



**WORK-RELATED OVERPAYMENT AND BENEFIT SUSPENSION EXPERIENCES
OF FEDERAL DISABILITY BENEFICIARIES**

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Abstract

This paper examines the work-related overpayment and benefit suspension experiences of recently employed Social Security Disability Insurance and Supplemental Security Income beneficiaries using data from the 2017 *National Beneficiary Survey*. It documents overpayment and benefit suspension rates and the characteristics of beneficiaries experiencing these events and examines the association between knowledge of Social Security Administration work incentive provisions and beneficiaries' expectations, benefit suspensions, and overpayments. It also documents reasons that some who achieve benefit suspension discontinue or reduce their work effort and return to receiving benefits. The findings are descriptive and do not attribute causality to the relationships between awareness of program provisions and the overpayment and benefit suspension experiences.

The paper found that:

- Among recently employed beneficiaries, overpayment and benefit suspension rates differed by program, age, education, race, and ethnicity.
- Awareness of key provisions was positively associated with the likelihood of benefit suspension and anticipating a benefit suspension after controlling for other personal characteristics. We observed a positive association between beneficiaries who were aware of their ability to retain their health insurance after losing cash benefits and those who experienced a benefit suspension.
- About half of beneficiaries whose benefits were suspended had returned to benefits or were in the process of doing so at the time of the interview. These beneficiaries reported a variety of reasons for resuming benefits, with health-related reasons being the most common. Awareness of key provisions was not associated with benefit resumption after suspension. However, anticipating a benefit suspension was associated with a reduced likelihood of resuming benefits among SSI recipients.
- Although beneficiaries aware of key provisions were more likely to report their employment to the Social Security Administration relative to unaware beneficiaries, after controlling for other characteristics, awareness of earnings-related provisions was not associated with the likelihood of overpayment or changes in employment after experiencing an overpayment. However, among those who experienced a benefit

suspension, anticipation of the suspension was associated with a smaller likelihood of experiencing a DI overpayment.

The policy implications of the findings are:

- Increasing beneficiaries' knowledge about key provisions such as health insurance coverage could prompt more beneficiaries to work at levels that suspend benefits, improve their anticipation of and planning for benefit suspensions, and reduce the chances of overpayments.
- Targeting policies, information, or supports to beneficiaries with earnings-related benefit suspensions could help them remain off of benefits, especially those that address health needs.
- Examining the job attributes, health insurance, and other characteristics of beneficiaries who resume benefits after suspension might identify supports to help these beneficiaries remain employed.

Introduction

Federal disability beneficiaries who work, particularly those whose earnings exceed the Social Security Administration (SSA) substantial gainful activity (SGA) level, are at risk of having their benefits suspended retroactively and, as a result, of receiving cash benefits that they are not owed. This is generally referred to as an overpayment. Little is known about the extent to which beneficiaries anticipate these events or about beneficiaries' employment responses after experiencing them. In this study, we examine the characteristics, awareness of SSA work incentive provisions, employment, and benefit resumption experiences of Social Security Disability Insurance (DI) and Supplemental Security Income (SSI) beneficiaries who experience disability benefit suspensions and overpayments. The data for the study come from the 2017 *National Beneficiary Survey* (NBS). The 2017 NBS is the first survey round to include a large sample of beneficiaries who recently worked above the SGA level and thus are most at risk of experiencing benefit overpayments and suspensions. The sample is nationally representative of beneficiaries who were participating in the SSI and DI programs in June 2016.

This study addresses the following questions:

- What are the characteristics of beneficiaries who experience overpayments and benefit suspensions because of earnings? At the time of interview, how knowledgeable are they about key SSA work incentives?
- Among those experiencing benefit suspensions, what share expected them? Do beneficiaries who experience overpayments and suspensions report changing their employment in response? Is knowledge of SSA work incentives correlated with expectations and reported employment responses?
- What are the reasons that some who achieve benefit suspension discontinue or reduce their work effort and return to receiving benefits?

We found differences in overpayment and benefit suspension rates by program, age, education, and race and ethnicity. Although we found low rates of awareness of key SSA work incentives among recent workers and those experiencing a benefit suspension, awareness of key provisions was positively associated with the likelihood of benefit suspension and of anticipating a benefit suspension, after controlling for other personal characteristics. Awareness of key

provisions was not associated with benefit resumption after suspension. Beneficiaries reported a variety of reasons for resuming benefits after a suspension, with health-related reasons most common. Although beneficiaries who were aware of key provisions were more likely to report their employment to SSA, after controlling for other personal characteristics, awareness of earnings-related provisions was not associated with the likelihood of overpayment or changes in employment after experiencing an overpayment. However, among DI beneficiaries who experienced a benefit suspension, anticipation of the suspension was associated with a smaller likelihood of experiencing a DI overpayment as well as a reduced likelihood of resuming benefits among SSI recipients.

Background

SSI and DI Program Rules Concerning Earnings

The SSI and DI programs offer income support to adults who are unable to work because of a significant health condition. To qualify for either program, an applicant must demonstrate an inability to engage in substantial work due to a medically determinable impairment expected to last at least 12 months or result in death. SSA defines substantial work (referred to as substantial gainful activity, or SGA) as being equivalent to monthly earnings in excess of \$1,310 (in 2021) for most individuals.

Although initial eligibility for DI and SSI is contingent on limited earnings and the same medical criteria, the programs differ in terms of how earnings are treated in determining the monthly cash payments and ongoing eligibility. Under DI, individuals can work and earn at any level for up to nine months without losing eligibility for DI cash benefits. This nine-month period is referred to as the trial work period. SSA considers beneficiaries to be in a trial work period if monthly earnings exceed \$940 (in 2021) or if they are working more than 80 self-employed hours per month. If individuals earn more than the SGA level in any month after completing the trial work period, they enter the 36-month extended period of eligibility and become ineligible for any DI cash benefits; however, if they completed the 24-month Medicare waiting period prior to becoming ineligible for DI, they remain eligible for Medicare through an extended period of Medicare eligibility of up to about nine years. Although DI cash benefits are suspended during the extended period of eligibility, they may resume in any month during the extended period that beneficiaries do not earn above SGA. Once the beneficiary completes 36

extended period of eligibility months, SSA terminates DI cash benefits if the individual is working above SGA. The expedited reinstatement provision allows individuals whose benefits ended because of earnings to request that their benefits restart without having to submit a new application. Aside from sustained employment above SGA, there are only a few ways that DI benefits can be terminated: medical improvement, transition to the Social Security retirement program upon reaching the full retirement age (age 66 and 2 months for those turning age 66 in 2021), and death.

In the SSI program, monthly payments decline by \$1 for every \$2 of earnings after \$65 of earnings and a \$20 per month general income exclusion; thus, SSI payments can decline with very low levels of earnings, but only gradually as earnings rise. SSI program provisions allow participants to earn above the SGA level and remain eligible for SSI (Section 1619[a]) and Medicaid (Section 1619[b]) benefits even after SSA suspends SSI payments because of earnings. Individuals remain eligible for SSI and Medicaid until their earnings exceed a “threshold amount,” which is based on annual per capita Medicaid expenditures for SSI recipients and varies by state. Individuals can remain on SSI but receive no cash payments indefinitely if they continue to have earnings high enough to keep their SSI payments at zero and low enough to be under the Section 1619(b) threshold. SSA would only terminate the SSI eligibility of such individuals if they became ineligible because of medical improvement or a change in their assets, unearned income, living arrangements, or several other circumstances unrelated to their earnings.

In addition to those described above, the DI and SSI programs have several provisions intended to help beneficiaries in their efforts to return to work. Most allow beneficiaries to remain eligible for Medicare or Medicaid and keep more of their cash benefits while working or preparing for work,¹ but others provide resources to help beneficiaries improve their ability to work. For example, SSA’s Ticket to Work program will reimburse employment service providers for helping beneficiaries go to work if those beneficiaries meet specific earnings milestones. SSA’s Work Incentives Planning and Assistance program provides grants to local organizations to offer information and counseling to beneficiaries regarding what happens to their cash and public health insurance benefits as they work and increase their earnings.

¹ Examples of these are exclusions from benefit and eligibility computations of impairment-related and blind work expenses and contributions to approved plans for achieving self-support.

Employment, Benefit Suspension, and Overpayments

Many SSI and DI beneficiaries work after entering the disability programs. During the first five years after entering the programs, about 22 percent of beneficiaries have worked at some point (SSA 2020), with those ages 18 to 29 being most likely to work (41 percent). Despite employment being common, few SSI and DI beneficiaries work enough to leave the disability rolls; only about 5 percent had their benefits suspended for work and even less had their benefits terminated for work during their first 15 years of participating in the programs (SSA 2020). Among those whose benefits are suspended because of earnings, overpayments are common. One study estimated that about 70 percent of DI beneficiaries experiencing benefit suspension during a two-year period also experienced at least one month in which benefits were overpaid (Hoffman et al. 2019). On average, these work-related overpayments lasted more than nine months and the median overpayment was over \$9,000. Thus, overpayments are common among beneficiaries who work at levels resulting in suspension of their DI beneficiaries and are sizeable.

Previous studies provide some information about the characteristics of beneficiaries who experience benefit suspensions and overpayments. Younger beneficiaries are more likely to have benefits suspended or terminated (Ben-Shalom and Stapleton 2015; Liu and Stapleton 2011; SSA 2020). However, Livermore (2011) found that, holding other characteristics constant, age was not a significant predictor of benefit suspension. That study found that in a multivariate context, SSI-only recipients and beneficiaries with low monthly benefits and those who were married, living with children, and in good physical and mental health were more likely to leave disability rolls because of work. Among beneficiaries experiencing benefit suspension, overpayment prevalence rates were highest among those who were Black, had less than a high school education, and had low monthly benefits (Hoffman et al. 2019).

Work Incentives and Responses to Overpayments and Benefit Suspensions

Little is known about the extent to which beneficiaries who experience benefit suspensions and overpayments are knowledgeable about the relevant SSA work incentive provisions and whether they anticipate these events. Qualitative studies of DI beneficiaries who experienced overpayments found that some were unaware of their responsibility to report earnings to SSA, the cut-off at the SGA level for earnings after the trial work period, and other

work provisions that could lessen the impact of overpayments, such as impairment-related work expenses (Kregel 2018, O’Day et al. 2016). The SSA Office of the Inspector General found that SSA overpaid nearly \$371 million to beneficiaries because they failed to report their earnings and noted that many beneficiaries may be unaware of provisions that allow them to voluntarily suspend benefits to avoid an overpayment (SSA OIG 2018).

Avoidance of overpayments and the need to repay large sums is thought to be a reason why some working beneficiaries choose to keep earnings below an amount that would trigger benefit suspension. Beneficiaries report that overpayments are a source of frustration, fear, and anger (Gubits et al. 2013). However, most of the evidence related to employment responses after receiving overpayments is based on small qualitative studies. One quantitative study indicates that notifications of overpayment debt were followed by declines in work at the SGA level in the months of and following the notification (Hoffman et al. 2020). A qualitative study of DI beneficiaries who experienced overpayments and subsequently sought benefits counseling found that about half of them immediately stopped working upon receiving notice of the overpayment (Kregel 2018). Other qualitative studies have shown that some DI beneficiaries maintained or increased work after experiencing an overpayment (O’Day et al. 2016; Hoffman et al. 2017). One of these studies found that many beneficiaries working above the SGA level had a limited understanding of their benefits, options for retaining public health insurance after returning to work, and SSA provisions that could support work (O’Day et al. 2016). The loss of health insurance was a particular concern, even more so than the loss of cash benefits for some beneficiaries.

Research to date also provides little information about the reasons why individuals who work enough for SSA to suspend their benefits do not sustain their earnings and why many of those who leave the disability rolls because of earnings subsequently return. Of the 3.5 percent of DI beneficiaries and less than 0.5 percent of SSI recipients who had earnings high enough for SSA to terminate their benefits during their first 15 years in the programs, about half of such DI beneficiaries and one-quarter of such SSI recipients eventually returned to the disability rolls (SSA 2020). The most common reasons for leaving jobs among all working beneficiaries are being fired or laid off and the onset or worsening of a health condition (Livermore et al. 2009) but existing studies have not explored the reasons why beneficiaries resume benefits after SSA suspends them because of earnings.

Hypotheses

Based on the findings from the literature and the relevance of information about how earnings affect benefits in beneficiaries' decisions to work, we address the following hypotheses in our investigation of the relationship between awareness of SSA provisions and overpayment and benefit suspension experiences:

- Recently employed beneficiaries who are aware of key SSA work supports are more likely to work at levels that trigger a benefit suspension, anticipate a benefit suspension, and report their employment to SSA.
- Beneficiaries aware of the work-related provisions are less likely to experience overpayments and less likely to change their employment after receiving an overpayment.
- Among those experiencing benefit suspensions, those who anticipate them are less likely to experience an overpayment and less likely to return to benefits.

Data and Methods

We used data from the NBS fielded in 2017. The 2017 NBS is the first of the NBS rounds to include a large sample of SSI and DI beneficiaries who recently worked above the SGA level. The oversample of SGA earners is nationally representative of beneficiaries on the rolls in June 2016 who earned above SGA for three or more consecutive months during the six-month period before they were interviewed in 2017. The NBS collects extensive information about beneficiaries' characteristics, health status, employment experiences, and knowledge of SSA work incentives. The 2017 NBS also collected information about whether beneficiaries' benefits were suspended, if they expected their benefits to be suspended, the extent to which beneficiaries changed their work activity in response to an overpayment, and the reasons why beneficiaries returned or planned to return to benefits after suspensions due to earnings.² The file also includes administrative data that help describe workers who experience benefit

² Benefit suspension and resumption status was self-reported. We classified those experiencing a benefit suspension who reported receiving cash benefits or being in the process of getting back on cash benefits at interview as resuming benefits.

overpayments and suspensions, including benefit levels and time spent participating in the SSI and DI programs.

There are two limitations of the NBS data to keep in mind when interpreting the findings: (1) the overpayment and benefit suspension information is self-reported and so subject to respondent recall bias and (2) the data do not allow us to determine when beneficiaries became aware of work incentive provisions relative to experiencing an overpayment or benefit suspension. This second limitation means, for instance, that a positive association between awareness and benefit suspension could be because beneficiaries more knowledgeable about work support provisions are more likely to work at levels that suspend benefits, or because the benefit suspension itself prompted beneficiaries to learn about the provisions, or both. Because we do not know when the awareness was gained relative to the suspension and overpayment events, we cannot infer the direction of any associations we find. The findings are descriptive and do not identify causality.

We present analyses on samples of recently employed beneficiaries, recent workers who experienced benefit overpayments, and recent workers who experienced benefit suspensions. Table 1 shows the sample sizes for these subgroups. We present all descriptive statistics separately for DI beneficiaries and SSI recipients including those receiving SSI and DI concurrently (representing 17 percent of the full sample) in both sets of statistics.

We present descriptive statistics comparing the characteristics, knowledge of SSA rules, and work experiences of recently employed beneficiaries who did and did not experience overpayments and benefit suspensions. For those who experienced a recent benefit suspension, we also examine the extent to which the suspensions were anticipated, reasons why some returned to benefits, and the factors that might cause others to return in the future. We conducted tests to identify statistically significant differences between selected subgroups.

Finally, we estimated linear regression models to assess the associations between knowledge of program rules and the likelihood of anticipating a benefit suspension, experiencing suspensions and overpayments, changing employment after an overpayment, and resuming benefits after a suspension. These models controlled for other personal and health characteristics (sex, age, race, ethnicity, education, time on the disability rolls, impairment, functional

limitations, and SSA's expectation of medical improvement³). Because the work-related provisions differ between the DI and SSI programs, we estimated the models separately for beneficiaries who were eligible for each type of benefit, including those concurrently eligible for SSI and DI in both sets of models.

The standard errors for all the analyses account for the NBS sampling design and we estimated all statistics by using the relevant survey weights.

Results

How Common Were Earnings-Related Overpayments and Benefit Suspensions among Recently Employed Beneficiaries?

Overpayments

About 16 percent of recently employed beneficiaries, representing just over 300,000 nationwide, reported that they had been asked to repay SSA because they were overpaid (Table 1). This percentage is higher among DI beneficiaries (24 percent) than among SSI recipients (14 percent). There was some variation in overpayment rates by characteristics among recently employment beneficiaries (Appendix Table A1). Recently employed SSI and DI beneficiaries ages 56 and older had relatively low overpayment rates (10 and 8 percent, respectively), whereas almost one-third of recently employed Hispanic or Latino DI beneficiaries (32 percent) reported experiencing an overpayment. Because just 15 percent of beneficiaries were recently employed, the percentage who experienced an overpayment among all beneficiaries was small, at 2.4 percent.

Benefit Suspension

Among all beneficiaries, 1.9 percent reported experiencing a recent benefit suspension (Table 1). The rate among those who had been recently employed was 13 percent, representing nearly 250,000 beneficiaries. Perhaps in part reflecting the differences in the treatment of

³After award, SSA periodically will assess beneficiaries' ongoing medical eligibility for DI and SSI. At the initial and subsequent medical reviews, SSA classifies beneficiaries' medical improvement likelihood in one of three categories: medical improvement expected, possible, or not expected. The timing of SSA's subsequent medical reviews is based in part on this classification; those with medical improvement expected are subject to reviews at shorter intervals (every 6 to 18 months) than those with medical improvement possible (every three years) or not expected (every seven years). We include this variable in the regression models to reflect another facet of beneficiary health.

earnings between the programs, a somewhat higher percentage of recently employed SSI recipients reported that their disability benefits completely stopped because they were working in the past year than recently employed DI beneficiaries (15 percent and 11 percent, respectively). There was also variation in benefit suspension rates by personal characteristics, with beneficiaries ages 56 and older (3 to 4 percent) and those with intellectual disability (6 to 7 percent) in both programs having among the lowest rates (Appendix Table A1). Those with relatively high rates of benefit suspension include DI beneficiaries who had not completed high school (17 percent) and SSI recipients with a sensory disorder (37 percent) and those with a college degree (26 percent).

How Do the Characteristics of Beneficiaries Who Experience Overpayments and Benefit Suspensions Because of Earnings Differ from Other Recently Employed Beneficiaries?

Beneficiaries Experiencing Overpayments

There were differences in personal characteristics between recently employed beneficiaries who reported experiencing an overpayment and those who did not (Table 2). Beneficiaries in both programs who experienced overpayments were younger, were more likely to be employed at interview, and had been participating in the disability programs for a longer period of time. They also were more likely to claim they reported their employment to SSA around the time they began working; however, the difference was statistically significant only for SSI recipients. Among DI beneficiaries, there were differences in education level; those experiencing overpayments more likely to have some college but less likely to have a four-year degree or higher, compared with those who did not experience an overpayment. There were also some differences among SSI recipients; those experiencing an overpayment were more likely to be female and less likely to have an expectation of medical improvement. Beneficiaries with overpayments were similar to other recently employed beneficiaries in terms of race (non-White or White) and ethnicity.

With respect to health and functioning, beneficiaries experiencing overpayments were less likely to report difficulties with activities of daily living (ADLs) than other recently employed beneficiaries, though their difficulties with instrumental activities of daily living (IADLs), total number of difficulties, and general health status were similar (Table 2). This might be the result of those in better health being more likely to work and earn at higher levels

that might trigger overpayments, compared with working beneficiaries in poorer health. There were some differences in the types of health conditions that limit activities, with those reporting overpayments being less likely to have a sensory disorder (10 percent versus 19 percent for DI beneficiaries) and an intellectual disability (50 percent versus 62 percent for SSI beneficiaries). Blind beneficiaries are subject to a higher SGA level (\$2,190 in 2021, relative to \$1,310 for non-blind beneficiaries), which might contribute to a smaller percentage of those with sensory disorders experiencing overpayments.

Beneficiaries Experiencing Benefit Suspension

Similar to the likelihood of experiencing overpayments, there were differences between recently employed beneficiaries who did and did not experience a benefit suspension in terms of age and employment status (Table 3). Those reporting benefit suspensions were younger and more likely to be employed at the time of interview than other recently employed beneficiaries. Those who experienced recent benefit suspensions reported fewer difficulties with ADLs and IADLs than other recently employed beneficiaries (Table 3). About 54 percent of DI and 58 percent of SSI beneficiaries with suspensions reported no ADL/IADL difficulties compared with 38 and 43 percent, respectively, of all recently employed beneficiaries. The two groups were similar in terms of general health and reasons for limitation, though SSI recipients with a recent benefit suspension were less likely to have a musculoskeletal condition than other recently employed recipients (3 percent versus 8 percent). The likelihood of benefit suspension did not differ significantly between recently employed beneficiaries in either program who did and did not report their employment to SSA when they began working.

A large share of those who experienced a benefit suspension were employed at interview (79 percent and 70 percent of DI and SSI beneficiaries, respectively), and a large share of those resuming benefits after suspension also were employed (66 percent and 54 percent of DI and SSI beneficiaries, respectively) (Table 3). Beneficiaries resuming benefits in both programs were more likely to be non-White and had been participating in the disability programs for a longer period of time compared with others who experienced a benefit suspension. There were also differences in education level in both programs; beneficiaries resuming benefits were less likely to have a college degree. DI beneficiaries resuming benefits were less likely to report being able to perform their pre-disability job. Among SSI recipients, beneficiaries resuming benefits were

less likely to be of Hispanic ethnicity, more likely to report difficulties with ADLs or IADLs, and more likely to be ages 26–40 and less likely to be ages 41–55, relative to those who did not resume benefits. Those resuming benefits after a suspension in both programs were also more likely to report a psychiatric condition and to be in poor or very poor health compared with others who experienced a suspension and were less likely to report no limiting conditions (Table 3).

Among Those Experiencing Benefit Suspensions, What Share Expected Them?

Among beneficiaries experiencing a recent benefit suspension, more than half said that at the time they started working or earning more, they knew they would stop receiving cash disability benefits from Social Security (Appendix Table A1). This percentage was larger among DI beneficiaries (63 percent) than among SSI recipients (54 percent). The percentage that expected the benefit suspension varied somewhat by personal characteristics. In both programs, those with a college degree (77 percent) and those who did not complete high school (77 percent and 66 percent among DI and SSI beneficiaries, respectively) were more likely to anticipate the benefit suspension, relative to others, as were those whom SSA categorized as medical improvement expected (84 percent and 68 percent, respectively). Beneficiaries in both programs requiring assistance with at least one ADL or IADL were among the least likely to expect the benefit suspension (49 percent), as were non-White SSI recipients and those with psychiatric conditions (47 percent). Among DI beneficiaries, the youngest age group was more likely than older beneficiaries to expect benefits to stop, but the opposite was true among SSI recipients. In both programs, those who reported their employment to SSA when they started working were substantially more likely to anticipate the benefit suspension.

How Aware Are Beneficiaries about SSA Work Supports and Provisions?

Most recently employed DI beneficiaries had heard of the trial work period (51 percent) and were aware of the SGA rule, that is, that working above SGA for more than nine months could lead to a loss of DI benefits (63 percent), but just under one-third (30 percent) had heard of the extended period of Medicare eligibility (Table 4).⁴ Relative to DI beneficiaries, recently employed SSI recipients appeared less aware of key SSI provisions; fewer than one in five had

⁴ Appendix Table A2 lists the NBS questions about awareness of SSA provisions on which the statistics in this paper are based.

heard of the \$1 for \$2 earnings exclusion (19 percent) and Section 1619(b) continued Medicaid coverage. Relative to the awareness rates of the specific Medicare and Medicaid provisions, a larger percentage of beneficiaries in both programs said they knew they could keep their public health insurance after losing their cash benefits (39 percent). Nearly half of all recently employed beneficiaries (47 percent) had heard of Ticket to Work and about 29 percent had heard of benefit specialist services. Awareness rates were lowest for the impairment-related and blind work expense provisions and SSI plans for achieving self-support (13 percent each).

Relative to other recently employed beneficiaries, those with overpayment and benefit suspension experiences were more likely to have heard about several SSA work incentives, including the trial work period (61 percent and 68 percent, respectively), Ticket to Work (61 percent and 66 percent, respectively), and the ability to keep health insurance after benefit loss (53 percent and 58 percent, respectively) (Table 4). They were also more likely to have heard of the specific Medicare and Medicaid provisions. Anticipation of benefit suspension was positively correlated with awareness of nearly all work supports queried; the awareness rates of all provisions except one were significantly higher among those who said they had anticipated their benefit suspension than among those who said they had not. The exception was the plan for achieving self-support; awareness of this provision was low for both groups and did not differ statistically.

Awareness of the key provisions related to working and retaining cash benefits and health insurance varied by other beneficiary characteristics (Appendix Table A3). Among recently employed DI beneficiaries, awareness of the SGA rule was lowest (45 percent or less) among young beneficiaries (ages 18–25), Hispanic and Latino beneficiaries, and those with intellectual disability, and was highest (72 percent or more) among recent awardees and those with a college degree. Awareness of the \$1 for \$2 earnings exclusion was also relatively lower among young beneficiaries and higher among SSI recipients with a college degree. Those with a musculoskeletal condition and those designated by SSA as medical improvement expected were least aware of the SSI earnings exclusion provision (5 percent or less). DI and SSI beneficiaries had similar patterns for awareness of the ability to retain health insurance after cash benefits cease, although the rates among DI beneficiaries were substantially higher than among SSI recipients. In both programs, Hispanic and Latino beneficiaries and those with a sensory disorder had relatively high rates of awareness of the health insurance rules, whereas

beneficiaries with intellectual and musculoskeletal disabilities had relatively low rates. Those who reported their employment to SSA after starting work had substantially higher awareness rates of all key provisions relative to those who did not report their employment.

Do Beneficiaries Who Experience Overpayments Report Changing Their Employment in Response?

Most beneficiaries reported not changing their employment effort in response to an earnings-related overpayment (Table 5).⁵ About 24 percent of DI beneficiaries and 13 percent of SSI recipients reported changing their employment in response to an overpayment. Most who experienced an overpayment were employed at the time of interview (81 percent of DI and 74 percent of SSI beneficiaries).

Do Beneficiaries Who Experience a Benefit Suspension Resume or Plan to Resume Benefits? If So, Why?

Resumption of Benefits After Suspension

About half of beneficiaries who had a recent benefit suspension had resumed or were in the process of resuming benefits at the time of the interview (Table 5). Among those who had resumed or were in the process of resuming benefits, more than half were employed at interview (66 percent of DI beneficiaries and 52 percent of SSI recipients, authors' calculations not shown). Similar percentages planned to earn enough to leave benefits again in the future (51 percent of DI beneficiaries and 64 percent of SSI recipients) (Table 6).

Reasons for Resuming Benefits

Among beneficiaries resuming benefits, the majority cited a health-related reason and smaller shares reported job-related or personal reasons for returning to benefits (Figure 1). Beneficiaries were asked whether they returned to benefits because of their health, job, or personal circumstances, and could choose multiple reasons or none of them. Nearly three-quarters of DI beneficiaries (73 percent) cited a health-related reason; about one in five reported a job-related reason (16 percent) or a personal circumstance (21 percent). Most of those who

⁵ The NBS public use file does not include information about the direction of the employment change, only information about whether a respondent reported changing work effort in response to an overpayment.

cited a job-related reason or personal circumstance also cited a health-related reason (74 percent; not shown); 20 percent of DI beneficiaries did not respond affirmatively to any of the three reasons queried. Relative to DI beneficiaries, SSI recipients were less likely to report health-related reasons for returning to benefits and more likely to report job-related and personal reasons. About one-half (56 percent) cited a health-related reason and between one-quarter and one-third reported job-related reasons (28 percent) or personal circumstances (30 percent). One-quarter of SSI recipients who were resuming or had resumed benefits did not report any of the reasons.

Beneficiaries were asked what specifically about their health, job, or personal circumstances might have caused them to work less or stop working.⁶ The reasons for resuming benefits varied, but the distributions were similar across programs (Table 6). About one-third of beneficiaries reported an existing health problem getting worse (31 and 32 percent of DI and SSI beneficiaries, respectively). Between 5 and 15 percent of beneficiaries reported health interfering with job performance, needing time for medical appointments/hospitalizations, and new health problems. Similarly small shares of beneficiaries in both programs reported the potential loss of benefits, low pay, or stressful work as reasons for resuming benefits. Less than 5 percent reported other reasons, including lack of transportation, child care, personal assistance, or stamina for work.

The NBS queried beneficiaries whose benefits remained suspended and who were not seeking to resume them about health, job, and personal reasons they might need to resume benefits in the future (Table 6). Nearly half (44 and 55 percent of DI and SSI beneficiaries, respectively) did not report that any of the three reasons queried would prompt a return to benefits. Among those who indicated one of the three reasons might prompt a resumption of benefits, the distribution of the specific reasons was similar to those who had resumed or were resuming benefits, with health reasons being most common. However, the non-health reasons reported were substantially less prevalent and varied.

⁶ Open-ended responses were back-coded. Some beneficiaries might have reported a specific health-related reason despite not reporting in a previous question that health was a reason they returned to benefits.

Is Awareness of Key SSA Work Incentives Correlated with Benefit Suspension, Anticipation of Suspension, and Resumption of Benefits After Suspension?

Beneficiaries aware of key provisions governing earnings might be more likely to risk working at levels that suspend benefits because they know they will not lose health insurance and anticipate the benefit suspensions; they may be less likely to resume benefits after a suspension because they are not surprised by the loss of cash benefits. To test whether awareness of the provisions related to retention of health insurance and cash benefits was associated with the likelihood of these events, we estimated regression models predicting benefit suspension outcomes, including variables representing awareness of (1) the ability to keep health insurance after benefit loss, (2) the DI SGA rule, and (3) the SSI \$1 for \$2 earnings exclusion (Appendix Table A4). We believe these provisions to be the most relevant to beneficiary concerns about benefit loss and the rules governing the calculation of benefits.

After controlling for other personal characteristics, awareness of the ability to retain health insurance after cash benefits cease is positively associated with a likelihood of experiencing a benefit suspension among recently employed DI beneficiaries that is twice the rate of those unaware of the provision. Among recently employed SSI recipients, those aware of the health insurance provision had a 50 percent greater likelihood of experiencing a benefit suspension than among their unaware peers (Figure 2). Awareness of the SGA rule and \$1 for \$2 earnings exclusion provisions was not associated with the likelihood of a benefit suspension. The positive association between awareness of the health insurance provisions and the likelihood of a benefit suspension suggests that knowing that one can maintain health insurance after cash benefits cease might prompt some beneficiaries to earn at levels that suspend benefits. But it also could be because beneficiaries who experience a benefit suspension become knowledgeable about the provisions as a result of experiencing the suspension and seeing that they do not lose their health insurance.

One would expect that working beneficiaries aware of the key provisions related to the impact of earnings on benefits would be more likely to anticipate when a benefit suspension might occur. We found this was true among DI beneficiaries but not among SSI recipients. Among DI beneficiaries, awareness of the SGA rule was associated with a substantially greater likelihood of anticipating suspension (38 percentage points greater after controlling for other characteristics) (Appendix Table A4). Knowledge of the \$1 for \$2 earnings exclusion was not

associated with anticipating a suspension among SSI recipients. Among both DI and SSI beneficiaries, awareness of the ability to maintain public health insurance was positively associated with anticipating a benefit suspension.

Finally, we tested whether awareness of the three key provisions was associated with resuming benefits after suspension. This might be the case if lack of awareness and fear of losing benefits prompted some beneficiaries to limit their work activity and resume cash benefits because the loss was unexpected. Among both DI and SSI beneficiaries, we found no relationship between awareness of key provisions and resumption of benefits (Appendix Table A4).

Is Awareness of Earnings-Related Provisions and Anticipation of a Benefit Suspension Correlated with Overpayments and Benefit Resumption?

If beneficiaries are aware of how SSA considers earnings in the benefit calculations, they might be more likely to report their earnings to SSA as they accrue, in an effort to avoid overpayments. Among those who are overpaid, lack of awareness of the provisions might prompt changes to employment in response to the overpayment out of a fear of benefit loss and unexpectedly experiencing it. To test whether awareness of the provisions related to retention of cash benefits was associated with the likelihood of experiencing an overpayment and a change in work effort after an overpayment, we estimated regression models predicting those outcomes. The models include variables representing awareness of (1) the DI SGA rule and (2) the SSI \$1 for \$2 earnings exclusion (Appendix Table A5). After controlling for other personal characteristics, awareness of these provisions was not associated with the likelihood of experiencing an overpayment among all recently employed beneficiaries. There also was no association between awareness of the cash benefit provisions and employment changes in response to an overpayment.

Among those who experienced a benefit suspension—the group most at risk of an overpayment—we found that anticipating the suspension was negatively associated with experiencing an overpayment as well as with resuming benefits after a suspension (Appendix Table A6). Among DI beneficiaries, anticipating the suspension was associated with a 12-percentage point lower likelihood of experiencing an earnings-related overpayment, but was not associated with resuming benefits after controlling for other characteristics. Among SSI

recipients, the opposite was true; anticipating a suspension was associated with an 11-percentage point lower likelihood of benefit resumption but was not associated with the likelihood of experiencing an overpayment.

Discussion

Summary of Key Findings

We found differences in benefit suspension rates by age, education, race, ethnicity, and health status. To some extent, the differences reflect factors that contribute to the capacity to work and earn at higher levels:

- Younger beneficiaries and those in better health had relatively higher rates of benefit suspension and lower rates of resuming benefits after suspension. Relative to people with other health conditions, those with psychiatric conditions were much more likely to resume benefits after a suspension.
- Non-White DI beneficiaries and those without a high school diploma or equivalent in both programs were more likely to experience a benefit suspension. This is somewhat surprising because individuals in these groups typically have lower earnings. However, after controlling for other characteristics, race and education were not significant predictors of benefit suspension among recently employed beneficiaries.

Although we found generally low rates of awareness of key SSA work incentives among recent workers and those experiencing a benefit suspension, awareness of key provisions was positively associated with the likelihood of benefit suspension and of anticipating a benefit suspension, after controlling for other personal characteristics.

- Awareness of the provisions allowing beneficiaries to maintain public health insurance after losing cash benefits was associated with markedly higher rates of benefit suspension, all else held constant. This awareness was lowest among those with an intellectual disability in both programs, as well as among SSI recipients with musculoskeletal disorders.

- In the DI program, awareness of the SGA rule was low among Hispanic and Latino beneficiaries and those with an intellectual disability.
- In the SSI program, awareness of the \$1 for \$2 earnings exclusion was low among all subgroups analyzed; only those with a college education had a rate that was greater than about 25 percent.
- Recent workers who did not report their employment to SSA had markedly lower rates of awareness of the key provisions relative to those who reported their employment.

About half of all beneficiaries with SSA-suspended benefits had resumed or were in the process of resuming benefits at the time of the NBS interview. Nonetheless, a majority of these beneficiaries were employed, though not necessarily above the SGA level. Awareness of key SSA provisions was not associated with resuming benefits after a suspension. Although beneficiaries reported a variety of reasons for returning to benefits, health-related reasons were by far the most common.

The likelihood of experiencing an overpayment was relatively higher among some subgroups of beneficiaries, including DI beneficiaries of Hispanic and Latino ethnicity and SSI recipients with sensory disorders. Although beneficiaries aware of key provisions were more likely to report their employment to SSA, after controlling for other personal characteristics, awareness of earnings-related provisions was not associated with the likelihood of overpayment or changes in employment after experiencing an overpayment. However, among those who experienced a benefit suspension, anticipating the suspension was associated with a smaller likelihood of experiencing a DI overpayment, as well as a smaller likelihood of resuming benefits among SSI recipients.

The findings suggest that beneficiary awareness of key SSA rules governing the treatment of earnings is associated with benefit suspension and overpayments. Although it is difficult to disentangle the direction of the relationships because the survey data do not tell us whether beneficiaries became aware of key provisions before or after they experienced a suspension or overpayment, the data provide some evidence of the role of awareness before these events occur through the information we have on beneficiaries' anticipation of a suspension. The findings suggest that awareness of key provisions, particularly those related to maintaining

health insurance, might prompt some beneficiaries to risk the loss of cash benefits by increasing their earnings. Awareness of the provisions helps beneficiaries anticipate that SSA will suspend their cash benefits when their earnings reach a certain level; anticipation of a suspension, along with being more aware of the program rules, is associated with a greater likelihood of reporting employment to SSA and a smaller likelihood of experiencing an overpayment.

Study Limitations

The results in this analysis are nationally representative of SSI and DI beneficiaries. However, the data and findings have two key limitations. First, the information on suspensions and overpayments are self-reported and subject to potential biases that may cause self-reported experiences to differ from actual suspensions or overpayments. Second, the study provides descriptive evidence of an association between awareness of SSA work provisions and benefit suspensions, but causation and the direction of any relationships cannot be determined because the timing of awareness and overpayment or suspension events is unclear: some beneficiaries may become aware of work provisions after their benefits are suspended, others might experience a benefit suspension in part because knowledge of work supports prompted them to earn at levels that suspend benefits. Although anticipation of a benefit suspension is also self-reported and subject to potential recall bias, it sheds some light on the direction of the relationships between knowledge and overpayment and suspension. We found that awareness was positively associated with anticipating a benefit suspension, and anticipating a suspension was negatively associated with experiencing an overpayment as well as with resuming benefits after a suspension.

Implications of the Findings

The findings suggest that improving knowledge of the SSA provisions governing earnings among beneficiaries who are working or want to work might prompt more beneficiaries to work at levels that result in benefit suspension, anticipate those suspension, and take actions that reduce the likelihood they will incur an overpayment. Knowledge of the health insurance provisions seems particularly relevant in prompting beneficiaries to earn at levels that suspend benefits. This is not surprising given the importance of health insurance to people with disabilities, the finding that many beneficiaries resume benefits because of health reasons, and

the qualitative evidence that some beneficiaries working above SGA are fearful of losing their public health insurance. Targeting information and making it more accessible to subgroups with relatively high rates of overpayments, such as working beneficiaries of Hispanic and Latino ethnicity, might improve earnings reporting and reduce the likelihood of overpayments.

The high rate of return to benefits after a suspension suggests an opportunity to intervene. Most beneficiaries who resumed or were in the process of resuming benefits were still working when they were interviewed. Such beneficiaries might be able to resume their higher earnings with support. However, it is unclear what type of supports would be effective. The majority of those who resumed benefits did so because of a worsening health condition or because their health interfered with their job performance. Those with psychiatric conditions were particularly likely to return to benefits. The types of supports and accommodations needed are likely to vary substantially depending on the specific health issue and the individual's occupation. Thus, any intervention to help beneficiaries remain working and off of benefits would need to be highly individualized.

SSA is involved in several initiatives that could shed light on the types of health-related supports that are effective in helping people with disabilities remain attached to the labor force and remain off of benefits. SSA's Supported Employment Demonstration is testing whether providing integrated vocational, medical, and behavioral health services to people with mental health conditions who recently applied for DI or SSI can reduce reliance on disability benefits and help them become or remain employed. In partnership with the U.S. Department of Labor, SSA is evaluating the Retaining Employment and Talent after Injury/Illness Network (RETAIN) demonstration. RETAIN is testing early interventions that coordinate health care and employment supports to help workers stay at work or return to work quickly after experiencing the onset of a work-threatening injury, illness, or disability. Finally, SSA is planning to conduct a study of beneficiaries who exit the disability programs because of medical improvement. Like those who exit because of earnings, a large share of those who leave because of medical improvement return to benefits (Hemmeter and Stegman 2013, Anderson et al. forthcoming). The study will explore the reasons why they return and the types of supports that might help them succeed in remaining off of benefits. Lessons from all of these initiatives could inform policies and interventions aimed at helping beneficiaries who leave the disability programs because of earnings remain off of benefits.

Earnings-related overpayments and benefit suspensions can be disruptive to beneficiaries and expensive to SSA. Future research could examine the characteristics of those who resume their benefits after an earnings-related benefit suspension to better understand the health conditions, job characteristics, health insurance status, and needs of this group, as well as any accommodations they require. Understanding their circumstances alongside the reasons they report for returning to benefits might yield further insights about the types of supports that could help them to both remain employed and avoid experiencing an overpayment.

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Table 1. *Sample Sizes and Reported Rates of Recent Employment,^a Overpayment, and Benefit Suspension*

	All	Recent employment		Recent worker experiencing an earnings-related overpayment		Recent worker experiencing an earnings-related benefit suspension	
		Yes	No	Yes	No	Yes	No
All							
Unweighted number	8,589	5,372	3,217	2,238	3,134	2,281	3,091
Weighted number (1000s)	12,887	1,909	10,978	305	1,604	245	1,663
Weighted % of full sample	100.0	14.8	85.2	2.4	12.4	1.9	12.9
Weighted % of all recently employed	-	100.0	-	16.0	84.0	12.9	87.1
DI							
Unweighted number	5,736	3,774	1,962	1,353	2,421	1,488	2,286
Weighted number (1000s)	9,353	1,360	7,993	186	1,174	149	1,211
Weighted % of full sample	72.6	10.6	62.0	1.4	9.1	1.2	9.4
Weighted % of all recently employed	-	71.2	-	9.7	61.5	7.8	63.5
Weighted % of recently employed DI	-	100.0	-	13.7	86.3	10.9	89.1
SSI							
Unweighted number	4,592	2,723	1,869	1,403	1,320	1,231	1,492
Weighted number (1000s)	5,395	873	4,522	192	681	134	738
Weighted % of full sample	41.9	6.8	35.1	1.5	5.3	1.0	5.7
Weighted % of all recently employed	-	45.7	-	10.1	35.7	7.0	38.7
Weighted % of recently employed SSI	-	100.0	-	22.0	78.0	15.4	84.6

^a Recent employment = employed at interview, worked in past six months, or worked in the calendar year before interview (2016).

Note: Beneficiaries concurrently eligible for DI and SSI are included in statistics for both programs.

Source: 2017 National Beneficiary Survey, weighted data.

Table 2. *Characteristics of Recently Employed Beneficiaries,^a by Overpayment Experience*

	DI				SSI			
	All recently employed	Overpayment		<i>p</i> -value ^b	All recently employed	Overpayment		<i>p</i> -value ^b
Yes		No	Yes			No		
Male (%)	53.5	46.2	54.7		59.7	50.1	62.4	*
Age in years (%)				*				*
18-25	3.3	4.1	3.1		21.8	20.3	22.2	
26-40	26.3	33.5	25.1		34.6	48.0	30.9	
41-55	36.2	43.8	35.0		26.3	24.1	26.9	
56 and older	34.2	18.5	36.7		17.3	7.6	20.0	
Nonwhite (%)	34.3	35.1	34.2		46.7	42.0	48.0	
Hispanic or Latino (%)	1.0	2.3	0.8		4.2	4.0	4.2	
Highest grade (%)				*				
No HS or equivalent	12.2	7.9	12.8		15.3	20.0	14.0	
HS or equivalent	46.0	47.7	45.7		48.1	49.3	47.7	
Some college	21.9	31.9	20.4		28.6	20.5	30.9	
4-year degree or higher	15.2	10.4	16.0		5.6	7.2	5.2	
Other	4.7	2.2	5.1		2.4	3.0	2.2	
Years since initial SSA award (%)				*				**
Fewer than 5	19.4	7.7	21.2		12.9	7.0	14.6	
5 to 10	24.5	20.0	25.2		24.4	18.2	26.2	
More than 10	56.1	72.4	53.5		62.7	74.8	59.2	
Unknown	0.0	0.0	0.0		0.0	0.0	0.0	
Benefit levels (%)				**				***
\$0	10.2	35.0	6.3		15.1	30.2	10.8	
\$1-\$500	4.2	6.9	3.8		19.6	22.9	18.6	
\$501-\$1300	57.9	42.0	60.4		64.3	46.0	69.5	
\$1301 or more	27.7	16.2	29.5		1.0	1.0	1.0	

	DI				SSI			
	All recently employed	Overpayment			All recently employed	Overpayment		
		Yes	No	<i>P</i> -value ^b		Yes	No	<i>P</i> -value ^b
Mean benefit (\$)	1,054	638	1,120		569	412	613	
Has representative payee (%)	29.3	38.4	27.8		54.9	53.1	55.4	
Employed at interview (%)	69.0	80.6	67.2	**	56.4	73.4	51.6	***
Self-reported reason for limitation (%)								
Psychiatric condition	24.9	22.8	25.2		30.5	31.5	30.2	
Intellectual disability	3.9	3.3	4.0		7.5	6.6	7.7	
Musculoskeletal condition	17.6	9.7	18.8		7.7	5.9	8.3	
Sensory disorder	3.7	2.7	3.8		1.8	3.6	1.2	
Other	31.3	33.0	31.0		25.0	19.5	26.6	
No condition limits activities	18.7	28.5	17.1		27.5	33.0	25.9	
General Health (%)								
Excellent/very Good	16.8	20.1	16.3		33.4	34.7	33.0	
Good/fair	57.8	59.7	57.6		51.1	55.2	50.0	
Poor/very poor	25.3	20.2	26.1		15.5	10.0	17.0	
Difficulty with ADL (%)^c								
Getting into or out of bed	25.7	18.6	26.8	*	10.6	8.6	11.2	
Bathing or dressing	17.9	10.2	19.1	**	12.1	6.4	13.7	**
Getting around inside of home	13.3	6.8	14.4	**	4.5	2.1	5.2	
Eating	9.2	8.6	9.3		14.6	7.2	16.7	**
None of the above	62.6	73.1	60.9	**	73.0	82.4	70.3	**
Difficulty with IADL (%)^c								
Getting around outside of home	36.5	38.4	36.2		41.8	38.3	42.8	
Shopping for personal items	20.8	23.3	20.4		23.2	22.5	23.4	
Preparing meals	30.4	27.8	30.8		23.3	27.4	22.1	
None of the above	52.9	54.7	52.6		52.0	52.4	51.9	

	DI				SSI			
	All recently employed	Overpayment			All recently employed	Overpayment		
		Yes	No	<i>p</i> -value ^b		Yes	No	<i>p</i> -value ^b
Number of ADL/IADL difficulties (%)								
0	39.3	42.3	38.8		45.6	46.2	45.5	
1-2	35.7	32.0	36.3		32.4	34.3	31.8	
3 or more	25.1	25.8	24.9		22.0	19.4	22.7	
Self-reported ability to perform pre-disability job (%)	16.4	19.2	16.0		34.0	24.5	36.0	
Medical improvement (%)								*
Expected	3.8	2.5	4.0		3.2	1.5	3.7	
Possible	39.2	44.0	38.4		45.3	45.4	45.3	
Not expected	41.9	39.2	42.4		32.3	28.3	33.4	
Missing	15.1	14.3	15.2		19.1	30.8	14.1	
Reported employment to SSA^c	78.5	84.4	77.4		71.5	79.5	68.7	*

^a Recent employment = employed at interview, worked in past six months, or worked in the calendar year before interview (2016).

^b Chi-square significance is shown in the variable heading row. T-test significance is shown in each applicable variable row. * Indicates $p < 0.10$, ** indicates $p < 0.05$, and *** indicates $p < 0.01$. Blank columns indicate a *p*-value that is not significant at the $p < 0.10$ level.

^c Multiple responses possible.

^d Statistics include only those who were employed at interview or worked in past 6 months; computations exclude 155 recently employed beneficiaries who worked only in the calendar year before interview to whom the survey question was not posed.

Note: ADL=activity of daily living; HS=high school; IADL=instrumental activity of daily living; SGA=substantial gainful activity.

Source: 2017 National Beneficiary Survey, weighted data.

Table 3. *Characteristics of Recently Employed Beneficiaries,^a by Benefit Suspension and Resumption Experience*

	DI						SSI					
	Benefit suspension			Resuming benefits after suspension			Benefit suspension			Resuming benefits after suspension		
	Yes	No	<i>p</i> -value ^b	Yes	No	<i>p</i> -value ^b	Yes	No	<i>p</i> -value ^b	Yes	No	<i>p</i> -value ^b
Unweighted number	1,488	2,286		641	847		1,231	1,492		568	663	
Weighted number (1000s)	149	1,211		80	68		134	738		64	71	
Male (%)	49.3	54.1		46.0	53.3		54.1	60.7		46.0	52.4	
Age in years (%)			**						***			***
18-25	4.7	3.1		5.7	3.6		19.2	22.3		18.8	19.6	
26-40	37.7	24.9		38.2	37.1		53.5	31.2		64.2	44.0	
41-55	45.7	35.1		46.9	44.3		23.5	26.8		13.8	32.2	
56 and older	11.9	37.0		9.2	15.0		3.8	19.7		3.2	4.2	
Nonwhite (%)	43.7	33.1		54.9	30.6	**	49.2	46.2		59.9	39.6	**
Hispanic or Latino (%)	1.0	1.0		0.8	1.3		4.9	4.0		2.4	7.2	*
Highest grade (%)						***						**
No HS or equivalent	18.8	11.3		28.7	7.2		19.2	14.6		18.4	19.9	
HS or equivalent	34.5	47.4		34.6	34.3		44.3	48.7		47.3	41.6	
Some college	27.3	21.3		22.0	33.6		24.8	29.3		26.0	23.7	
4-year degree or higher	17.5	15.0		11.3	24.8		9.6	4.9		3.9	14.7	
Other	1.9	5.0		3.4	0.1		2.1	2.4		4.4	0.1	
Years since initial SSA award (%)						**						**
Fewer than 5	18.1	19.5		11.7	25.6		12.1	13.0		11.7	14.7	
5 to 10	26.2	24.3		24.2	28.6		22.6	24.8		16.3	28.3	
More than 10	55.7	56.1		64.1	45.8		65.3	62.2		74.5	57.0	
Unknown	0.0	0.0		0.0	0.0		0.0	0.0		0.0	0.0	

	DI						SSI					
	Benefit suspension			Resuming benefits after suspension			Benefit suspension			Resuming benefits after suspension		
	Yes	No	<i>P</i> -value ^b	Yes	No	<i>P</i> -value ^b	Yes	No	<i>P</i> -value ^b	Yes	No	<i>P</i> -value ^b
Monthly SSA benefit (%)			**			***			***			***
\$0	58.6	4.3		43.9	75.8		53.2	8.2		25.0	78.7	
\$1-\$500	3.7	4.3		3.9	3.4		15.9	20.2		20.0	12.2	
\$501-\$1300	30.7	61.2		41.7	17.8		30.6	70.4		54.6	9.0	
\$1301 or more	7.0	30.2		10.4	3.0		0.2	1.2		0.4	0.0	
Mean benefit (\$)	419	1,132		586.6	223.5		258	626		437.6	223.5	
Has representative payee (%)	23.3	30.0		25.2	21.0		45.6	56.6	**	48.3	43.2	
Employed at interview (%)	79.2	67.8	**	66.3	94.3	**	70.3	53.8	***	52.0	86.7	**
Self-reported reason for limitation (%)						***						***
Psychiatric condition	34.7	23.7		50.3	16.3		34.5	29.8		50.5	20.2	
Intellectual disability	2.2	4.1		2.0	2.6		3.1	8.3		3.5	2.8	
Musculoskeletal condition	13.6	18.0		11.8	15.7		7.8	7.7		3.9	11.3	
Sensory disorder	2.3	3.9		1.8	2.9		4.2	1.3		4.7	3.9	
Other	27.2	31.8		26.1	28.6		20.7	25.8		20.9	20.6	
No condition limits activities	19.9	18.5		8.1	33.9		29.6	27.1		16.7	41.2	
General health (%)						*						**
Excellent/very Good	20.1	16.4		13.0	28.5		37.3	32.7		26.3	47.3	
Good/fair	61.4	57.4		64.8	57.5		47.2	51.9		54.2	41.0	
Poor/very poor	18.5	26.2		22.2	14.1		15.4	15.5		19.6	11.7	

	DI						SSI					
	Benefit suspension			Resuming benefits after suspension			Benefit suspension			Resuming benefits after suspension		
	Yes	No	<i>P</i> -value ^b	Yes	No	<i>P</i> -value ^b	Yes	No	<i>P</i> -value ^b	Yes	No	<i>P</i> -value ^b
ADL difficulties (%)^c												
Getting into or out of bed	21.5	26.2		19.9	23.4		8.4	11.0		7.1	9.5	
Bathing or dressing	11.8	18.7	*	12.0	11.7		4.4	13.5	**	5.8	3.1	
Getting around inside of home	11.1	13.6		12.4	9.5		3.6	4.6		4.9	2.4	
Eating	12.1	8.8		15.7	7.8		6.2	16.1	**	11.6	1.3	**
None of the above	70.1	61.6		70.6	69.5		84.8	70.8	**	81.6	87.8	
IADL difficulties (%)^c												
Getting around outside of home	27.9	37.6	*	30.3	25.1		29.4	44.0	**	40.7	19.3	**
Shopping for personal items	15.2	21.5		16.8	13.3		16.2	24.5		22.4	10.7	*
Preparing meals	18.1	31.9	**	18.6	17.5		15.8	24.6	**	20.4	11.7	
None of the above	68.1	51.0	**	66.1	70.3		63.0	50.0	**	52.5	72.4	**
Number of ADL/IADL difficulties (%)			**						**			***
0	53.8	37.5		50.7	57.6		58.1	43.4		46.4	68.6	
1-2	26.8	36.7		27.4	26.2		29.6	32.9		34.4	25.3	
3 or more	19.3	25.8		21.9	16.3		12.3	23.7		19.2	6.1	
Self-reported ability to perform pre-disability job (%)												
	37.8	13.9	*	25.8	47.6	**	31.4	34.4		22.8	40.8	

	DI						SSI					
	Benefit suspension			Resuming benefits after suspension			Benefit suspension			Resuming benefits after suspension		
	Yes	No	<i>p</i> -value ^b	Yes	No	<i>p</i> -value ^b	Yes	No	<i>p</i> -value ^b	Yes	No	<i>p</i> -value ^b
Medical improvement(%)			**						**			
Expected	5.2	3.6		3.5	7.0		1.3	3.6		1.6	1.1	
Possible	53.4	37.4		56.7	49.5		46.1	45.2		50.4	42.2	
Not expected	22.1	44.4		21.4	22.8		14.9	35.4		16.0	14.0	
Missing	19.4	14.6		18.3	20.7		37.7	15.8		32.1	42.7	
Reported employment to SSA (%)^d	84.1	77.7		81.8	86.7		79.7	69.8		81.3	78.5	

^a Recent employment = employed at interview, worked in past six months, or worked in the calendar year before interview (2016).

^b Chi-square significance is shown in the variable heading row. T-test significance is shown in each applicable variable row. * Indicates $p < 0.10$, ** indicates $p < 0.05$, and *** indicates $p < 0.01$. Blank columns indicate a *p*-value that is not significant at the $p < 0.10$ level.

^c Multiple responses possible.

^d Statistics include only those who were employed at interview or worked in past 6 months; computations exclude 155 recently employed beneficiaries who worked only in the calendar year before interview to whom the survey question was not posed.

Note: ADL=activity of daily living; HS=high school; IADL=instrumental activity of daily living; SGA=substantial gainful activity.

Source: 2017 National Beneficiary Survey, weighted data.

Table 4. *Awareness of SSA Work-Related Supports and Provisions among Recently Employed Beneficiaries^a*

	All recently employed	Recent overpayment			Recent benefit suspension			Anticipated benefit suspension		
		Yes	No	<i>p</i> -value ^b	Yes	No	<i>p</i> -value ^b	Yes	No	<i>p</i> -value ^b
Unweighted number	5,372	2,238	3,134		2,281	3,091		1,452	829	
Weighted number 1000s)	1,909	305	1,604		245	1,663		150	95	
Heard of DI provisions (%)										
Trial work period	51.3	61.4	49.7	*	68.3	49.2	***	84.6	40.1	***
Can lose benefits if working above SGA for more than 9 months	62.5	61.5	62.6		68.6	49.2		82.7	44.2	***
Extended period of Medicare eligibility	29.7	46.7	27.0	***	51.4	27.0	***	63.0	31.5	***
Heard of SSI provisions (%)										
\$1 for \$2 earnings exclusion	18.9	23.3	17.6		22.6	18.2		28.5	15.6	**
1619(b) continued Medicaid coverage	18.4	27.6	15.8	***	30.3	16.2	***	39.2	19.8	***
Plan for achieving self-support	12.5	14.9	11.9		15.0	12.1		18.7	10.6	
Heard of provisions applicable to both programs (%)										
Ticket to Work program	47.2	61.4	44.5	***	65.5	44.5	***	72.9	53.9	***
Impairment-related or blind work expenses	13.1	13.9	12.9		15.0	12.8		20.0	7.3	***
Benefit specialist services	29.3	34.7	28.3		43.1	27.3	***	53.9	26.1	***
Can keep public health insurance after losing cash benefits	38.6	53.2	35.8	***	57.8	35.7	***	70.1	38.6	***

^a Recent employment = employed at interview, worked in past six months, or worked in the calendar year before interview (2016).

^b Chi-square significance is shown in the variable heading row. T-test significance is shown in each applicable variable row. * Indicates $p < 0.10$, ** indicates $p < 0.05$, and *** indicates $p < 0.01$. Blank columns indicate a *p*-value that is not significant at the $p < 0.10$ level.

Note: Awareness rates computed among those for whom the provision was applicable based on SSI/DI status sampling.

Source: 2017 National Beneficiary Survey, weighted data.

Table 5. *Employment Response to Overpayment and Benefit Resumption Status After Suspension*

Recent overpayment	DI	SSI
Unweighted number	1,353	1,403
Weighted number (1000s)	186	192
Employment response to overpayment (%)		
Changed	24.2	13.2
Unchanged	75.8	86.8
Recent benefit suspension		
Unweighted number	1,488	1,231
Weighted number (1000s)	149	134
Benefit resumption status (%)		
Receiving cash benefits	30.5	34.6
Employed at interview	55.0	47.2
Not employed at interview	45.0	52.8
In process of getting back on cash benefits	23.5	12.9
Employed at interview	80.9	64.9
Not employed at interview	19.1	35.1
Cash benefits remain suspended	46.0	52.6
Employed at interview	94.3	86.7
Not employed at interview	5.7	13.3

Source: 2017 National Beneficiary Survey, weighted data.

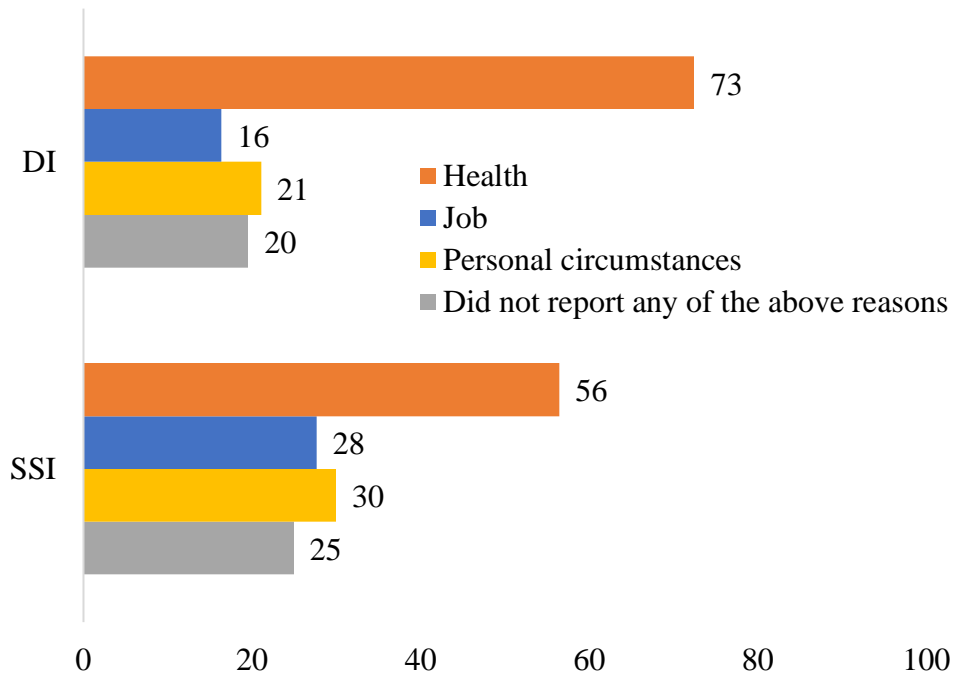
Table 6. *Reasons for Returning to Benefits*

Resumed or resuming benefits	DI	SSI
Unweighted number	641	568
Plans to earn enough to stay off benefits in the future (%)	50.9	64.4
Reason for returning to benefits (%)^a		
Health-related	72.5	56.5
Job-related	16.4	27.7
Personal circumstances	21.1	30.0
Did not report any of the above reasons	19.5	24.9
Specific reason for returning to benefits (%)^a		
Existing health problem gets worse	31.2	32.1
Health interferes with job performance	11.6	14.1
Might lose benefits	8.3	6.3
Need time for medical appointments	7.4	8.7
New health problem	6.2	5.8
Job does not pay enough	5.4	6.9
Work is too tiring or stressful	4.6	7.9
Need to be hospitalized	3.0	5.4
Lack reliable transportation to and from work	2.6	4.1
Need help caring for children or others	2.0	2.9
Lack the strength, physical energy, or stamina required to work	2.0	1.7
Benefits still in suspense		
Unweighted number	847	663
Reasons might return to benefits (%)^a		
Health-related	53.9	39.6
Job-related	10.0	7.1
Personal circumstances	8.9	12.2
Did not report any of the above reasons	44.0	55.5
Specific reason might return to benefits (%)^a		
Existing health problem gets worse	36.9	23.6
Health interferes with job performance	19.4	14.0
New health problem	4.9	4.6
Get injured	3.9	3.5
Lack the strength, physical energy, or stamina required to work	3.2	1.4
Health status fluctuates unpredictably	3.1	3.5
Need time for medical appointments	2.9	3.4
Work is too tiring or stressful	2.2	1.1
Lack reliable transportation to and from work	2.2	1.6
Job has a negative impact on health	1.3	2.4
Might lose benefits	1.1	3.0

^a Multiple responses possible.

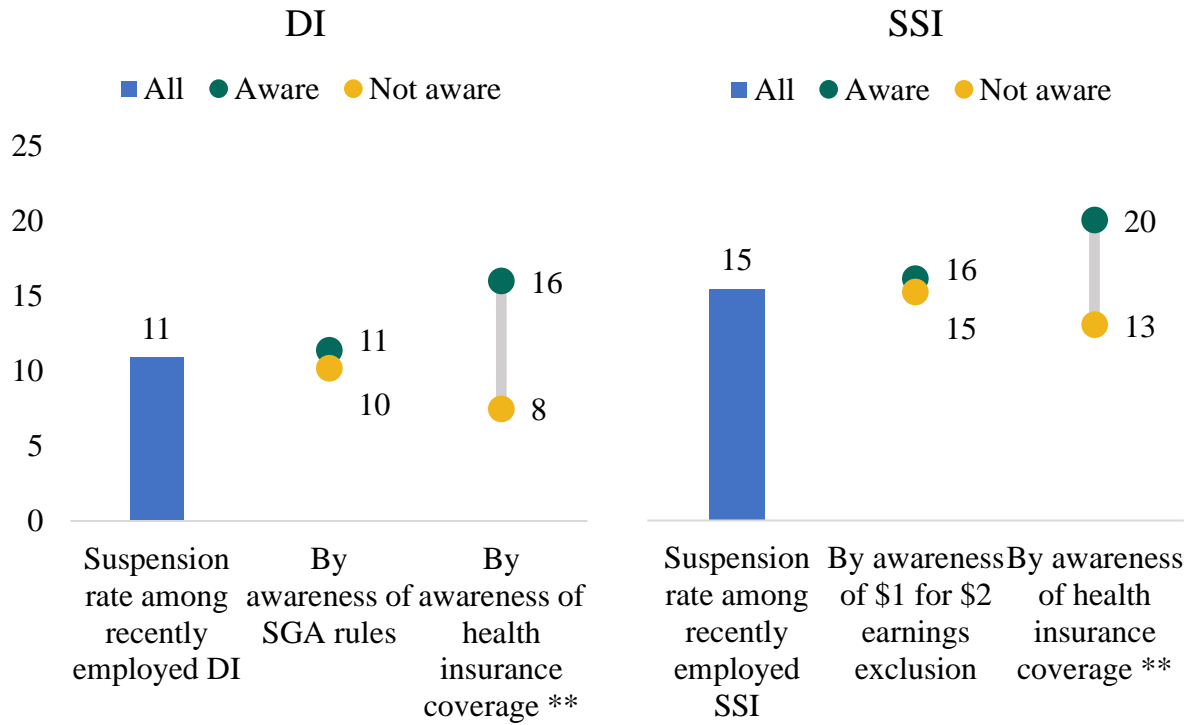
Source: 2017 National Beneficiary Survey, weighted data.

Figure 1. *Reasons for Returning to Benefits After a Recent Earnings-Related Suspension (%)*



Note: Multiple responses were possible. Totals can sum to more than 100 percent.
Source: 2017 National Beneficiary Survey, weighted data.

Figure 2. Regression-adjusted Benefit Suspension Rates (%) by Awareness of Key SSA Rules



Notes: Estimates are regression-adjusted for differences between those aware and not aware of programmatic rules in terms of sex, age, race, ethnicity, education, time on the disability rolls, impairment, functional limitations, and SSA’s expectation of medical improvement. * p<0.10, ** p < 0.05, *** p < 0.01.

Source: 2017 National Beneficiary Survey, weighted data.

Appendix Table A1. *Rates of Overpayment, Benefit Suspension, Anticipating Suspension, and Benefit Resumption among Recently Employed Beneficiaries,^a by Personal Characteristics and Program*

	DI				SSI			
	Percentage among those recently employed		Percentage among those with benefit suspension		Percentage among those recently employed		Percentage among those with suspension	
	Overpayment	Benefit suspension	Anticipated suspension	Resuming benefits	Overpayment	Benefit suspension	Anticipated suspension	Resuming benefits
All	13.7	10.9	63.3	54.0	22.0	15.4	54.2	47.4
Sex								
Male	11.8	10.1	61.4	50.3	18.5	14.0	53.8	49.1
Female	15.8	11.9	65.2	57.5	27.2	17.5	54.7	45.5
Age in years								
18-25	17.4	15.8	79.4	65.0	20.5	13.6	51.7	46.4
26-40	17.4	15.7	52.1	54.7	30.5	23.8	55.1	56.8
41-55	16.5	13.8	70.2	55.4	20.2	13.8	53.1	27.9
56 and older	7.4	3.8	66.2	41.9	9.6	3.4	61.4	40.8
Race								
Nonwhite	14.0	13.9	65.3	67.8	19.8	16.2	46.9	57.7
White	13.5	9.4	61.8	43.2	23.9	14.7	61.3	37.5
Ethnicity								
Hispanic or Latino	31.5	11.3	56.8	43.9	21.0	18.2	74.9	23.3
Not Hispanic or Latino	13.5	10.9	63.4	54.1	22.0	15.3	53.2	48.7
Highest grade								
No HS or equivalent	8.8	16.9	77.6	82.3	28.8	19.3	66.3	45.4
HS or equivalent	14.2	8.2	54.5	54.2	22.5	14.2	48.8	50.6
Some college	19.9	13.6	57.0	43.5	15.8	13.3	46.2	49.8
4-year degree or higher	9.3	12.6	77.4	34.8	28.2	26.2	77.6	19.3

	DI				SSI			
	Percentage among those recently employed		Percentage among those with benefit suspension		Percentage among those recently employed		Percentage among those with suspension	
	Overpayment	Benefit suspension	Anticipated suspension	Resuming benefits	Overpayment	Benefit suspension	Anticipated suspension	Resuming benefits
Years since initial SSA award								
Fewer than 5	5.4	10.2	61.4	34.9	11.9	14.4	71.5	36.1
5 to 10	11.1	11.7	69.9	49.9	16.4	14.2	53.8	34.2
More than 10	17.6	10.9	60.9	62.1	26.3	16.0	51.2	54.1
Self-reported reason for limitation								
Psychiatric condition	12.5	15.3	60.9	78.3	22.8	17.4	47.2	69.3
Intellectual disability	11.5	6.3	52.5	47.4	19.3	6.5	57.4	52.4
Musculoskeletal condition	7.5	8.5	58.9	46.8	16.7	15.5	80.8	23.6
Sensory disorder	10.0	6.9	60.0	42.3	45.0	36.8	68.5	52.1
Other	14.4	9.5	60.8	51.6	17.1	12.8	47.2	47.7
No condition limits activities	20.9	11.7	75.6	21.9	26.4	16.6	58.0	26.7
No ADL or IADL difficulties	14.7	15.0	70.3	50.8	22.3	19.6	59.3	37.9
Requires assistance with at least one ADL/IADL	12.5	8.0	49.1	61.7	21.5	11.9	48.6	58.4
Medical improvement								
Expected	8.9	14.9	84.4	37.1	10.4	6.4	68.2	55.5
Possible	15.3	14.9	64.3	57.3	22.0	15.6	48.7	51.9
Not expected	12.8	5.8	60.0	52.4	19.3	7.1	64.7	50.7
Missing	13.0	14.1	59.0	51.0	28.5	30.3	56.3	40.4

	DI				SSI			
	Percentage among those recently employed		Percentage among those with benefit suspension		Percentage among those recently employed		Percentage among those with suspension	
	Overpayment	Benefit suspension	Anticipated suspension	Resuming benefits	Overpayment	Benefit suspension	Anticipated suspension	Resuming benefits
Reported employment to SSA^b								
Yes	16.5	13.1	71.0	50.9	28.9	19.9	62.1	44.2
No	11.1	9.0	26.3	60.2	18.8	12.7	43.0	39.9

^a Recent employment = employed at interview, worked in past six months, or worked in the calendar year before interview (2016).

^b Statistics include only those who were employed at interview or worked in past 6 months; computations exclude 155 recently employed beneficiaries who worked only in the calendar year before interview to whom the survey question was not posed.

Note: ADL=activity of daily living; HS=high school; IADL=instrumental activity of daily living; SGA=substantial gainful activity.

Source: 2017 National Beneficiary Survey, weighted data.

Appendix Table A2. *Survey Questions About Awareness of SSA Program Rules and Supports*

Rule or support	Question from the <i>National Beneficiary Survey</i>
Trial work period (DI)	{Have you/Has NAME} ever heard of a Trial Work Period? This is a Social Security incentive that lets {you/beneficiaries} earn above \$840 per month for nine months without losing {your/their} benefits.
Can lose benefits if working above SGA for more than 9 months (DI)	Most people receiving Social Security disability benefits will lose their cash benefits if they work and earn more than \$1,170 in a month for more than nine months. Is this something {you/NAME} knew before today?
Extended period of Medicare eligibility (DI)	{Have you/Has NAME} ever heard of an Extended Period of Eligibility for Medicare? This is a Social Security incentive that lets {you/beneficiaries} keep Medicare coverage when {you/they} go to work, even if {your/their} benefits have stopped.
\$1 for \$2 earnings exclusion (SSI)	{Have you/Has NAME} ever heard of the earned income exclusion or the 1 for 2 earnings exclusion? This is a Social Security incentive where one-half of {your/a beneficiary's} earnings over \$85 are not counted when Social Security figures {your/the} benefit.
1619(b) continued Medicaid coverage (SSI)	{Have you/Has NAME} ever heard of Continued Medicaid Eligibility or 1619(b) coverage? This is a Social Security incentive that lets {you/beneficiaries} keep {your/their} Medicaid insurance after {you/they} go to work, even if {your/their} benefits have stopped.
Plan for achieving self-support (SSI)	{Have you/Has NAME} ever heard of a Plan for Achieving Self-Support or a PASS Plan? This is a Social Security incentive that lets {you/beneficiaries} set aside money to be used to help {you/them} reach a work goal. The money set aside does not affect {your/their} benefits.
Ticket to Work program	{Have you/Has NAME} ever heard of the Ticket to Work program?
Impairment-related or blind work expenses	{Have you/Has NAME} ever heard of exclusions for Impairment-Related Work Expenses or Blind Work Expenses? This is a Social Security incentive where the value of certain impairment-related items is not counted when figuring {your/a person's} benefits and eligibility.
Benefit specialist services	{Have you/Has NAME} ever heard of Work Incentive and Planning Assistance programs? These are local organizations that give beneficiaries information about Ticket to Work and other programs and help them understand how their Social Security benefits are affected by work.
Can keep public health insurance after losing cash benefits	Most people who start working and lose their disability benefits are able to keep their health insurance. Is this something {you/NAME} knew before today? OR had heard of Extended period of Medicare eligibility (if DI) OR had heard of 1619(b) continued Medicaid coverage (if SSI)

Appendix Table A3. *Awareness Rates of Key Provisions among Recently Employed Beneficiaries,^a by Selected Characteristics*

	DI		SSI	
	SGA rule	Can keep health insurance after losing cash benefits	\$1 for \$2 earnings exclusion	Can keep health insurance after losing cash benefits
All	62.5	41.0	18.9	34.3
Sex				
Male	62.5	44.6	18.9	34.9
Female	65.4	36.7	17.3	33.4
Age in years				
18-25	42.1	41.8	12.7	33.1
26-40	59.8	46.3	21.5	41.1
41-55	63.1	42.1	15.3	25.0
56 and older	65.8	35.6	26.8	36.4
Race				
Nonwhite	61.2	43.5	19.2	31.5
White	63.1	39.6	18.6	36.7
Ethnicity				
Hispanic or Latino	44.7	62.3	17.8	65.4
Not Hispanic or Latino	62.6	40.7	18.9	32.9
Highest grade				
No HS or equivalent	55.9	37.9	21.3	34.1
HS or equivalent	63.0	41.8	19.0	35.8
Some college	69.4	45.8	11.6	28.2
4-year degree or higher	71.5	35.7	44.6	58.8
Years since initial SSA award				
Fewer than 5	75.9	41.9	12.4	30.5
5 to 10	61.6	43.5	15.5	32.1
More than 10	58.2	39.5	21.5	35.9

	DI		SSI	
	SGA rule	Can keep health insurance after losing cash benefits	\$1 for \$2 earnings exclusion	Can keep health insurance after losing cash benefits
Self-reported reason for limitation				
Psychiatric condition	53.7	34.8	14.8	30.5
Intellectual disability	32.0	22.4	24.3	19.1
Musculoskeletal condition	66.8	31.1	5.3	19.6
Sensory disorder	53.9	76.1	23.7	52.6
Other	69.0	40.5	18.3	40.5
No condition limits activities	67.3	56.3	25.9	39.9
No ADL or IADL difficulties	69.4	51.5	18.2	37.7
Requires assistance with at least one ADL/IADL	55.9	31.8	20.6	33.0
Medical improvement				
Expected	66.5	32.4	3.6	12.5
Possible	60.6	41.4	17.7	36.9
Not expected	63.0	38.8	23.3	30.5
Missing	64.8	48.0	16.7	38.0
Reported employment to SSA^b				
Yes	67.8	43.7	22.4	42.3
No	45.4	25.1	12.1	26.8

^a Recent employment = employed at interview, worked in past six months, or worked in the calendar year before interview (2016).

^b Statistics include only those who were employed at interview or worked in past 6 months; computations exclude 155 recently employed beneficiaries who worked only in the calendar year before interview to whom the survey question was not posed.

Note: ADL=activity of daily living; HS=high school; IADL=instrumental activity of daily living; SGA=substantial gainful activity.

Source: 2017 National Beneficiary Survey, weighted data.

Appendix Table A4. *Regression Estimates of the Likelihood of Benefit Suspension Experiences among Recently Employed Beneficiaries^a*

	DI			SSI		
	Benefit suspension	Anticipated suspension	Resuming benefits	Benefit suspension	Anticipated suspension	Resuming benefits
Unweighted Number	3,563	1,425	1,425	2,598	1,175	1,175
Aware of key provisions						
Can keep health insurance after losing cash benefits	0.08**	0.13*	0.02	0.07**	0.23***	-0.05
SGA rule	0.01	0.38***	0.02	NA	NA	NA
\$1 for \$2 earnings exclusion	NA	NA	NA	0.01	0.13	0.05
Male	-0.01	0.00	0.06	-0.02	-0.05	0.06
Age in years						
26-40	-0.02	-0.24**	-0.16*	0.11**	0.08	0.05
41-55	-0.05	-0.19*	-0.22**	0.03	0.00	-0.17*
56 and older	-0.12*	-0.21*	-0.21**	-0.07	0.02	-0.05
Nonwhite	0.04	0.00	0.14***	0.03	-0.08	0.20***
Hispanic or Latino	-0.06	-0.07	-0.10	0.00	0.23*	-0.26**
Highest grade						
HS or equivalent	-0.08	-0.14	-0.13	-0.02	-0.10	-0.03
Some college	-0.03	-0.17*	-0.21**			0.01
4-year degree or higher	-0.01	0.01	-0.29***	0.09	0.02	-0.24***
Other	-0.04	0.09	0.33	0.04	-0.16	0.43**
Years since initial SSA award						
5 to 10 years	0.01	0.14*	0.10	-0.05	-0.12	-0.05
More than 10 years	0.00	0.05	0.16*	-0.05	-0.24**	0.15
Unknown	0.00	0.00	0.00	-0.13	0.00	0.00

	DI			SSI		
	Benefit suspension	Anticipated suspension	Resuming benefits	Benefit suspension	Anticipated suspension	Resuming benefits
Self-reported reason for limitation						
Psychiatric condition	0.03	-0.11	0.46***	-0.01	-0.00	0.32***
Intellectual disability	-0.01	0.12	-0.06	-0.07	0.17	0.06
Musculoskeletal condition	0.02	-0.14	0.26*	-0.01	0.17*	0.10
Sensory disorder	0.00	-0.14	0.19*	0.15	-0.04	0.47***
Other	-0.01	-0.10	0.31***	-0.05	-0.10	0.26***
No ADL or IADL difficulties	0.02	-0.07	-0.03	0.02	0.10	-0.20*
Requiring assistance with at least one ADL/IADL	-0.02	-0.18*	0.04	-0.03	0.01	-0.15
Medical improvement						
Expected	0.03	0.07	-0.04	-0.05	0.08	0.12
Possible	0.05*	-0.05	-0.02	0.03	-0.15	0.01
Missing	0.04	-0.09	-0.05	0.19***	-0.02	-0.11

^a Recent employment = employed at interview, worked in past six months, or worked in the calendar year before interview (2016).

Notes: ADL=activity of daily living; HS=high school; IADL=instrumental activity of daily living; NA=not applicable; SGA=substantial gainful activity. * p<0.10, ** p < 0.05, *** p < 0.01.

Source: 2017 National Beneficiary Survey, weighted data.

Appendix Table A5. *Regression Estimates of The Likelihood of an Overpayment and Changing Employment in Response among Recently Employed Beneficiaries^a*

	DI		SSI	
	Overpayment	Changed employment after overpayment	Overpayment	Changed employment after overpayment
Unweighted Number	3,563	1,291	2,598	1,333
Aware of key provisions				
SGA rule	-0.00	0.00	NA	NA
\$1 for \$2 earnings exclusion	NA	NA	0.04	0.04
Male	-0.02	-0.11*	-0.07	0.06
Age in years				
26-40	-0.01	0.06	0.07	0.09*
41-55	-0.03	0.13	-0.02	0.06
56 and older	-0.11	-0.08	-0.13*	-0.07
Nonwhite	0.01	0.13	-0.04	0.10
Hispanic or Latino	0.14	-0.30*	-0.00	-0.04
Highest grade				
High school or equivalent	0.02	-0.01	-0.05	0.04
Some college	0.09*	-0.07	-0.05	0.11
4-year degree or higher	0.02	0.05	-0.00	0.06
Other	-0.01	-0.14	-0.00	0.08
Years since initial SSA award				
5 to 10 years	0.04	0.05	0.02	-0.06
More than 10 years	0.11**	0.17**	0.10*	-0.05
Unknown	0.00	0.00	-0.12	0.00
Self-reported reason for limitation				
Psychiatric condition	-0.09	-0.01	-0.09	0.05
Intellectual disability	-0.12	-0.23	-0.15	-0.07
Musculoskeletal condition	-0.10	-0.12	-0.03	-0.01
Sensory disorder	-0.03	-0.22	0.11	-0.10

Other	-0.04	-0.03	-0.11	-0.06
No ADL or IADL difficulties	-0.05	0.10	-0.07	-0.06
Requires assistance with at least one ADL/IADL	-0.04	-0.07	-0.05	-0.09
Medical improvement				
Expected	-0.03	-0.25*	-0.11	0.07
Possible	-0.01	-0.16*	0.01	-0.01
Missing	-0.03	-0.09	0.04	-0.05

^a Recent employment = employed at interview, worked in past six months, or worked in the calendar year before interview (2016).

Notes: ADL=activity of daily living; GED=general education development; HS=high school; IADL=instrumental activity of daily living; NA=not applicable; SGA=substantial gainful activity. * p<0.10, ** p < 0.05, *** p < 0.01.

Source: 2017 National Beneficiary Survey, weighted data.

Appendix Table A6. *Regression Estimates of the Likelihood of Experiencing an Overpayment and Resuming Benefits After Suspension among Those Experiencing a Benefit Suspension*

	Experienced DI benefit suspense		Experienced SSI payment suspense	
	Recent earnings-related overpayment	Resuming benefits after suspension	Recent earnings-related overpayment	Resuming benefits after suspension
Unweighted Number	1,425	1,425	1,175	1,175
Anticipated benefit suspension	-0.12*	-0.09	-0.00	-0.11*
Male	0.06	0.05	0.00	0.06
Age in years				
26-40	-0.14	-0.18*	-0.02	0.06
41-55	-0.15*	-0.22**	0.07	-0.17*
56 and older	-0.12	-0.22*	0.11	-0.04
Nonwhite	-0.02	0.14**	-0.06	0.20***
Hispanic or Latino	0.26*	-0.11	-0.13	-0.23**
Highest grade				
HS or equivalent	0.20**	-0.16*	0.00	-0.04
Some college	0.32***	-0.24***	0.09	-0.00
4-year degree or higher	0.31***	-0.29***	0.25*	-0.24***
Other	0.73***	0.30	0.49***	0.42*
Years since initial SSA award				
5 to 10 years	0.10	0.11	0.15	-0.06
More than 10 years	0.26***	0.16*	0.24*	0.13
Unknown	0.00	0.00	0.00	0.00
Self-reported reason for limitation				
Psychiatric condition	0.01	0.44***	-0.05	0.31***
Intellectual disability	-0.18	-0.08	-0.11	0.07
Musculoskeletal condition	0.27***	0.25**	-0.09	0.10
Sensory disorder	0.20*	0.17	-0.06	0.45***
Other	0.14	0.29***	-0.08	0.25***

No ADL or IADL difficulties	-0.17**	-0.03	-0.11	-0.20**
Requires assistance with at least one ADL/IADL	-0.08	0.03	-0.16	-0.14
Medical improvement expectation				
Expected	-0.18	-0.02	0.26*	0.14
Possible	0.01	-0.01	0.04	-0.01
Missing	0.07	-0.05	-0.05	-0.11

Note: ADL=activity of daily living; HS=high school; IADL=instrumental activity of daily living; SGA=substantial gainful activity. * $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$.

Source: 2017 National Beneficiary Survey, weighted data.

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