueline Kauff. 2020. "Insights about the Transition System for SSI Youth from the National Evaluation of Promoting Readiness of Minors in SSI (PROMISE)." *Journal of Vocational Rehabilitation* 52 (1): 1–17.

- Livermore, Gina, Arif Mamun, Jody Schimmel, and Sarah Prenovitz. 2013. *Executive Summary of the Seventh Ticket to Work Evaluation Report*. Washington, DC: Mathematica Policy Research.
- Livermore, Gina, and Sarah Prenovitz. 2010. *Benefits Planning, Assistance, and Outreach (BPAO) Service User Characteristics and Use of Work Incentives*. Work Activity and Use of Employment Supports under the Original Ticket to Work Regulations, Final Report. No. 5ca13079097b4ae887f19a614aca2bec. Washington, DC: Mathematica Policy Research.
- Livermore, Gina, David Wittenburg, and David Neumark. 2014. "Finding Alternatives to Disability Benefit Receipt." *IZA Journal of Labor Policy* 3 (14). <https://doi.org/10.1186/2193-9004-3-14>.
- Lowenstein, Amy E., Noemi Altman, Patricia M. Chou, Kristen Faucetta, Adam Greeney, Daniel Gubits, Jorgen Harris, JoAnn Hsueh, Erika Lundquist, Charles Michalopoulos, and Vinh Q. Nguyen. 2014. *A Family-Strengthening Program for Low-Income Families: Final Impacts from the Supporting Healthy Marriage Evaluation, Technical Supplement*. OPRE Report 2014-09B. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, US Department of Health and Human Services.
- Ludwig, Jens, Jeffrey R. Kling, and Sendhil Mullainathan. 2011. "Mechanism Experiments and Policy Evaluations." *Journal of Economic Perspectives* 25 (3): 17–38.
- Luecking, Richard G., and David C. Wittenburg. 2009. "Providing Supports to Youth with Disabilities Transitioning to Adulthood: Case Descriptions from the Youth Transition Demonstration." *Journal of Vocational Rehabilitation*, 30: 241–251.
- Maestas, Nicole. 2019. "Identifying Work Capacity and Promoting Work: A Strategy for Modernizing the SSDI Program." *The ANNALS of the American Academy of Political and Social Science* 686 (1): 93–120.
- Maestas, Nicole, Kathleen J. Mullen, and Alexander Strand. 2013. "Does Disability Insurance Receipt Discourage Work? Using Examiner Assignment to Estimate Causal Effects of SSDI Receipt." *American Economic Review* 103 (5): 1797–1829.
- Maestas, Nicole, Kathleen J. Mullen, and Alexander Strand. Forthcoming. "The Effect of Economic Conditions on the Disability Insurance Program: Evidence from the Great Recession." *Journal of Public Economics*.
- Maestas, Nicole, Kathleen J. Mullen, and Gema Zamarro. 2010. *Research Designs for Estimating Induced Entry into the SSDI Program Resulting from a Benefit Offset*. Santa Monica, CA: The RAND Corporation.
- Malani, Anup. 2006. "Identifying Placebo Effects with Data from Clinical Trials." *Journal of Political Economy* 114 (2): 236–256.

- Mamun, Arif, Ankita Patnaik, Michael Levere, Gina Livermore, Todd Honeycutt, Jacqueline Kauff, Karen Katz, AnnaMaria McCutcheon, Joseph Matrianni, and Brittney Gionfriddo. 2019. *Promoting Readiness of Minors in SSI (PROMISE) Evaluation: Interim Services and Impact Report*. Washington, DC: Mathematica Policy Research.
- Mamun, Arif, David Wittenburg, Noelle Denny-Brown, Michael Levere, David R. Mann, Rebecca Coughlin, Sarah Croake, Heather Gordon, Denise Hoffman, Rachel Holzwat, Rosalind Keith, Brittany McGill, and Aleksandra Wec. 2021. *Promoting Opportunity Demonstration: Interim Evaluation Report*. Report for Social Security Administration, Office of Research, Demonstration, and Employment Support. Washington, DC: Mathematica Policy Research.
- Manchester, Joyce. 2019. *Targeting Early Intervention Based on Health Care Utilization of SSDI Beneficiaries by State, with Emphasis on Mental Disorders and Substance Abuse*. Washington, DC: Committee for a Responsible Federal Budget, McCrery-Pomeroy SSDI Solutions Initiative. https://www.crfb.org/sites/default/files/Targeting_Early_Intervention_Based_On_Health_Care_Utilization.pdf.
- Mani, Anandi, Sendhil Mullainathan, Eldar Shafir, and Jiaying Zhao. 2013. "Poverty Impedes Cognitive Function." *Science* 341 (6149): 976–980.
- Marrow Jocelyn, Daley Tamara, Taylor Jeffrey, Karakus Mustafa, Marshall Tina, Lewis Megan. 2020. *Supported Employment Demonstration. Interim Process Analysis Report (Deliverable 7.5a)*. Rockville, MD: Westat. https://www.ssa.gov/disabilityresearch/documents/SED_Interim_Process_Analysis_Report_8-07-20.pdf.
- Martin, F., and Sevak, P. 2020. "Implementation and Impacts of the Substantial Gainful Activity Project Demonstration in Kentucky." *Journal of Vocational Rehabilitation* (Preprint), 1-9.
- Martin, Patricia P. 2016. "Why Researchers Now Rely on Surveys for Race Data on OASDI and SSI Programs: A Comparison of Four Major Surveys." *Research and Statistics Notes*. No. 2016-01. Social Security Administration. <https://www.ssa.gov/policy/docs/rsnotes/rsn2016-01.html>.
- Martinez, John, Thomas Fraker, Michelle Manno, Peter Baird, Arif Mamun, Bonnie O'Day, Anu Rangarajan, David Wittenburg, and Social Security Administration. 2010. *Social Security Administration's Youth Transition Demonstration Projects: Implementation Lessons from the Original Sites*. Washington, DC: Mathematica Policy Research.
- Martinson, Karin, Doug McDonald, Amy Berninger, and Kyla Wasserman. 2021. *Building Evidence-Based Strategies to Improve Employment Outcomes for Individuals with Substance Use Disorders*. OPRE Report 2020-171. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, US Department of Health and Human Services.

- Matulewicz, Holly, Karen Katz, Todd Honeycutt, Jacqueline Kauff, Joseph Mastrianni, Adele Rizzuto, and Claire S. Wulsin. 2018. *Promoting Readiness of Minors in Supplemental Security Income (PROMISE): California PROMISE Process Analysis Report*. Washington, DC: Mathematica Policy Research.
- Maximus. 2002. *Youth Continuing Disability Review Project: Annual Report October 1, 2001–September 30, 2002*. Report to the Social Security Administration, Office of Employment Support Programs.
- McCann, Ted, and Nick Hart. 2019. “Disability Policy: Saving Disability Insurance with the First Reforms in a Generation.” In *Evidence Works: Cases Where Evidence Meaningfully Informed Policy*, edited by Nick Hart and Meron Yohannes, 28–39. Washington, DC: Bipartisan Policy Center.
- McConnell, Sheena, and Steven Glazerman. 2001. *National Job Corps Study: The Benefits and Costs of Job Corps*. Washington, DC: Mathematica Policy Research.
- McConnell, Sheena, Irma Perez-Johnson, and Jillian Berk. 2014. “Proposal 9: Providing Disadvantaged Workers with Skills to Succeed in the Labor Market.” In *Policies to Address Poverty in America*, edited by Melissa S. Kearney and Benjamin H. Harris, 97–189. Washington, DC: The Brookings Institution.
- McCoy, Marion L., Cynthia S. Robins, James Bethel, Carina Tornow, and William D. Frey. 2007. *Evaluation of Homeless Outreach Projects and Evaluation: Task 6: Final Evaluation Report*. Rockville, MD: Westat.
- McCutcheon, AnnaMaria, Karen Katz, Rebekah Selekman, Todd Honeycutt, Jacqueline Kauff, Joseph Mastrianni, and Adele Rizzuto. 2018. *Promoting Readiness of Minors in Supplemental Security Income (PROMISE): New York State PROMISE Process Analysis Report*. Washington, DC: Mathematica Policy Research.
- McHugo, G. J., R. E. Drake, R. Whitley, G. R. Bond, K. Campbell, C. A. Rapp, H. H. Goldman, W. J. Lutz, and M. T. Finnerty. 2007. “Fidelity Outcomes in the National Implementing Evidence-Based Practices Project.” *Psychiatric Services* 58: 1279–1284.
- McLaughlin, James R. 1994. “Estimated Increase in OASDI Benefit Payments That Would Result from Two ‘Earnings Test’ Type Alternatives to the Current Criteria for Cessation of Disability Benefits—Information.” Memorandum, SSA Office of the Actuary.
- Metcalf, C. E. 1973. “Making Inferences from Controlled Income Maintenance Experiments.” *American Economic Review* 63 (3): 478–483.
- Meyer, Bruce D. 1995. “Lessons from the US Unemployment Insurance Experiments.” *Journal of Economic Literature* 33 (1): 91–131.
- Meyers, Marcia K., Janet C. Gornick, and Laura R. Peck. 2002. “More, Less, or More of the Same? Trends in State Social Welfare Policy in the 1990s.” *Publius: The Journal of Federalism* 32 (4): 91–108.

- Michalopoulos, Charles, David Wittenburg, Dina A. R. Israel, Jennifer Schore, Anne Warren, Aparajita Zutshi, Stephen Freedman, and Lisa Schwartz. 2011. *The Accelerated Benefits Demonstration and Evaluation Project: Impacts on Health and Employment at Twelve Months*. New York: MDRC. http://www.ssa.gov/disabilityresearch/documents/AB%20Vol%201_508%20comply.pdf.
- Miller, L., and S. O'Mara. 2003 [updated 2004]. "Social Security Disability Benefit Issues Affecting Transition Aged Youth." Briefing Paper, vol. 8. Richmond, VA: Virginia Commonwealth University, Benefits Assistance Resource Center.
- Moffitt, Robert A. 1992a. "Evaluation Methods for Program Entry Effects." In *Evaluating Welfare and Training Programs*, edited by C. F. Manski and I. Garfinkel, 231–252. Cambridge, MA: Harvard University Press.
- Moffitt, Robert. 1992b. "Incentive Effects of the US Welfare System: A Review." *Journal of Economic Literature* 30 (1): 1–61.
- Moffitt, Robert A. 1996. "The Effect of Employment and Training Programs on Entry and Exit from the Welfare Caseload." *Journal of Policy Analysis and Management* 15 (1): 32–50.
- Moffitt, Robert, ed. 2016. *Economics of Means-Tested Transfer Programs in the United States*. Chicago: University of Chicago Press.
- Mojtabai, Ramin. 2011. "National Trends in Mental Health Disability, 1997–2009." *American Journal of Public Health* 101 (11): 2156–2163.
- Moynihan, Donald, Pamela Herd, and Hope Harvey. 2015. "Administrative Burden: Learning, Psychological, and Compliance Costs in Citizen-State Interactions." *Journal of Public Administration Research and Theory* 25 (1): 43–69.
- Mullen, Kathleen J., and Stephanie L. Rennane. 2017. "The Effect of Unconditional Cash Transfers on the Return to Work of Permanently Disabled Workers." NBER Working Paper No. DRC NB17-09. Cambridge, MA: National Bureau of Economic Research. <https://www.nber.org/programs-projects/projects-and-centers/retirement-and-disability-research-center/center-papers/drc-nb17-09>.
- NASEM (National Academies of Sciences, Engineering, and Medicine). 2015. *Mental Disorders and Disabilities among Low-Income Children*. Washington, DC: The National Academies Press. <https://doi.org/10.17226/21780>.
- NASEM (National Academies of Sciences, Engineering, and Medicine). 2018. *Opportunities for Improving Programs and Services for Children with Disabilities*. Washington, DC: The National Academies Press.
- National Association of Social Work. 2013. "NASW Standards for Social Work Case Management." <https://www.socialworkers.org/LinkClick.aspx?fileticket=acrzqmEfhlo%3D&portalid=0>.

- National Disability Institute. 2020. *Race, Ethnicity, and Disability: The Financial Impact of Systemic Inequality and Intersectionality*. Washington, DC: Author. <https://www.nationaldisabilityinstitute.org/wp-content/uploads/2020/08/race-ethnicity-and-disability-financial-impact.pdf>.
- National Safety Council. 2020. “NSC Injury Facts.” <https://injuryfacts.nsc.org/>.
- Nazarov, Zafar. 2013. “Can Benefits and Work Incentives Counseling Be a Path to Future Economic Self-Sufficiency for SSI/SSDI Beneficiaries?” Working Paper No. 2013-17. Chestnut Hill, MA: Center for Retirement Research at Boston College.
- NCWD/Y (National Collaborative on Workforce and Disability for Youth). 2005. *Guideposts for Success*. Washington, DC: Institute on Education Leadership, 2005.
- NCWD/Y (National Collaborative on Workforce and Disability for Youth). 2009. *Guideposts for Success*, 2nd ed. Washington, DC: Institute on Educational Leadership.
- NCWD/Y (National Collaborative on Workforce and Disability for Youth). 2019. *Guideposts for Success 2.0: A Framework for Successful Youth Transition to Adulthood*. Washington, DC: Author. <http://www.ncwd-youth.info/wp-content/uploads/2019/07/Guideposts-for-Success-2.0.pdf>.
- Neuhauser, Frank. 2016, April. “The Myth of Workplace Injuries: Or Why We Should Eliminate Workers’ Compensation for 90% of Workers and Employers.” *IAIABC Perspectives*. <https://resources.iaiaabc.org/1a4arng/>.
- Nichols, Austin, Emily Dastrup, Zachary Epstein, and Michelle Wood. 2020. *Data Analysis for Stay-at-Work/Return-to-Work (SAW/RTW) Models and Strategies Project. Early Intervention Pathway Map and Population Profiles*. Report for US Department of Labor. Cambridge, MA: Abt Associates.
- Nichols, A., J. Geyer, M. Grosz, Z. Epstein, and M. Wood. 2020. *Synthesis of Evidence about Stay-at-Work/ Return-to-Work (SAW/RTW) and Related Programs*. Report for the U.S. Department of Labor. Rockville, MD: Abt Associates.
- Nichols, Austin, and Jesse Rothstein. 2016. “The Earned Income Tax Credit.” In *Economics of Means-Tested Transfer Programs in the United States*, Vol. 1, edited by Robert A. Moffitt, 137–218. Chicago: University of Chicago Press.
- Nichols, Austin, Lucie Schmidt, and Purvi Sevak. 2017. “Economic Conditions and Supplemental Security Income Applications.” *Social Security Bulletin* 77 (4): 27–44.
- Nickow, Andre, Philip Oreopoulos, and Vincent Quan. 2020. “The Impressive Effects of Tutoring on Prek–12 Learning: A Systematic Review and Meta-Analysis of the Experimental Evidence.” NBER Working Paper No. 27476. Cambridge, MA: National Bureau of Economic Research.

- Noel, Valerie A., Eugene Oulvey, Robert E. Drake, Gary R. Bond, Elizabeth A. Carpenter-Song, and Brian DeAtley. 2018. "A Preliminary Evaluation of Individual Placement and Support for Youth with Developmental and Psychiatric Disabilities." *Journal of Vocational Rehabilitation* 48 (2): 249–255.
- NACT (National Technical Assistance Center on Transition). 2016. *Evidence-Based Practices and Predictors in Secondary Transition: What We Know and What We Still Need to Know*. Charlotte, NC: Author. https://transitionta.org/wp-content/uploads/docs/EBPP_Exec_Summary_2016_12-13.pdf.
- Nunn, Ryan, Jana Parsons, and Jay Shambaugh. 2019. *Labor Force Nonparticipation: Trends, Causes, and Policy Solutions*. The Hamilton Project. Washington, DC: Brookings. https://www.hamiltonproject.org/assets/files/PP_LFPR_final.pdf.
- Nye-Lengerman, Kelly, Amy Gunty, David Johnson, and Maureen Hawes. 2019. "What Matters: Lessons Learned from the Implementation of PROMISE Model Demonstration Projects." *Journal of Vocational Rehabilitation* 51 (2): 275–284.
- O'Day, Bonnie, Hannah Burak, Kathleen Feeney, Elizabeth Kelley, Frank Martin, Gina Freeman, Grace Lim, and Katie Morrison. 2016. *Employment Experiences of Young Adults and High Earners Who Receive Social Security Disability Benefits: Findings from Semistructured Interviews*. Washington, DC: Mathematica Policy Research.
- O'Day, Bonnie, Allison Roche, Norma Altshuler, Liz Clary, and Krista Harrison. 2009. *Process Evaluation of the Work Incentives Planning and Assistance Program*. Work Activity and Use of Employment Supports under the Original Ticket to Work Regulations, Report 1. Washington, DC: Mathematica Policy Research.
- O'Leary, Paul, Leslie I. Boden, Seth A. Seabury, Al Ozonoff, and Ethan Scherer. 2012. "Workplace Injuries and the Take-Up of Social Security Disability Benefits." *Social Security Bulletin* 72 (3): 1–17.
- Olney, Marjorie F., and Cindy Lyle. 2011. "The Benefits Trap: Barriers to Employment Experienced by SSA Beneficiaries." *Rehabilitation Counseling Bulletin* 54 (4): 197–209.
- Olsen, Anya, and Russell Hudson. 2009. "Social Security Administration's Master Earnings File: Background Information," *Social Security Bulletin* 69 (3): 29–46.
- Olsen, Robert B., Larry L. Orr, Stephen H. Bell, and Elizabeth A. Stuart. 2013. "External Validity in Policy Evaluations That Choose Sites Purposively." *Journal of Policy Analysis and Management* 32 (1): 107–121. <https://doi.org/10.1002/pam.21660>.
- Orr, Larry L. 1999. *Social Experiments: Evaluating Public Programs with Experimental Methods*. Thousand Oaks, CA: Sage.

- Page, Lindsay C., Avi Feller, Todd Grindal, Luke Miratrix, and Marie-Andree Somers. 2015. "Principal Stratification: A Tool for Understanding Variation in Program Effects across Endogenous Subgroups." *American Journal of Evaluation* 36 (4): 514–531.
- Parsons, Donald O. 1980. "The Decline in Male Labor Force Participation." *Journal of Political Economy* 88 (1): 117–134.
- Peck, Laura R. 2003. "Subgroup Analysis in Social Experiments: Measuring Program Impacts Based on Post Treatment Choice." *American Journal of Evaluation* 24 (2): 157–187.
- Peck, Laura R. 2005. "Using Cluster Analysis in Program Evaluation." *Evaluation Review* 29: (25): 178–196.
- Peck, Laura R. 2013. "On Analysis of Symmetrically Predicted Endogenous Subgroups: Part One of a Method Note in Three Parts." *American Journal of Evaluation* 34 (2): 225–236.
- Peck, Laura R. 2020. *Experimental Evaluation Design for Program Improvement*. Thousand Oaks, CA: Sage.
- Peck, Laura R., Daniel Litwok, Douglas Walton, Eleanor Harvill, and Alan Werner. 2019. *Health Profession Opportunity Grants (HPOG 1.0) Impact Study: Three-Year Impacts Report*. OPRE Report 2019-114. Report for US Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research, and Evaluation. Rockville, MD: Abt Associates.
- Peck, Laura R., and Ronald J. Scott, Jr. 2005. "Can Welfare Case Management Increase Employment? Evidence from a Pilot Program Evaluation." *Policy Studies Journal* 33 (4): 509–533.
- Peikes, Deborah N., Lorenzo Moreno, and Sean Michael Orzol. 2008. "Propensity Score Matching: A Note of Caution for Evaluators of Social Programs." *The American Statistician* 62 (3): 222–231.
- Peikes, Deborah, Sean Orzol, Lorenzo Moreno, and Nora Paxton. 2005. *State Partnership Initiative: Selection of Comparison Groups for the Evaluation and Selected Impact Estimates: Final Report*. Princeton, NJ: Mathematica Policy Research.
- The Policy Surveillance Program. n.d. "State Supplemental Payments for Children with Disabilities." Accessed September 20, 2021. <http://www.lawatlas.org/datasets/supplemental-security-income-for-children-with-disabilities>.
- Porter, Alice, James Smith, Alydia Payette, Tim Tremblay, and Peter Burt. 2009. *SSDI \$1 for \$1 Benefit Offset Pilot Demonstration Vermont Pilot Final Report*. Burlington, VT: Vermont Division of Vocational Rehabilitation. <https://www.ssa.gov/disabilityresearch/documents/Vt1for2FinalReport091223.pdf>.

- Prero, Aaron J., and Craig Thornton. 1991. "Transitional Employment Training for SSI Recipients with Mental Retardation." *Social Security Bulletin* 54 (11): 2–25.
- Proudlock, S., and N. Wellman. 2011. "Solution Focused Groups: The Results Look Promising." *Counselling Psychology Review* 26 (3): 45–54.
- Puma, Michael J., Robert B. Olsen, Stephen H. Bell, and Cristofer Price. 2009. "What to Do When Data Are Missing in Group Randomized Controlled Trials." NCEE 2009-0049. Washington, DC: US Department of Education.
- Rangarajan, Anu, Thomas Fraker, Todd Honeycutt, Arif Mamun, John Martinez, Bonnie O'Day, and David Wittenburg. 2009. *The Social Security Administration's Youth Transition Demonstration Projects: Evaluation Design Report*. No. dc181046c9a041e6b63bb1b5743e1935. Princeton, NJ: Mathematica Policy Research.
- Rothstein, Jesse, and Till von Wachter. 2017. "Social Experiments in the Labor Market." In *Handbook of Economic Field Experiments*, Vol. 2, edited by Abhijit Vinayak Banerjee and Esther Duflo, 555–637. Amsterdam, The Netherlands: North-Holland/Elsevier.
- Ruiz-Quintanilla, S. Antonio, Robert R. Weathers II, Valerie Melburg, Kimberly Campbell, and Nawaf Madi. 2006. "Participation in Programs Designed to Improve Employment Outcomes for Persons with Psychiatric Disabilities: Evidence from the New York WORKS Demonstration Project." *Social Security Bulletin* 66 (2): 49–79.
- Rupp, Kalman, Stephen H. Bell, and Leo A. McManus. 1994. "Design of the Project NetWork Return-to-Work Experiment for Persons with Disabilities." *Social Security Bulletin* 57: 3. (2): 3–20. <https://pubmed.ncbi.nlm.nih.gov/7974091/>.
- Rupp, Kalman, Michelle Wood, and Stephen H. Bell. 1996. "Targeting People with Severe Disabilities for Return-to-Work: The Project NetWork Demonstration Experience." *Journal of Vocational Rehabilitation* 7 (1–2): 63–91.
- SAMHSA (Substance Abuse and Mental Health Services Administration). n.d. "SSI/SSDI Outreach, Access and Recovery: An Overview." Rockville, MD: Author. https://soarworks.samhsa.gov/sites/soarworks.prainc.com/files/SOAROverview-2020-508_0.pdf.
- Sampson, James P., Robert C. Reardon, Gary W. Peterson, and Janet G. Lenz. 2004. *Career Counseling and Services: A Cognitive Information Processing Approach*. Belmont, CA: Thomson/Brooks/Cole.
- Schiller, Bradley R. 1973. "Empirical Studies of Welfare Dependency: A Survey." *Journal of Human Resources* 8: 19–32.

- Schimmel, Jody, David Stapleton, David Mann, and Dawn Phelps. 2013. *Participant and Provider Outcomes since the Inception of Ticket to Work and the Effects of the 2008 Regulatory Changes*. Report for Social Security Administration, Office of Research, Demonstration, and Employment Support. Washington, DC: Mathematica Policy Research.
- Schimmel, Jody, David C. Stapleton, and Jae G. Song. 2011. "How Common Is Parking among Social Security Disability Insurance Beneficiaries. Evidence from the 1999 Change in the Earnings Level of Substantial Gainful Activity." *Social Security Bulletin* 71 (4): 77–92.
- Schlegelmilch, Amanda, Matthew Roskowski, Cayte Anderson, Ellie Hartman, and Heidi Decker-Maurer. 2019. "The Impact of Work Incentives Benefits Counseling on Employment Outcomes of Transition-Age Youth Receiving Supplemental Security Income (SSI) Benefits." *Journal of Vocational Rehabilitation* 51 (2): 127–136.
- Schmidt, Lucie, and Purvi Sevak. 2004. "AFDC, SSI, and Welfare Reform Aggressiveness." *Journal of Human Resources* 39 (3): 792–812.
- Schmidt, Lucie, and Purvi Sevak. 2017. "Child Participation in Supplemental Security Income: Cross- and within-State Determinants of Caseload Growth." *Journal of Disability Policy Studies* 28 (3): 131–140.
- Schmidt, Lucie, Lara D. Shore-Sheppard, and Tara Watson. 2020. "The Impact of the ACA Medicaid Expansion on Disability Program Applications." *American Journal of Health Economics* 6 (4): 444–476.
- Schochet, Peter Z. 2009. "An Approach for Addressing the Multiple Testing Problem in Social Policy Impact Evaluations." *Evaluation Review* 33 (6): 539–567.
- Schochet, Peter Z., John Burghardt, and Sheena McConnell. 2006. *National Job Corps Study and Longer-Term Follow-Up Study: Impact and Benefit-Cost Findings Using Survey and Summary Earnings Records Data. Final Report*. Princeton, NJ: Mathematica Policy Research.
- Schochet, Peter Z., Sheena M. McConnell, and John A. Burghardt. 2003. *National Job Corps Study: Findings Using Administrative Earnings Records Data*. Princeton, NJ: Mathematica Policy Research, Inc.
- Selekman, Rebekah, Mary A. Anderson, Todd Honeycutt, Karen Katz, Jacqueline Kauff, Joseph Mastrianni, and Adele Rizzuto. 2018. *Promoting Readiness of Minors in Supplemental Security Income (PROMISE): Wisconsin PROMISE Process Analysis Report*. Washington, DC: Mathematica Policy Research.
- Shadish, William R., Thomas D. Cook, and Donald T. Campbell. 2002. *Experimental and Quasi-Experimental Designs for Generalized Causal Inference*. Belmont, CA: Wadsworth/Cengage Learning.
- Skidmore, Sara, Debra Wright, Kirsten Barrett, and Eric Grau. 2017. *National Beneficiary Survey—General Waves Round 5. Vol. 2: Data Cleaning and Identification of Data Problems*. Washington, DC: Mathematica.

- Smalligan, Jack, and Chantel Boyens. 2019. "Improving the Social Security Disability Determination Process." Washington, DC: Urban Institute.
- Smalligan, Jack, and Chantel Boyens. 2020. "Two Proposals to Strengthen Paid-Leave Programs." Washington, DC: Urban Institute.
- Smith, Jeffrey A., and Petra E. Todd. 2005. "Does Matching Overcome LaLonde's Critique of Non-Experimental Estimators?" *Journal of Econometrics* 125 (1–2): 305–353.
- Social Security Advisory Board. 2016. "Representative Payees: A Call to Action." *Issue Brief*. <https://www.ssab.gov/research/representative-payees-a-call-to-action/>.
- Solomon, Phyllis. 1992. "The Efficacy of Case Management Services for Severely Mentally Disabled Clients." *Community Mental Health Journal* 28 (3): 163–180.
- Solon, Gary, Steven J. Haider, and Jeffrey M. Wooldridge. 2015. "What Are We Weighting For?" *Journal of Human Resources* 50 (2): 301–316.
- SRI International. 1983. *Final Report of the Seattle-Denver Income Maintenance Experiment*. Vol. 1, *Design and Results*. Washington, DC: Government Printing Office.
- SSA (Social Security Administration). 2001. "Childhood Disability: Supplemental Security Income Program. A Guide for Physicians and Other Health Care Professionals." Social Security Administration. <https://www.ssa.gov/disability/professionals/childhoodssi-pub048.htm>.
- SSA (Social Security Administration). 2006. "Cooperative Agreements for Work Incentives Planning and Assistance Projects; Program Announcement No. SSA-OESP-06-1." *Federal Register*. <https://www.federalregister.gov/documents/2006/05/16/06-4507/program-cooperative-agreements-for-work-incentives-planning-and-assistance-projects-program>.
- SSA (Social Security Administration). 2016. *The Social Security Administration's Plan to Achieve Self-Support Program*. Audit Report A-08-16-50030. Office of the Inspector General. <https://oig-files.ssa.gov/audits/full/A-08-16-50030.pdf>.
- SSA (Social Security Administration). 2018a. *National Beneficiary Survey: Disability Statistics, 2015*. Baltimore, MD: Author.
- SSA (Social Security Administration). 2018b. *Social Security Programs throughout the World: Europe, 2018*. SSA Publication No. 13-11801. Washington, DC: Social Security Administration, Office of Research, Evaluation, and Statistics, Office of Retirement and Disability Policy.
- SSA (Social Security Administration). 2019a. *Annual Report on Medical Continuing Reviews: Fiscal Year 2015*. Baltimore, MD: Author. <https://www.ssa.gov/legislation/FY%202015%20CDR%20Report.pdf>.

- SSA (Social Security Administration). 2019b. *Annual Report on Section 234 Demonstration Projects*. Washington, DC: Author. <https://www.ssa.gov/disabilityresearch/documents/Section%20234%20Report%20-%202019.pdf>.
- SSA (Social Security Administration). 2019c. *Annual Statistical Report on the Social Security Disability Insurance Program, 2018*. Washington, DC: Author. https://www.ssa.gov/policy/docs/statcomps/di_asr/2018/di_asr18.pdf.
- SSA (Social Security Administration). 2019d. "Supplemental Security Income, Table 7.B1." *Annual Statistical Supplement*. <http://www.ssa.gov/policy/docs/statcomps/supplement/2019/7b.html#table7.b1>.
- SSA (Social Security Administration). 2020a. *Annual Report on Section 234 Demonstration Projects*. Baltimore, MD: Author. <https://www.ssa.gov/legislation/Demo%20Project%20Report%20Released%20-%20Section%20234%20Report%202020.pdf>.
- SSA (Social Security Administration). 2020b. *Annual Statistical Report on the Social Security Disability Insurance Program, 2019*. https://www.ssa.gov/policy/docs/statcomps/di_asr/2019/di_asr19.pdf.
- SSA (Social Security Administration). 2020c. *Annual Statistical Supplement to the Social Security Bulletin*. Baltimore, MD: Author.
- SSA (Social Security Administration). 2020d. *DI & SSI Program Participants: Characteristics & Employment, 2015*. Washington, DC: Author. <https://www.ssa.gov/policy/docs/chartbooks/di-ssi-employment/2015/dspce-2015.pdf>.
- SSA (Social Security Administration). 2020e. *Red Book. A Summary Guide to Employment Supports for People with Disabilities under the Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) Programs*. <https://www.ssa.gov/redbook/>.
- SSA (Social Security Administration). 2020f, September. *Social Security Administration Evaluation Policy*. Washington, DC: Author. https://www.ssa.gov/data/data_governance_board/Evidence%20Act%20Evaluation%20Policy%20-%20September%202020.pdf.
- SSA (Social Security Administration). 2020g. *SSA Budget Information*. <https://www.ssa.gov/budget/FY21Files/2021BO.pdf>.
- SSA (Social Security Administration). 2020h. *SSI Annual Statistical Report, 2019*. Washington, DC: Author. https://www.ssa.gov/policy/docs/statcomps/ssi_asr/2019/ssi_asr19.pdf.
- SSA (Social Security Administration). 2020i. *What You Need to Know about Your Supplemental Security Income (SSI) When You Turn 18*. Report No. 2020. Baltimore, MD: Author. www.socialsecurity.gov/pubs/EN-05-11005.pdf.

- SSA (Social Security Administration). 2021. "SSI Monthly Statistics, 2020." Research, Statistics & Policy Analysis. https://www.ssa.gov/policy/docs/statcomps/ssi_monthly/2020/index.html.
- SSA (Social Security Administration). n.d. "Requesting an Electronic Data Exchange with SSA." Accessed March 26, 2021. https://www.ssa.gov/dataexchange/request_dx.html.
- SSA (Social Security Administration). n.d. "State Vocational Rehabilitation Agency Reimbursements." VR Reimbursement Claims Processing website. <https://www.ssa.gov/work/claimsprocessing.html> (accessed May 7, 2021).
- SSA (Social Security Administration). n.d. "Ticket Tracker, August 2020." Accessed March 4, 2021. <https://www.ssa.gov/work/tickettracker.html>.
- SSA/ORDP/ORDES (Social Security Administration; Office of Retirement and Disability Policy; Office of Research, Demonstration, and Employment Support). 2020. *Overview and Documentation of the Social Security Administration's Disability Analysis File (DAF) Public Use File for 2019*. Washington, DC: Mathematica. Retrieved from https://www.ssa.gov/disabilityresearch/daf_puf.html#documentation.
- Stapleton, David C., Stephen H. Bell, Denise Hoffman, and Michelle Wood. 2020. "Comparison of Population-Representative and Volunteer Experiments: Lessons from the Social Security Administration's Benefit Offset National Demonstration (BOND)." *American Journal of Evaluation* 41 (4): 547–563.
- Stapleton, David, Stephen Bell, David Wittenburg, Brian Sokol, and Debi McInnis. 2010. *BOND Implementation and Evaluation: BOND Final Design Report*. Report for Social Security Administration. Washington, DC: Abt Associates.
- Stapleton, David, Yonatan Ben-Shalom, and David Mann. 2016. "The Employment/Eligibility System: A New Gateway for Employment Supports and Social Security Disability Benefits." In *SSDI Solutions: Ideas to Strengthen the Social Security Disability Insurance Program*, edited by Committee for a Responsible Federal Budget, The McCrery-Pomeroy SSDI Solutions Initiative, Ch. 3. Offprint. <https://www.crfb.org/sites/default/files/stapletonbenshalommann.pdf>.
- Stapleton, David, Yonatan Ben-Shalom, and David R. Mann. 2019. *Development of an Employment/Eligibility Services (EES) System*. Report for University of New Hampshire. Washington, DC: Mathematica Policy Research.
- Stapleton, David, Robert Burns, Benjamin Doornink, Mary Harris, Robert Anfield, Winthrop Cashdollar, Brian Gifford, and Kevin Ufier. 2015. *Targeting Early Intervention to Workers Who Need Help to Stay in the Labor Force*. Report for US Department of Labor, Office of Disability Employment Policy. Washington, DC: Mathematica Policy Research.

- Stapleton, David, Arif Mamun, and Jeremy Page. 2014. "Initial Impacts of the Ticket to Work Program: Estimates Based on Exogenous Variation in Ticket Mail Months." *IZA Journal of Labor Policy* 3 (1): 1–24.
- State of Connecticut. 2009. *Benefit Offset Pilot Demonstration: Connecticut Final Report*. Report for Social Security Administration. <https://www.ssa.gov/disabilityresearch/documents/Conn-FINAL%20BOP%20REPORT%2012%207%2009.doc>.
- Stepner, Michael. 2019. "The Long-Term Externalities of Short-Term Disability Insurance." Unpublished working paper. https://files.michaelstepner.com/short_term_di_externalities.pdf.
- Stuart, Elizabeth A., Stephen R. Cole, Catherine P. Bradshaw, and Philip J. Leaf. 2011. "The Use of Propensity Scores to Assess the Generalizability of Results from Randomized Trials." *Journal of the Royal Statistical Society: Series A (Statistics in Society)* 174 (2): 369–386.
- Taylor, Jeffrey, David Salkever, William Frey, Jarnee Riley, and Jocelyn Marrow. 2020. *Supported Employment Demonstration Final Enrollment Analysis Report (Deliverable 7.4b)*. Report for Social Security Administration. Rockville, MD: Westat.
- Test, David W., Valerie L. Mazzotti, April L. Mustian, Catherine H. Fowler, Larry Korterling, and Paula Kohler. 2009. "Evidence-Based Secondary Transition Predictors for Improving Postschool Outcomes for Students with Disabilities." *Career Development for Exceptional Individuals* 32 (3): 160–181.
- Thornton, Craig, and Paul Decker. 1989. *The Transitional Employment Training Demonstration: Analysis of Program Impacts*. Princeton, NJ: Mathematica Policy Research.
- Thornton, Craig, Shari Miller Dunstan, and Jennifer Schore. 1988. *The Transitional Employment and Training Demonstration: Analysis of Program Operations*. Princeton, NJ: Mathematica Policy Research.
- Thornton, Craig, Gina Livermore, Thomas Fraker, David Stapleton, Bonnie O'Day, David Wittenburg, Robert Weathers II, et al. 2007. *Evaluation of the Ticket to Work Program: Assessment of Post-Rollout Implementation and Early Impacts*, Vol. 1. Washington, DC: Mathematica Policy Research.
- Tipton, Elizabeth. 2013. "Improving Generalizations from Experiments Using Propensity Score Subclassification: Assumptions, Properties, and Contexts" *Journal of Educational and Behavioral Statistics* 38 (3): 239–266.
- Tipton, Elizabeth. 2014. "How Generalizable Is Your Experiment? An Index for Comparing Experimental Samples and Populations." *Journal of Educational and Behavioral Statistics* 39 (6): 478–501.
- Tipton, Elizabeth, and Laura R. Peck. 2017. "A Design-Based Approach to Improve External Validity in Welfare Policy Evaluations." *Evaluation Review* 41 (4): 326–356.

- Tipton, Elizabeth, David S. Yeager, Ronaldo Iachan, and Barbara Schneider. 2019. "Designing Probability Samples to Study Treatment Effect Heterogeneity." In *Experimental Methods in Survey Research: Techniques That Combine Random Sampling with Random Assignment*, edited by Paul Lavrakas, Michael Traugott, Courtney Kennedy, Allyson Holbrook, Edith de Leeuw, and Brady West, 435–456. Hoboken, NJ: John Wiley & Sons.
- Todd, Petra E., and Kenneth I. Wolpin. 2006. "Assessing the Impact of a School Subsidy Program in Mexico: Using a Social Experiment to Validate a Dynamic Behavioral Model of Child Schooling and Fertility." *American Economic Review* 96 (5): 1384–1417.
- Tremblay, Tim, James Smith, Alice Porter, and Robert Weathers. 2011. "Effects on Beneficiary Employment and Earnings of a Graduated \$1-for-\$2 Benefit Offset for Social Security Disability Insurance (SSDI)." *Journal of Rehabilitation* 77 (2): 19.
- Tremblay, T., J. Smith, H. Xie, and R. Drake. 2004. "The Impact of Specialized Benefits Counseling Services on Social Security Administration Disability Beneficiaries in Vermont." *Journal of Rehabilitation* 70 (2): 5-11.
- Tremblay, Timothy, James Smith, Haiyi Xie, and Robert E. Drake. 2006. "Effect of Benefits Counseling Services on Employment Outcomes for People with Psychiatric Disabilities." *Psychiatric Services* 57 (6): 816–821.
- Trepper, Terry S., Yvonne Dolan, Eric E. McCollum, and Thorana Nelson. 2006. "Steve De Shazer and the Future of Solution-Focused Therapy." *Journal of Marital and Family Therapy* 32 (2): 133–139.
- Treskon, Louisa. 2016. "What Works for Disconnected Young People: A Scan of the Evidence." MDRC Working Paper. New York: MDRC.
- Tuma, Nancy B. 2001. "Approaches to Evaluating Induced Entry into a New SSDI Program with a \$1 Reduction in Benefits for Each \$2 in Earnings." Working draft prepared for the Social Security Administration. https://www.ssa.gov/disabilityresearch/documents/ind_entry_110501.pdf.
- Vachon, Mallory. 2014. "The Impact of Local Labor Market Conditions and the Federal Disability Insurance Program: New Evidence from the Bakken Oil Boom." Paper presented at the 2014 Conference of the National Tax Association, Santa Fe, NM, November 2014. <https://www.ntanet.org/wp-content/uploads/proceedings/2014/052-vachon-impact-local-market-conditions-federal.pdf>.
- Van Noorden, Richard, Brendan Maher, and Regina Nuzzo. 2014. "The Top 100 Papers." *Nature* 514 (7524): 550–553.
- VanderWeele, Tyler J. 2011. "Principal Stratification—Uses and Limitations." *International Journal of Biostatistics* 7 (1): 1–14.

- Vogl, Susanne, Jennifer A. Parsons, Linda K. Owens, and Paul J. Lavrakas. 2019. "Experiments on the Effects of Advance Letters in Surveys." In *Experimental Methods in Survey Research: Techniques that Combine Random Sampling with Random Assignment*, edited by Paul Lavrakas, Michael Traugott, Courtney Kennedy, Allyson Holbrook, Edith de Leeuw, and Brady West, 89–110. Hoboken, NJ: John Wiley & Sons.
- von Wachter, Till, Jae Song, and Joyce Manchester. 2011. "Trends in Employment and Earnings of Allowed and Rejected Applicants to the Social Security Disability Insurance Program." *American Economic Review* 101 (7): 3308–3329.
- Vought, Russell T. 2020. *Phase 4 Implementation of the Foundations for Evidence-Based Policymaking Act of 2018: Program Evaluation Standards and Practices*. Memo M-20-12. Washington, DC: Office of Management and Budget, Executive Office of the President.
- Weathers II, R. R., and J. Hemmeter. 2011. "The Impact of Changing Financial Work Incentives on the Earnings of Social Security Disability Insurance (SSDI) Beneficiaries." *Journal of Policy Analysis and Management* 30 (4): 708–728.
- Weathers II, Robert R., Chris Silanskis, Michelle Stegman, John Jones, and Susan Kalasunas. 2010. "Expanding Access to Health Care for Social Security Disability Insurance Beneficiaries: Early Findings from the Accelerated Benefits Demonstration." *Social Security Bulletin* 70 (4): 25–47. <https://www.ssa.gov/policy/docs/ssb/v70n4/v70n4p25.html>.
- Weathers II, Robert R., and Michelle Stegman. 2012. "The Effect of Expanding Access to Health Insurance on the Health and Mortality of Social Security Disability Insurance Beneficiaries." *Journal of Health Economics* 31 (6): 863–875.
- Weathers II, Robert R., and Michelle Stegman Bailey. 2014. "The Impact of Rehabilitation and Counseling Services on the Labor Market Activity of Social Security Disability Insurance (SSDI) Beneficiaries." *Journal of Policy Analysis and Management* 33 (3): 623–648.
- Wehman, Paul H., Carol M. Schall, Jennifer McDonough, John Kregel, Valerie Brooke, Alissa Molinelli, Whitney Ham, Carolyn W. Graham, J. E. Riehle, and Holly T. Collins. 2014. "Competitive Employment for Youth with Autism Spectrum Disorders: Early Results from a Randomized Clinical Trial." *Journal of Autism and Developmental Disorders* 44 (3): 487–500.
- Wehmeyer, Michael L. 1995. *The Arc's Self-Determination Scale: Procedural Guidelines*. Washington, DC: US Department of Education, Office of Special Education and Rehabilitative Services, Division of Innovation and Development.
- Westfall, Peter H., and S. Stanley Young. 1993. *Resampling-Based Multiple Testing: Examples and Methods for p-Value Adjustment*. New York: John Wiley & Sons.

- Whalen, Denise, Gilbert Gimm, Henry Ireys, Boyd Gilman, and Sarah Croake. 2012. *Demonstration to Maintain Independence and Employment (DMIE)*. Report for Centers for Medicare & Medicaid Services. Washington, DC: Mathematica Policy Research.
- Wilde, Elizabeth Ty, and Robinson Hollister. 2007. "How Close Is Close Enough? Evaluating Propensity Score Matching Using Data from a Class Size Reduction Experiment." *Journal of Policy Analysis and Management* 26 (3): 455–477.
- Wilhelm, Sarah, and Sara McCormick. 2013. "The Impact of a Written Benefits Analysis by Utah Benefit Counseling/WIPA Program on Vocational Rehabilitation Outcomes." *Journal of Vocational Rehabilitation* 39 (3): 219–228.
- Wing, Coady, Kosali Simon, and Ricardo A. Bello-Gomez. 2018. "Designing Difference in Difference Studies: Best Practices for Public Health Policy Research." *Annual Review of Public Health* 39: 453–469.
- Wiseman, Michael. 2016. *Rethinking the Promoting Opportunity Demonstration Project*. Washington, DC: Social Security Advisory Board.
- Wittenburg, David. 2011. *Testimony for Hearing on Supplemental Security Income Benefits for Children. Subcommittee on Human Resources, Committee on Ways and Means, US House of Representatives*. Washington, DC: Mathematica Policy Research.
- Wittenburg, David, Kenneth Fortson, David Stapleton, Noelle Denny-Brown, Rosalind Keith, David R. Mann, Heinrich Hock, and Heather Gordon. 2018. *Promoting Opportunity Demonstration: Design Report*. Washington, DC: Mathematica Policy Research.
- Wittenburg, David, Thomas Fraker, David Stapleton, Craig Thornton, Jesse Gregory, and Arif Mamun. 2007. "Initial Impacts of the Ticket to Work Program on Social Security Disability Beneficiary Service Enrollment, Earnings, and Benefits." *Journal of Vocational Rehabilitation* 27 (2): 129–140.
- Wittenburg, David, and Gina Livermore. 2020. *Youth Transition*. Washington, DC: Mathematica Policy Research.
- Wittenburg, David, David R. Mann, and Allison Thompkins. 2013. "The Disability System and Programs to Promote Employment for People with Disabilities." *IZA Journal of Labor Policy* 2 (4): 1–25.
- Wittenburg, David, David Stapleton, Michelle Derr, Denise W. Hoffman, and David R. Mann. 2012. *BOND Stage 1 Early Assessment Report*. Report for Social Security Administration, Office of Research, Demonstration, and Employment Support. Cambridge, MA: Abt Associates.
- Wittenburg, David, John Tambornino, Elizabeth Brown, Gretchen Rowe, Mason DeCamillis, and Gilbert Crouse. 2015. *The Child SSI Program and the Changing Safety Net*. Washington, DC: US Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, Office of Human Services Policy.

- Wixon, Bernard, and Alexander Strand. 2013. "Identifying SSA's Sequential Disability Determination Steps Using Administrative Data." *Research and Statistics Notes*. No. 2013-01. Social Security Administration. <https://www.ssa.gov/policy/docs/rsnotes/rsn2013-01.html>.
- youth.gov. n.d. "Job Corps, Program Activities/Goals." Accessed March 24, 2021. <https://youth.gov/content/job-corps>.
- Zhang, C. Yiwei, Jeffrey Hemmeter, Judd B. Kessler, Robert D. Metcalfe, and Robert Weathers. 2020. "Nudging Timely Wage Reporting: Field Experimental Evidence from the United States Social Supplementary Income Program." NBER Working Paper No. 2785. Cambridge, MA: National Bureau of Economic Research.
- Ziguras, Stephen J., and Geoffrey W. Stuart. 2000. "A Meta-Analysis of the Effectiveness of Mental Health Case Management over 20 Years." *Psychiatric Services* 51 (11): 1410–1421.