

Introduction

Approved Employment Networks (EN) or State Vocational Rehabilitation (VR) agencies acting as ENs (VREN) submit payment requests to the Ticket Program Manager (TPM) for the Ticket to Work program. ENs and VRENS submit these requests to TPM to receive compensation for assisting Social Security beneficiaries with disabilities, [i.e., individuals receiving Social Security Disability Insurance (SSDI) and/or Supplemental Security Income (SSI)], to maintain and advance in employment.

TPM processes these requests using all available information to determine if the EN is eligible for the payment. The information reviewed includes forms and supporting documentation the EN submits and information contained in Social Security's and TPM's data bases. Upon receipt of each payment request, Social Security's Ticket to Work system or iTOPSS assigns each claim a unique Work Case Number (WC). The WC is used in all communications related to that request. Using a WC allows TPM and the EN to exchange information associated with a payment request without exchanging any of the beneficiary's Personally Identifiable Information (PII). The use of the WC also ensures proper processing of all information submitted in connection with a particular payment and allows TPM to provide ENs with detailed information in reports by listing the status of each payment request submitted by the EN. This facilitates an EN's ability to track Ticket revenue.

TPM notifies Social Security of all approved payments via the Internet Ticket Operations and Provider Support System (iTOPSS) after processing payment requests for payment. Payments processed in this system are automatically placed on a transaction file and submitted to the Department of the Treasury (Treasury) for processing. Treasury processes each EN's payments via the Automated Clearing House (ACH) as electronic file transfers (EFT) that post directly to the EN's bank account.

When TPM denies a payment request or claim, staff assigns a payment denial reason in iTOPSS for each claim. Each denial appears in the Ticket Portal under the "List Payments Already Made to Me" screen when ENs select the option "Include Denials", using the Reference Number or Work Case Number associated with that particular payment request (claim). ENs can access the Ticket Portal 24 hours a day, seven days a week and since Social Security updates the system in real time. This page of the Ticket Portal is particularly useful because it provides information on all payment requests submitted by the EN as well as any payments made to the EN via the E-PAY process.

Overarching Tips for Avoiding Payment Denials

EN staff assigned to submit payment requests are strongly encouraged to review the following materials to gain a better understanding of Social Security's rules and policies related to payments under the Ticket to Work program and TPM's processes and procedures related to such payments.

- Review the payments information on the Ticket to Work website.

As a part of the process for preparing and submitting payment requests, staff should research the following items before submitting for a payment:

- **Ticket assignment**: Confirm that the beneficiary's Ticket was assigned to the requesting EN during the applicable claim period/month.
- **First Available Claim Month**: Confirm that first claim submitted is the month after EN's Ticket assignment date.
 - EN Ticket Assignment Date = The date the TPM receives the beneficiary's Individual Work Plan (IWP) or submits for the Ticket assignment using the electronic Ticket Assignment Request (TAR) process. For ENs that transmit IWPs to the TPM, or submit for the Ticket assignment using the TAR process, more than 14 days after the latest signature date, the EN Ticket assignment date will be the same as the date TPM receives the IWP or TAR notification.
 - Beneficiary Ticket Assignment Date = The latest signature date on the IWP.
- **Prior VR Services**: Check the Ticket Portal to determine if the beneficiary has a previous history of working with a State Vocational Rehabilitation (VR) agency and whether his/her VR case was closed with a successful closure status. If the beneficiary's prior VR services were provided under the VR Cost Reimbursement (CR) program and his/her case was closed with a successful closure status after January 2002, the Phase 1 Milestones would not be available to any EN or State VR agency that subsequently received the Ticket assignment. If the beneficiary's prior VR services were provided under the Ticket program and the beneficiary did not have any record of a VR CR case closed successful since 2002, Phase 1 Milestone payments may be available.
- **18-Month Look-Back**: Earnings at the Trial Work Level (TWL) during this period may impact the availability of some or all of the Phase 1 Milestones for that beneficiary. Be aware that Social Security's database is a living document. This means a beneficiary's earnings can appear at any time, usually months and once in a while years, after the earnings occur. ENs occasionally experience overpayments as a result of the late posting of earnings information. The Look-Back period for earnings is a maximum of 18 months prior to the Ticket assignment date. However, the Look-Back period is for months between the date of disability onset and the beneficiary's Ticket assignment date. This period could possibly be less than 18 months.
- **Documenting Earnings**: Check available sources of information on earnings to document the beneficiary's earnings during the claim period/month for which you are seeking payment.

Payment Denial Codes/Reasons

Code 1 - Ticket Terminated

- Code 2 - Beneficiary Receiving Federal Cash Benefits
- Code 4 - Earnings Do Not Meet Phase 1 Milestone Criteria
- Code 5 - Maximum Outcome Payments Made
- Code 6 – Insufficient Documentation
- Code 8 - Due to VR Services Phase 1 Milestone Can't Be Paid
- Code 9 - Other
- Code 10 - Earnings Amounts Do Not Meet Criteria for Payment
- Code 12 - Not Eligible for Payment Due to Look Back Earnings
- Code 13 - Ticket Not Assigned to EN for Request Month
- Code 14 - Claim Month Prior to July 2008
- Code 15 - No Response to Requests for Documentation
- Code 16 - Cost Reimbursement Payment Method Chosen
- Code 17 - Outcome Period Entered – Milestones Can't Be Paid
- Code 21 - Duplicate Request - Payment Already Made
- Code 22 - Plan Not Timely – Ineligible for Claim Month
- Code 23 - Cannot Pay until Month after First Assignment
- Code 24 – Did Not Render Services for Unassigned Month
- Code 25 - Contract Terminated – Ineligible for Payment
- Code 26 - Primary Evidence Required for This Claim Month
- Code 27 - Suspended or Terminated But Not Due to Work
- Code 28 – EN Only Entitled to Phase 1
- Code 29 - Outcome Only Payment Method Chosen
- Code 30 - Payments Must Be Made in Order
- Code 31 - Ticket Assigned in Error
- Code 32 - Maximum Phase 2 Milestone Payments Made

What follows is the narrative that will come up when you click on the applicable denial code/reason.

Code 1 - Ticket Terminated: This code is used to indicate that a payment has been requested on behalf of a beneficiary whose Ticket was terminated. Tickets can be terminated for a number of reasons, including a change in the person's benefit status (e.g., benefit cessation or termination based on a medical Continuing Disability Review), the maximum number of payments on that Ticket being paid out, the beneficiary reached full retirement age, or the beneficiary is deceased. A Ticket is no longer eligible for payment after it has been terminated. The last payable claim month for terminated Tickets is the month prior to the date of the Ticket termination.

Tips: If working with older beneficiaries or beneficiaries with medical conditions that may be life threatening, the EN should check the Ticket Portal for the current status of the beneficiary's Ticket prior to submitting for payment. If considering outreaching to beneficiaries 64 or older, it is important to remember that payments will stop when the beneficiary reaches his/her normal retirement age. The normal retirement age for SSDI beneficiaries is determined by Social Security and published on the Social Security Work Site (www.socialsecurity.gov/work). For SSI recipients, retirement age is when these beneficiaries turn 65. If a beneficiary is nearing retirement age, the EN may want

to consider the beneficiary's service needs and the likelihood the beneficiary will achieve earnings that would qualify for payment under the Ticket program prior to his/her Ticket terminating.

Code 2 - Beneficiary Receiving Federal Cash Benefits: This code indicates that the EN has submitted a claim for an outcome payment and the beneficiary is listed in current pay status in Social Security's records. To receive outcome payments, a beneficiary must be in a suspense or non-pay payment status due to work and earnings.

Tips: This reason was previously listed as "current pay." It was changed to clarify that the beneficiary is still receiving a Federal disability benefit. In some situations a beneficiary could have earnings above the Substantial Gainful Activity (SGA) level and the EN could have received all Phase 2 Milestones but the beneficiary is still receiving a monthly disability benefit as a result of his/her use of Social Security work incentives. Work incentives are special rules that allow a beneficiary to reduce his/her countable income based on such things as work-related expenses, putting money away to fund a Plan to Achieve Self-Support, etc. To learn more about Social Security work incentives, refer to the Social Security Red Book at www.socialsecurity.gov/redbook. The beneficiary may also remain in current pay status until Social Security performs work Continuing Disability Reviews.

Code 4 - Earnings Do Not Meet Phase 1 Milestone Criteria: This code is used only for requests for Phase 1 Milestones. It indicates that the information the EN submitted and the beneficiary's earnings records available to Social Security did not show the required TWL earnings within the required timeframe.

Tips: When submitting for Phase 1 Milestones, the EN should check to make sure the beneficiary had gross earnings at least at the TWL. In addition, for Phase 1 Milestones 2, 3 and 4, the EN should check to make sure the number of months of TWL earnings is adequate and that the earnings occurred within the designated timeframes to qualify for payment. The timeframes for these payments are:

- Phase 1 Milestone 2: Requires earnings at or above the TWL for three months within a six-month period.
- Phase 1 Milestone 3: Requires earnings at or above the TWL for six months within a 12-month period.
- Phase 1 Milestone 4: Requires earnings at or above the TWL for nine months within an 18-month period.

The qualifying months for Phase 1 Milestones are cumulative if all earnings occur within the designated timeframes. This means a break in TWL earnings may or may not necessitate starting all over again in counting the qualifying months of earnings. For example, the three months of TWL earnings that qualify for payment of Phase 1 Milestone 2 will also count towards the qualifying earnings/months for payment of Phase 1 Milestone 3 if all TWL earnings months were within 12 months of the

beneficiary's first month of TWL earnings. Sometimes a break in earnings will necessitate starting all over again in counting the 6, 12 or 18-month period required for payment.

ENs should keep track of the months a beneficiary's earnings are at or above the TWL and check those earnings against the required timeframes for payment. If a beneficiary has breaks in his/her TWL earnings or leaves a job and starts another job after a break, it may necessitate starting all over again counting the qualifying TWL earnings months.

Code 5 - Maximum Outcome Payments Made: This code indicates that all available outcome payments have been made on the beneficiary's Ticket. This denial code is also used in the interim of the Ticket being terminated for this reason.

Tips: Since payments to ENs are made as they are approved, the direct deposits or EFT payments DT makes to an EN's bank account often include multiple payments on behalf of one beneficiary as well as payments on behalf of multiple beneficiaries. Social Security also sends a Payment Processing Report to the EN by mail. This report details each transaction included in a direct deposit to the EN's bank account. The EN Payment Summary information includes the date of the payment, the Social Security SSN associated with each payment included in the summary, the payment type, the beneficiary's last name, the outcome month (if applicable), the payment code, and the amount of the payment made on behalf of that beneficiary.

An EN also has the option of subscribing to IPP.gov, a free service that provides ENs with an email notification including details on each payment included in the direct deposit from DT. While the EN Payment Processing Report confirms the date a payment was approved, the IPP.gov email notification that is sent on the day the deposit is made to the EN's bank account confirms actual receipt of the payment. Both the report and the notification are useful tools for tracking payments.

Code 6 – Insufficient Documentation: This code indicates that the EN did not respond to a request from TPM to submit additional/missing information required to process the claim. For example, the EN did not complete Section V of the Payment Request Form, or the payment request did not include an Employer-Prepared Earnings Statement or the EN Supplemental Earnings Statement.

Tip: Always respond immediately to any request from TPM for additional/missing information. TPM allows nine business days for an EN to respond before denying a payment based on missing information.

Code 8 - Due to VR Services, Phase 1 Milestone Can't Be Paid: This code, which applies only to Phase 1 Milestone payment denials, indicates that there is evidence in TPM database that the beneficiary had a record of a successful cost reimbursement case closure with a State VR agency 2002 or later but prior to assigning the Ticket to the EN.

Tip: Keep two things in mind when trying to determine whether Phase 1 Milestones are unavailable based on a beneficiary's prior VR history. First, the definition of successful closure simply means the beneficiary was working when his/her VR case was closed. There is no requirement that the beneficiary was working a certain number of hours a month/week or had earnings at a set level (e.g., TWL or SGA). Second, the prior VR services Phase 1 Milestone exclusion applies to all beneficiaries with a successful VR case closure after January 2002.

During intake, ENs should ask beneficiaries about any prior history of receiving VR services and whether they were working at the time of their VR case closure. ENs can also check the Ticket Portal for information on prior VR services and successful VR case closures. Even though an EN cannot receive Phase 1 Milestones on these cases, State VR agencies can function as natural referral sources for beneficiaries who are already employed or have a minimum of 90 days of work experience in the past. Many of these beneficiaries will need little more than quarterly contact to assess the need for additional support and assistance to maintain and advance in employment.

Many beneficiaries exiting VR services in employment have earnings at or above SGA. For these beneficiaries, the EN can begin billing for Phase 2 Milestone payments the month following the month the EN secured the Ticket assignment. Beneficiaries exiting the VR system with earnings below SGA may or may not be good candidates for the Ticket program. During intake, these beneficiaries should be screened to determine if they are interested in working above SGA with the goal of eventually earning enough to eliminate the need for disability benefits.

The potential remaining value of these Tickets is significant. In 2015, the combined value of all Phase 2 Milestones and outcomes payments was \$18,564 for SSI recipients and \$19,411 for SSDI beneficiaries.

Code 9 – Other: This code indicates that the denial is for a reason other than those covered by the other codes described here. It should be accompanied by a comment explaining the “other” reason for the denial.

Tip: An EN should look to the accompanying comments when this code appears. Those comments should provide clues as to what can be done to avoid future denials based on these reasons. If the EN does not understand the comment or the comment is not listed on the Ticket Portal please contact the EN Payments Helpdesk at enpaymentshelpdesk@maximus.com

Code 10 - Earnings Amounts Do Not Meet Criteria for Payment: This code covers a number of reasons for a payment denial, all related to the earnings not being high enough to qualify for payment or evidence of earnings not being posted to Social Security's data bases. Those reasons include the following:

1. Evidence of earnings submitted in connection with a Phase 2 Milestone payment or an Outcome payment were below applicable SGA level;

2. Evidence of earnings in Social Security's systems are below applicable SGA level;
3. EN submitted quarterly evidence of earnings which upon further review turn out to be Defense Finance and Accounting Services (DFAS) pension or retirement earnings.

Tips: Check all available sources of earnings information prior to submitting for any payment and make sure the earnings meet the criteria for payment that was in effect during the month and year for which payment is being requested. An important consideration when submitting for payment is whether the beneficiary is receiving SSDI, SSI or both (i.e., a concurrent beneficiary). Social Security uses different methods to calculate earnings depending on the type of disability benefits received.

- For beneficiaries receiving SSI benefits, determining earnings is simple because they are calculated based on the amount of earnings *paid* in the month. This means a paycheck received in early June is counted as earnings for June even if the check covers a pay period that was all or partially in May.
- For beneficiaries receiving SSDI benefits, earnings are calculated based on the amount *earned* in the month. Thus, if a pay period overlaps into a different month, a calculation must be performed to determine how much of the earnings occurred during the claim month for which payment is being requested. This is done by dividing the number of "calendar days" in the pay period into the gross pay to get an estimated daily rate of pay and then multiplying that number by the number of "calendar days" in the pay period that is in the claim month for which payment is being requested. This amount is then added to any other earnings for that month to get the total earnings for the claim month.
- For concurrent beneficiaries, Social Security has instructed TPM to calculate earnings based on either the *amount earned* or the *amount paid* in the month. In granting this authority, Social Security has given TPM the ability to use the earnings record that is most likely to meet the criteria for payment, giving TPM the ability to make payments whenever possible.
- The TPM's *Monthly Earnings Estimator* is a helpful tool that allows ENs to enter beneficiary earnings data from pay stubs and calculate earnings paid and earned for a specific claim month. It allows ENs to identify whether or not there are sufficient earnings for a particular type of claim prior to submitting payment requests. This electronic tool is available in the Information Center of the Ticket to Work website (<https://yourtickettowork.com>). Click on "Resource Documents" and look for "Payments Resources." This tool should not be used as a Supplemental Earnings Statement or an Employer Prepared Earnings Statement.

Code 12 - Not Eligible for Payment Due to Look Back Earnings: This code applies only to Phase 1 Milestone requests. It indicates that TPM found evidence that the

beneficiary had monthly earnings at or above the TWL during the 18-month period immediately prior to the Ticket assignment month and after the date of disability onset. This rule applies to the first time the Ticket was assigned to an EN (i.e., if the Ticket was previously assigned to another EN or other ENs, use the Ticket assignment date for prior EN(s)). The Look-Back Earnings requirement only applies to Tickets assigned after July 21, 2008. The following list details how a beneficiary's earnings history can result in the unavailability of some or all of the Phase 1 Milestones based on the 18-Month Look Back rule.

- Earnings at/above TWL level during month immediately prior to Ticket assignment = Phase 1 Milestone 1 not available.
- Earnings at/above TWL during 3 of the 6 months prior to Ticket assignment = Phase 1 Milestone 2 not available.
- Earnings at/above TWL during 6 of the 12 months prior to Ticket assignment = Phase 1 Milestone 3 not available.
- Earnings at/above TWL during 9 of the 18 months prior to Ticket assignment = Phase 1 Milestone 4 not available.

Since these criteria are applied independent of each other, the availability of Phase 1 Milestones 2, 3 and 4 will depend on the exact months during which the beneficiary's earnings were above the TWL.

Tips: During the intake process, ENs should discuss each beneficiary's work and earnings history during the prior 18 months. While details on earnings during this 18 month period are not required, ENs are required to explore a beneficiary's earnings during the six months immediately prior to Ticket assignment as part of the process for developing the Individual Work Plan (IWP).

If a beneficiary is not sure about his/her earnings during the 18 months prior to seeking EN services, the EN can check other available sources of earnings information prior to submitting a payment request. These sources include:

- The EN may want to secure a signed release from the beneficiary and contact the local Social Security office to request a Benefits Planning Query (BPQY) on the beneficiary. The BPQY provides information on earnings that have been posted to the beneficiary's Social Security record.
- ENs that subscribe to The Work Number, an automated employment and income verification service, can use it to check for TWL earnings during the 18 months prior to Ticket assignment. Visit www.theworknumber.com to learn more about The Work Number.

Once the requesting EN has an indication of the beneficiary's earnings during the 18 months prior to seeking services from an EN, use the handy automated tool that TPM created to assess the potential availability of the Phase 1 Milestones based on the 18-Month Look Back exclusion. Enter an "x" for each month the beneficiary had earnings at or above the TWL and the tool will automatically assess which Phase 1 Milestones are

likely to be available to your EN. The 18-Month Look Back tool is available in the Information Center on the Ticket to Work website (<https://yourtackettowork.com>). Click on “Forms” and look under “Payments.”

Code 13 - Ticket Not Assigned to EN for Request Month: This code indicates that a payment request was submitted for a month during which the EN did not have the Ticket assignment. If the EN submits for a payment request for any month prior to the EN’s Ticket assignment or if the beneficiary has never been assigned to the EN the request will be denied. Similarly, if an EN submits a payment request for a month the Ticket was assigned to a different EN or to a State VR agency, the request will be denied.

Tip: ENs should check their records to ensure that the beneficiary’s Ticket was assigned to the EN during every claim period/month for which the EN plans to submit for payment. The first month for which an EN can qualify for payment is the month following the month that the EN secured the beneficiary’s Ticket assignment.

Code 14 - Claim Month Prior to July 2008: This code indicates that an EN has submitted a request for payment for a claim month prior to implementation of the revised Ticket regulations, i.e., July 2008.

Tip: An EN should not submit payment request for work and earnings that occurred prior to July 2008. After significant advanced notice to ENs, Social Security ceased making payments for these older claim months effective March 31, 2009.

Code 15 - No Response to Request for Documentation: This denial reason is used when the EN failed to respond to a request to submit additional information or documentation.

Tips: After submitting a payment request, a Work Case Number (WC) is assigned to that particular request. When TPM receives a request for payment that does not include all of the required documentation or information, the request is either diarized or denied. If diarized, the Senior Payment Specialist assigned to process the request notifies the Payments Help Desk and an email is sent to the person the EN has designated as their Payments Contact. The WC assigned to that particular payment request is referenced in all TPM communications associated with the request. TPM gives the EN nine business days to respond to the request. If the requested information/documentation is not submitted within nine days, TPM denies the payment.

After submitting a payment request, the person designated as the EN’s Payments Contact should monitor his/her email for any response from TPM and respond immediately if additional documentation/information is requested. The EN should always reference the unique WC on all communications and related documentation and information submitted in response to a request from TPM. The use of the WC-eliminates the need to include Personally Identifiable Information (PII) in communications about payments. Although the EN has the option of resubmitting the payment request at a

later date, it simplifies and speeds up the process significantly if the EN responds immediately to all requests for additional documentation/information. If the EN's response is timely, TPM can simply process the original payment request. If the response is not timely and the payment request is denied, the EN will have to submit a new payment request that includes all of the original information plus the missing or corrected information. TPM will need to start the process over again by creating a new WC on the resubmitted request. In these instances, nothing from the original payment request can be transferred to the new payment request.

Code 16 - Cost Reimbursement Payment Method Chosen: This code, which only applies to payment requests State VR agencies submit, indicates that a request for payment under the Ticket program has been submitted on a beneficiary who is listed in TPM's database as being served under the cost reimbursement program.

Tips: When a State VR agency notifies TPM via its monthly electronic data transfer of the intent to serve a beneficiary under the CR program, that beneficiary's Ticket is placed "In-Use SVR." The VR agency should not submit payment requests under the Ticket program for these beneficiaries. Although not used often, State VR agencies do have the option of switching a beneficiary who is registered under the CR option to the Ticket assignment status during the 90-day period immediately following the date the beneficiary signed his/her Individualized Plan for Employment (IPE). If not done within this 90-day window, the option to switch from CR to Ticket assignment expires and the beneficiary must remain under the CR payment option until his/her VR case is closed. It should be noted that State VR agencies do not have the option of switching a case that has been registered as a Ticket assignment to the CR option. Thus, once a case is registered as a Ticket assignment, it will remain assigned to the VR agency until it notifies TPM to unassign the Ticket or TPM automatically unassigns the Ticket after all Phase 1 Milestones are addressed (paid, excluded, etc.) to the State VR agency that selected the service model as a Phase 1 Milestone Only EN.

Code 17 - Outcome Period Entered – Milestones Can't Be Paid: This code indicates that the beneficiary, for whom a Milestone payment (Phase 1 or Phase 2) is being requested, has had his/her cash benefits suspended due to work and earnings and entered the outcome payment period. In such cases, if the beneficiary's earnings are at or above SGA, TPM will approve an outcome payment instead of the Milestone payment requested. If the beneficiary continues working and stays off cash benefits, Social Security will issue a Milestone reconciliation payment after the EN has been approved for the 12th outcome payment on behalf of the beneficiary. The reconciliation payment is a one-time lump sum payment that equals the total amount of any unpaid available Milestone payments that the EN would otherwise have been eligible for had the beneficiary not entered into the outcome payment period prior to the EN receiving all available Milestone payments. Phase 1 Milestone payments are excluded or not available if denied due to Look-Back earnings or a successful VR closure. If the beneficiary's earnings decrease and he/she is placed back in current pay status, the EN will not qualify for another outcome payment until the beneficiary's benefits cease again due to work and earnings. At that point, the payments will pick back up on the next

outcome payment that would have been paid had the beneficiary continued in the zero cash benefits status.

Tips: If an EN submitted for a Milestone payment and receives notice that an outcome payment was made, the EN should record the claim month for which the first outcome payment was made and then track outcome payments to identify when to start looking for the reconciliation payment. If the beneficiary subsequently reduces his/her earnings to the point of having his/her monthly disability check being reinstated, the EN should not submit for any unpaid Milestone payments as TPM will have to deny them and the EN will have to wait until the beneficiary again works his/her way off benefits and generates additional outcome payments to the point of the 12th outcome payment. At that point, TPM will automatically generate a reconciliation payment based on any remaining Milestone payments that would otherwise have been due to the EN.

Code 21 - Duplicate Request - Payment Already Made: This code is used when an EN is requesting payment for a claim period/month which it previously submitted for and was approved for payment. The denial reason will list the claim period/month in question and the date the associated payment was made (i.e., claim month MM/YY was paid on MM/DD/YY).

Tip: Although an EN can and should resubmit payment requests to remedy some of the denial reasons included in this list, a second request for payment should never be submitted on a claim period/month for which the EN has already been paid. The Ticket Portal, can provide a history on all payments requested by the EN. This is a very useful tool that can be used to avoid submitting duplicate payment requests.

Code 22 - Plan Not Timely – Ineligible for Claim Month: This code indicates that the EN submitted a payment request for a claim period/month prior to the beneficiary coming to the EN for assistance, for the month during which the IWP was signed, or for the month the Ticket assignment was activated (if different than the IWP signature month). Payments Staff also use this denial reason when TPM receives IWPs more than 14 days after the latest signature date. If this situation occurs the earliest payment available would be the month after the IWP receipt date.

Tips: The Ticket assignment date determines the first month that an EN can qualify for payment under the Ticket program. The first month an EN can qualify for payment on behalf of a beneficiary is the month following the month in which the Ticket was assigned to that EN. An EN is required to report the completion of an IWP within 14 days of the date the beneficiary signs the plan. If reported within 14 days, the EN's Ticket assignment date is the IWP signature date. If reported after 14 days, the Ticket assignment date is the date the notification of the signed IWP is received by the TPM. Thus, this code may indicate that the EN failed to report the completion of the IWP within the required 14 day period. The information provided with this denial reason will indicate the actual month that the EN can first qualify for payment, indicated as mm/yy.

Submit information on a completed IWP as soon after the beneficiary signs the plan as possible. If a beneficiary contacts an EN and indicates he/she is already working, has a job offer, or will be starting a new job in the near future, the EN should ask the beneficiary to come to the office as soon as possible to develop and sign an IWP, and then immediately communicate the IWP signature date to TPM. The beneficiary's Ticket assignment date will be the date of the latest IWP signature to provide beneficiaries with CDR protection when ENs transmit IWPs or IWP information to TPM more than 14 days after the latest IWP signature.

Code 23 - Cannot Pay until Month after First Assignment: This code indicates that an EN has submitted a payment request for the month that the Ticket assignment was secured. The first month for which an EN may be eligible for any payment is the month following the month in which the Ticket was assigned to the EN (i.e., the EN's Ticket assignment date).

Tip: It is important to submit the information necessary to secure a beneficiary's Ticket assignment as soon as possible after the beneficiary has signed his/her. If an EN notifies the TPM within 14 days of the date the beneficiary (or a representative of the beneficiary) and the EN signed the IWP, TPM will assign the Ticket effective on the IWP latest signature date. If TPM is notified more than 14 days after the latest IWP signature date, the date the notification is received by TPM will be recorded as the EN Ticket assignment date instead of using the IWP signature date. The beneficiary assignment date will be the beneficiary signature date on the IWP. This rule is designed to ensure that beneficiaries have quick access to the protection from medical CDR that is associated with using the Ticket and not be penalized due to the EN's delayed submission of the IWP to TPM.

Code 24 – Did Not Render Service for Unassigned Month: This code indicates that the EN is submitting a payment request for a period or month after the Ticket was unassigned from the EN and the EN did not provide documentation of services provided in support of the payment request. This code is also used when a split payment analysis is conducted on a Ticket that was unassigned and reassigned to a different EN, and the analysis found no documentation of services provided by the EN whose payment request is being denied. In some cases, the finding of no services rendered is the result of a report from the beneficiary.

Code 25 - Contract Terminated – Ineligible for Payment: This code indicates that the EN's Blanket Purchase Agreement (BPA), EN contract or Payment Agreement has terminated or been terminated, and the EN is submitting for payment based on work and earnings that occurred after the last payable month determined. An EN must be operating under an active BPA or contract to be eligible for payment under the Ticket program. A service provider's authority to operate as an EN can be terminated if the EN is found to be fraudulent or the EN voluntarily decides to stop participating in the Ticket program.

Tip: If an organization's BPA, contract or Payment Agreement has terminated, the organization **should not** submit any requests for payment on claim periods or months that occur after the last payable month. Terminated ENs may submit for payments on behalf of beneficiaries who have Tickets that were assigned to the EN prior to the last payable date and who achieved the required levels of work and earnings to generate payment prior to the BPA/contract termination date.

If an EN's BPA, EN contract or Payment Agreement has been terminated (voluntarily or by Social Security), the EN should submit requests for any potential claims as soon as possible after the termination date. An EN can be paid for qualifying earnings achieved by the beneficiary prior to the BPA termination date as long as primary evidence of earnings is submitted and the payment request includes appropriate documentation confirming the provision of the services initially listed in the beneficiary's Individual Work Plan (IWP).

The last payable month for terminated ENs is normally the month prior to the contract termination. The last payable month could be different if the EN is terminated due to fraud or other reasons identified by Social Security's EN Contract staff.

Code 26 - Primary Evidence Required for This Claim Month: This code is only used in connection with an EN that no longer has a Blanket Purchase Agreement (BPA), EN contract or Payment Agreement in effect. An EN whose BPA, EN contract or payment agreement is terminated may submit for payment based on a beneficiary's work and earnings that occurred prior to the termination date; however, the EN must provide primary evidence of earnings with the type of payment request.

Tip: When submitting final payment requests after a BPA, EN contract or Payment Agreement has terminated, the EN must submit an Evidentiary Payment Request with accompanying primary evidence of earnings (pay stubs, earnings from The Work Number or a signed employer earnings statements).

Code 27 - Suspended or Terminated but Not Due to Work: This code indicates that an EN has submitted a payment request for an outcome payment and the associated claim month is after the beneficiary's disability benefits were suspended or terminated for any reason other than work and earnings. This code is also used when a payment request is submitted on a beneficiary who is receiving provisional benefits after applying for the Expedited Reinstatement to benefits. An EN is not eligible for payment during the period of provisional benefits.

The Ticket is still eligible for payment for months when the beneficiary has qualifying earnings prior to the month that the beneficiary's benefits were suspended or terminated status. There are many reasons that can result in the suspension or termination of disability benefits. Due to confidentiality rules, TPM does not have access to information on why a particular person's benefits have been terminated.

Tips: Disability benefits may be suspended or terminated based on the results of a medical review initiated after a beneficiary fails a Timely Progress Review (TPR). On behalf of Social Security, TPM conducts annual reviews to assess the progress of each beneficiary who is using his/her Ticket in moving towards self-supporting employment. Using the Ticket means the Ticket is either assigned to an EN or a VR EN, or the beneficiary is receiving services from a VR agency under the cost reimbursement program. The protection against medical CDRs is only in place as long as the beneficiary is meeting the timely progress criteria established in the Ticket regulations. The impact of failing a TPR is the removal of the protection from medical CDRs. Upon failing a TPR, the beneficiary is placed back in the queue for his/her next regularly scheduled medical review. Failing a TPR does not prevent a beneficiary from continuing to participate in the Ticket program or an EN from continuing to receive payment when a beneficiary achieves qualifying earnings.

If a beneficiary fails an annual TPR and then subsequently fails his/her next scheduled medical CDR, the beneficiary's eligibility for disability benefits will end and his/her Ticket will be terminated. At that time, the EN with the Ticket assignment would no longer be eligible for payment on behalf of any qualifying earnings after the Ticket termination date.

Code 28 – EN Only Entitled to Phase 1: This code indicates that an EN, a VR EN or an Indian Nation VREN has signed up for the Phase 1 Milestone only service delivery option that is available to certain trusted partners, i.e., State VR agencies, State Workforce Agencies, Workforce Investment Boards, American Job Centers funded under the Workforce Investment Act of 1998, and American Indian Tribal Projects funded under Section 121 of the Rehabilitation Act of 1973, as amended. These trusted partners are permitted to operate under this service delivery option because they are funded under performance-based grants and are administered and monitored by federal agencies that have established working relationships with Social Security. These trusted partners may choose this service delivery option since they are not designed to provide the type of long-term follow-up required under the Ticket program. As a condition of signing up for the Phase 1 Milestone only option, the EN must agree to assist the beneficiaries it works with to locate ongoing employment supports prior to case closure.

Tip: If one of these trusted partners is operating an EN under the Phase 1 Milestone only option, payment under the Ticket program will be limited to those Phase 1 Milestones that are available based on the beneficiary achieving “qualifying” work and earnings. It is important to remember that, depending on the specific circumstances of the case, available payments may be limited by the Phase 1 Milestone exclusions, i.e., the 18-Month Lookback Rule and the Prior VR services rule.

Code 29 - Outcome Only Payment Method Chosen: This code indicates that an EN that was operating under the Outcome Payment System when a beneficiary first assigned his/her Ticket to the EN is requesting a Milestone payment on behalf of that beneficiary.

Tip: Although an EN is allowed to change its elected payment system once a calendar year, each beneficiary remains under the payment system that was in effect when he/she first assigned his/her Ticket to that EN. Although most ENs stay under the same payment system from year to year, a few have opted to change. For ENs that exercise the option to change their elected payment system, a process or system should be established to keep track of which beneficiaries came in under which payment system. This might be a notation in each case file or a data element in the EN's management information system.

Code 30 - Payments Must Be Made in Order: This code indicates that the EN has submitted a request for a Phase 2 Milestone payment before all available Phase 1 Milestone payments were processed to completion.

Tips: Since Phase 1 and Phase 2 Ticket payments must be requested and processed in order, ENs are encouraged to keep track of the payment requests that they submit and the payments that they receive on behalf of each beneficiary. It is particularly important to check the status of the last payment request submitted to see if the claim was processed, denied or pending. The "List Payments Already Made To Me" is available 24 hours a day seven days a week in real time through the EN Ticket Portal, it is an easy way to check the status of previously submitted payment requests.

ENs may also want to subscribe to IPP.gov, a service that allows an EN to receive email notifications of direct deposits to the EN's bank account. The notification is sent on the same day that the deposit is received. Each IPP.gov notification contains details on each payment included in the direct deposit.

Code 31 - Ticket Assigned in Error: This code is used when an EN or a VR EN was not eligible to receive the Ticket assignment on behalf of the beneficiary for whom payment is being requested. For example, a VR EN submitted for and received cost reimbursement on behalf of a beneficiary and the Ticket was later erroneously "assigned" to the same VR agency when it opened a new case on that same beneficiary. This code is also used when an EN receives a Ticket assignment in error due to the status of the beneficiary's record at the time the Ticket was created, and the status was later updated retroactively when it was determined that the EN never should have received the Ticket assignment.

Tips: The Vocational Rehabilitation Provider Handbook, Chapter 12, Section 12.1.E.1 states the following:

"Social Security will only pay a State VR agency under one payment system per beneficiary. The State VR agency cannot assign the Ticket for EN payments when they previously served the beneficiary under cost reimbursement and were paid under cost reimbursement. If the State VR agency closes a cost reimbursement case for which they were not paid and subsequently opens a Ticket payment case on the same person, the Ticket case must be based on a new Individualized Plan for



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Employment (IPE) date, which cannot be retroactive to cover the previous period of VR.”

Since Ticket program implementation began in 2002, this provision is applied retroactively to cost reimbursement payments made since January 2002. The retroactive nature of this provision means a State VR agency should check its records when opening a new case on a beneficiary that was previously served under cost reimbursement to see if the agency actually was reimbursed. If reimbursement was received, the VR agency must elect the cost reimbursement option for that beneficiary. If reimbursement was not received, the VR agency can elect either the cost reimbursement option or the EN payment option. If the VR agency chooses the Ticket payment option for the new case, it is forfeiting the opportunity to file a cost reimbursement claim in the future on the prior period of VR services.

Code 32 - Maximum Phase 2 Milestone Payments Made: This code indicates that the maximum Phase 2 Milestone payments have been made on the beneficiary's Ticket. For example, a beneficiary may have achieved earnings and met criteria to generate payment of all eleven Phase 2 Milestone payments for someone receiving SSDI benefits or all eighteen Phase 2 Milestones payments for someone receiving SSI benefits. This code might also be the result of a beneficiary failing to report his/her earnings to the local Social Security office or the Social Security office not processing reported earnings in a timely manner to place beneficiaries in an outcome status. Both of these situations could result in the beneficiary continuing to receive monthly disability checks after benefits should have ceased due to work and earnings. Situations like this often result in overpayments to beneficiaries.

Tips: ENs are encouraged to keep track of the payments received on behalf of each beneficiary being served under the Ticket program. This can be done by accessing the “List Payments Already Made to Me” through the Ticket Portal, or by subscribing to IPP.gov, a service that allows an EN to receive email notifications of direct deposits to the EN's bank account on the same day that the deposits occur. Each IPP.gov notification contains details on each payment included in the direct deposit. One difference in these two reports is that the Ticket Portal shows the date a payment was approved while the IPP.gov notice shows the date the payment was direct deposited to the EN's bank account.

ENs should also advise beneficiaries to report their earnings to their local Social Security offices and to obtain documented evidence that they reported their earnings. This will help to avoid overpayments to beneficiaries and, if an overpayment does occur, to demonstrate the fact that their earnings were reported in a timely manner.

Last updated: July 2015